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State of Iowa
COMMISSION ON THE AGING

THE ABC'S OF AGING IN IOWA

A Reference Source

Containing Contributions
from
Many Iowans

Assembled in Preparation
for the

WHITE HOUSE CONFERENCE ON AGING

1971

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DES MOINES, IOWA

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I N T R O D U C T I O N

During the weeks and months beginning April 1970 and continuing for almost a year, the people of Iowa expressed their feelings, thinking, and hopes about the matter of living as an older person in the state and nation.

Some, leaders in state departments, federal agencies with offices in Iowa, and voluntary and private associations, responded to a request from Governor Robert D. Ray for information about aging.

Another group served as chairmen and members of task force committees which studied and made recommendations in regard to the problems of the elderly in income, health, housing, employment, nutrition, transportation, retirement, education, and spiritual well-being. Separate reports of the conclusions of these committees have been prepared.

Others, including Title III program directors, answered inquiries from the Commission on the Aging. Still more wrote spontaneously, by name or anonymously, in response to appeals in newspapers and other publications.

In several instances reports of meetings or forums about aging were received. Summaries of questionnaires, one of which was developed and circulated by two high school boys, were also provided.

Additionally, special fact-finding activities and hearings were conducted in selected communities.

In these several ways the people indicated not only what they believe about the circumstances of living as an older Iowan but also discussed public and private and local and state programs for the elderly, pointed out strengths and weaknesses of these programs, indicated new programs and services that might be needed and improvements that could be made, and suggested how the Commission on the Aging, other state departments, and federal agencies with offices in Iowa might be more helpful to people and communities.

The Commission on the Aging does not necessarily agree with all that has been said, but the many opinions expressed will serve well as aids to future planning by the Commission and also, it is hoped, by others who are interested in the field of aging.

Similar ideas from people in cities, towns and hamlets across the state appear repeatedly in these pages with certain significance. The duplication tells that the problems and desires of the elderly are practically the same wherever they live.

Sometimes in the past, programs and services have tended to separate older people as to their places of residence, urban or rural.

People should be the criterion of aging programs and services, not geographical areas, and in the following pages people in widely varying walks of Iowa life suggest why.

Their comments have been condensed with faithful effort to retain the meaning and intent of the writers.

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Contributions From Many Iowans

Adel Chamber of Commerce, Adel, Oct. 13, 1970

The Adel Chamber considers priority needs of community's older people to be income, housing, recreation Reports that a six unit elderly retirement home is being constructed with help of F.H.A. funds Would like information on helping with needs of older people

Alexander Community Club, Marlyn E. Kinsinger, President, Alexander, July 9, 1970

No real complaints from elderly Everything probably is not exactly to their liking but it is not felt any of them "are neglected either" Town and rural area seem "to be very perceptive of their problems and willing and able to cope with most of them"

Algona, Community of, D.A. Smith, City Clerk, July 7, 1970

No local programs Making an effort to include elderly on community projects A low rent housing agency for the elderly appointed and working to get a unit.

Algona Senior Citizens, Grace E. Jackman, Chairman and Agatha C. Hansen, Secretary, Algona, July 24, 1970

Recommendations:

Guaranteed annual income Reduced rates for doctor's office calls Low rent housing or a rent subsidy Light work on a part time basis A building without steps for senior citizen center Waiting rooms in business area

Alpha Iota Sorority, Grimes, Carol A. King, Secretary, Oct. 14, 1970

Members visit a Des Moines nursing home twice monthly, give manicures and visit with the elderly Plan to "adopt" an elderly couple or lady Also plan to deliver "free" donuts to nursing home if transportation can be provided.

American Academy of General Practice, Iowa Chapter of, Harold Moessner, M.D., President, Des Moines, December 11, 1970

The major problem in providing adequate health care for the elderly in Iowa is the shortage of (primary physicians,) physicians who direct the total health care of the individual person The new Department of Family Practice at the College of Medicine at Iowa City, under the leadership of Dr. Robert Rakel, will help to solve the shortage of this type of physician in Iowa At the present, the only

problem in the education of this type of doctor is the lack of family practice residency programs in the community hospitals in Iowa. Students who graduate from the University of Iowa are forced to finish their training in family medicine at hospitals in a state other than Iowa. Our state needs five or six programs in post-graduate training in family practice in the larger hospitals in various areas throughout the state The Academy of General Practice will cooperate with anyone who is interested in providing adequate health care for the aging.

American Association of Retired Persons, Paul F. Bechtold, Past President, Des Moines, June 24, 1970

Urges: - better coordination of aging agencies Promotion of better health care for all, involving prepaid, group or national insurance medical service (socialized medicine?) Utilization of the wisdom of older people about reforms of war, pollution, over population, race, cities, education, etc. Continue improving social security Transfer of retirement benefits from job to job, organization to organization Tax reforms to help older people save properties and other holdings Keep older people as first class citizens with part-time jobs, using them as speakers, musicians, etc. Income of older people should make it possible for older people to pay regular bus rates; lower bus fares are humiliating; transportation lifts are O.K. occasionally Churches and schools can help; all social problems are related to religion.

American Legion, The, Iowa Department, Glenn M. Dugger, Department Adjutant, Des Moines, May 21, 1970

Service officers of 653 posts in Iowa assist older people and orphans or widows in filing claims with Veterans Administration for obtaining compensation, pensions, etc. Department works with 99 County Soldier Relief Commissions in obtaining assistance and financial benefits Assists Iowa Soldiers Home at Marshalltown and had part in obtaining funds through legislature to build two new additions Each year recognizes at least one firm in Iowa with a plaque for efforts and programs to employing "aging class of Iowans."

American Legion Auxiliary, Inc., Department of Iowa, Ardelle M. Owen, Executive Secretary - Treasurer, Des Moines, May 27, 1970

Many units sponsor Golden Age clubs, but older people participate in all programs and the active ones are not considered as "aging" since many of them can do more than the

younger set Units cooperate with community groups in Meals on Wheels and in programs for Iowa Soldiers Home, Knoxville V.A. Hospital, Des Moines V.A. Hospital and Iowa City V.A. Hospital Hold picnics for patients and bingo parties and other activities; indoors in inclement weather, write letters and perform other services professional personnel do not have time for Ladies-in-Blue join with Legion members to form Jane and Joe teams upon retirement Conducted special "friendly visitation" project to nursing and private homes in 1970 Interested in knowing what others are doing (for older Iowans) and where "we might broaden our own programs to help others."

Ankeny Chamber of Commerce, Jerry Fulton, Executive Director,
Ankeny, July 14, 1970

Transportation is the problem most often mentioned by older people More of needs of seniors could be met if more interest was shown in Senior Citizens' organization Older citizens could be better served with a tax break on property and elimination of taxes on food and medical needs

Appanoose County Board of Supervisors, Centerville, June 11, 1970

County tax supported programs and services for older residents, in addition to Department of Social Services, include public health nursing program, and Appanoose County Home-making Services, Inc. within the public health nursing service Have not had "any particular, specific indication that people in county will work very vigorously towards achieving other than health services and possibly federal housing" Have had active OEO program which serves many older Iowans; it is needed and wanted, but "is practically non-functioning" County could "proceed to develop new programs as well as improve existing ones" but taxes and amount of money available through taxation is very limited.

Health board is finding it difficult to stay within budget Have general fund which is up to millage limit No particular resources available unless legislation would permit levying money into other areas.

Feel that state agencies as well as Commission on the Aging and our (Iowa) headquartered federal agencies could be more inquisitive into problems of rural older people, particularly in "areas such as ours where tax supported programs do not appear to be fiscally possible with other current expenditures with the government"

Appanoose County Extension District - I.S.U. and U.S.D.A.
Cooperating, Centerville, Mrs. Inga O. Eddy, Extension Home
Economist

State meeting of the Iowa Home Economics Assn. had an exhibit of resources for the Aging Furnished list of where all materials could be obtained State newsletter mailed some information to all members a year ago Newsletter is written for the 11 - county area Copies are sent to senior citizens who request them Have cooperated with Commission on the Aging They have helped publicize programs and to ask for special resources where requests have been made

Belmond Area Chamber of Commerce, E.J. Elliott, Secretary, Belmond,
July 21, 1970

Priority need - senior citizens club with meeting place No vacant buildings since 1966 tornado but "if a building or rooms do become available, "club could be organized "very quickly" More frequent calls by state and federal agencies and "presentation of plans to help the aged might get something done."

Bidwell - Riverside Center, Dorothy W. Hatch, Director, Des Moines,
July 2, 1970

Income must either be increased or cost of necessities must be decreased to be comparable to incomes (of older people) Additional insurance should be mandatory for those on social security and medicare Medicaid costs are too high Visiting nurses could eliminate some hospitalization costs Low cost housing is a priority Desirable employment needed for emotional and financial well-being Those interested in adult education in earlier years will continue after retirement Churches' responsibility should be emphasized Older people are prone to starches and sweets A volunteer transportation system on call should be organized The basic needs of those who have to live on \$113.00 per month are not improved Commission on the Aging is needed as a coordinator and a legislative voice

Blockton, Community of, Betty Schoenmann, Clerk, August 6, 1970

No planned programs for the aging Do not anticipate any in the near future.

Boone County Chapter Retired Teachers, Lenore Wyckoff, President,
Boone, December 1, 1970

No definite programs or services No recreational or work

centers O.E.O. provides "Meals-on-Wheels" and home-maker service in Boone and Ogden Adequate housing is a problem Rental apartments are too high for what people receive There are low-rent housing facilities in Ogden, Pilot Mound, and Boxholm Boone is now constructing a 72 unit housing complex Churches should get more involved in aging programs

Britt, Community of, Ray S. Baker, Mayor, June 3, 1970

No special requests (from elderly) outside of welfare needs and they are met out of Garner (county seat) Low income housing agency ready to make application to federal government.

Britt Senior Citizens Club, Mrs. Edna M. Enfield, President, June 29, 1970

Primarily a social club Help with community projects individually, but not just as a club project Many club members lack the income to help with other projects.

Church Women United - Cedar Falls, Mrs. Perry H. Grier, July 16, 1970

Work closely with Northeast Iowa Council on Aging, Waterloo Visitation program to all retirement and nursing homes Each month a church is responsible for group entertainment and service Solicit for and deliver "Meals on Wheels" "Hello Daily" project, joint effort with Council on Aging Would welcome new suggestions and service ideas.

Clarence, anonymous, April 25, 1970

Industry should take a longer look at their policy of rigid retirement (at a stated age) They are losers in letting competent workers out of their gates I have worked almost as many years as my husband in gainful employment and yet my Social Security checks are just half of the amount my husband draws Limiting the amount a person on Social Security can earn without lessening Social Security penalizes persons who want to work Would like to see automatic Social Security increases with rising cost of living Would like to see adequate medical and hospital care available to all people, regardless of age Would like to see less expensive retirement homes.

Clarence, Community of, Paul W. Busching, Mayor, June 13, 1970

No welfare fund Financial needs pretty well taken care of as long as elderly can take care of themselves or live

with relatives Have a modern non-profit nursing home with some welfare patients Can't take more unless Social welfare willing to pay more The town has a new municipal building Kitchen facilities, etc. available to all age groups The elderly meet there semi-monthly

Clarinda Chamber of Commerce, George W. Ritson, Manager, Clarinda, June 30, 1970

No. 1 need in community - low rent housing for low income elderly Hope for building funds in 1971 Also need place for older people for recreation Senior citizens have formed, also have 60 Up Club, but many cannot afford dues The chamber, city government, and senior citizens' organizations wish information about "assistance and programs that are available to better their way of living"

Clarke Community Center, Carmal Harger, Osceola, June 24, 1970

Suggests that elderly purchase a smaller amount of food stamps Points to the high cost of medicine and doctor fees Need low-rent housing Increased social security benefits are deducted from welfare grant which offsets the intended increase Need a larger center for meetings.

Clay County Department of Social Services, Eugene C. Dalager, Social Worker I, Spencer, October 20, 1970

At present Clay County and City of Spencer pay \$75 per month to Senior Citizens Center, each paying half Club has 200 members, provides something to do in spare time YMCA and YWCA offer services free to anyone over 65 Older citizens need and want - low rent housing, room and board homes, Foster Homes for the Aged, Volunteers, transportation, phone visits, cleaning, Meals on Wheels, and legal help "If these things are going to get done, they must do for themselves and make some noise Elderly people have quit talking as no one would listen. People are now starting to listen. Solution to problems will take money and many man hours of work Right now neither is being provided".... One of the biggest things that can be done here would be to make known what the Commission on the Aging, other state agencies, and Iowa - headquartered federal agencies can and will do to serve the aging.

Clayton County Board of Supervisors, Kermit Klinge, Chairman,
Elkader, May 22, 1970

Operations of Clayton County Home, Clayton County Mental Health Institute, Home Makers Service and County Nursing Service are satisfactory and "in most cases we are taking care of elderly in a reasonable manner" Have made improvements in these facilities and will continue so that these places will be desirable and pleasant to live in

Clinton Board of Park Commissioners, Mrs. Edna Hartzell, Program Director; Community Action, Charles Varney; Clinton County Department of Social Services, Janet J. Easter, Homemaker Administrator; First United Methodist Church, Rev. Ralph E. Baker; Viola Juehring; Riverside Presbyterian Church, Rev. James Hartley; Sacred Heart Rectory, Rev. Charles B. Greiner; The Sarah Harding Home, Mrs. Helen McCutcheon, R.N., Clinton, June 29 - August 10, 1970

Items excerpted from letters received from persons above -

INCOME Social Security payments too low for comfortable living, especially where there is only one person in household income is on top of list of needs of the elderly Should be double homestead exemption for those over 65

HEALTH Need better preventive measures and doctors who will make housecalls Hospitals should have resident doctor for prompt service and admission without "a lot of red tape" More medical help should be given to aged or at least some sort of subsidy to help them pay for expenses Very poor or those on low fixed incomes cannot get into nursing homes because of high cost Lack of nursing home beds in community as well as facilities for extended care for ailing elderly Some individuals or couples belong in nursing or custodial homes but refuse to go and families refuse to let them go; this results in need for 24 hour care which neither Homemaker Service nor other agencies can give; such people end up with unsanitary living conditions, eating uncooked foods, especially when bad eye sight is involved, taking wrong medicine, falling, leaving gas on stove, unsanitary toilet habits, etc. Something needs to be done by volunteers or organized groups for those who are too ill to leave their own home Those who cannot afford nursing homes are oftentimes referred to County Home which means there is seldom a vacant bed or room County home is expanding but still need more low income care Health care "viewed as being fair" With restrictions on Medicare and tightening of United Fund, financial assistance from Commission on the Aging would be

welcome VNA providing information about Medicare to elderly VNA program puts particular emphasis on senior citizens Need to have medicines included in Medicare

HOUSING Clinton County Home, " impressed with how clean and orderly it is kept" Housing for elderly is long overdue Also need a true freezing of property tax, not like it is now There is lack of custodial or nursing home care for married couples who wish to live together Need more help along line of aiding old people who live in rundown homes and apartments and are unable to even keep them clean Need low cost housing for seniors and individual homes or apartments for married couples Home-care (housekeeping service) for those who are not able to keep up with daily chores is an unmet need Older people prefer chance to use their own furniture, do not want high rise apartments or elevators, like a sliding housing cost scale related to income.

EMPLOYMENT Most senior citizens unable to work but those that can probably could obtain employment through the Employment Service office

EDUCATION Need lectures, possibly on banking, swindling, Medicare, Medicaid, medical aid, home nursing, home care services, and meals-on-wheels Cost of educational programs often too high

SPIRITUAL This and church involvement in aging programs
WELL BEING and services should be covered by individual churches and Ministerial Association
Older people being visited on "limited basis" More visiting needed to help them overcome loneliness Churches thought "to be doing a good job"

RETIREMENT Need to search out and involve retired business-
ACTIVITIES men, industrialists and others with talents and training in business to help elderly with personal problems, particularly with the many forms required of them by the government Recreation for aged in Clinton, "good, but it's mostly for the silver spoon people" Need to furnish activities to keep older people active, more volunteer groups to visit and entertain elderly and take them for rides Old folks' homes in Clinton should work together and share things More senior citizen clubs needed Reduced rates in entertainment field

NUTRITION Mobile Meals of Clinton combines three segments of community: food preparation staffs of Jane Lamb and Mercy Hospitals, "home-bound" recipient of

the daily hot meal; and volunteer driver who delivers noon meal Need to find way to provide mobile meals for those who can't pay Need continued operation of meals-on-wheels program Meals-on-wheels excellent but it hasn't a broad enough scope Cost of food stamps is problem Supplemental food program "should be instrumented through a grant to Iowa East Central T.R.A.I.N. similar to program going on at present time for low income mothers" Lot of food being wasted by elderly on food stamp program who buy too much food Many elderly eat light meals, sometimes snacking four or five times during the day with no apparent pattern to their eating habits Adapting meals-on-wheels to their schedule does not work too well as it is, apparently, too much food for them at one time

TRANSPORTATION Evening bus service needed and reduced bus and taxi rates Aged being transported to church services and card parties by one group in community Transportation is costly and some are not mobile or agile enough to ride city buses Food stamps available but transportation to get them and buying groceries is a problem Buses - many cannot manage high steps without help and buses don't always come close enough to the curb; drivers on southside leave elderly off in front of homes rather than at designated stops Taxi drivers at one time helped carry packages of elderly into house, now there is a 25¢ per sack charge beyond the regular fare

OTHER Senior citizens should be made to feel they are important, needed, and have a place in society Power of the ballot box: older people forming a coalition would have a "tremendous impact at our legislative levels, city-county, state, and federal Problems in connection with programs and services for the aging - apathy, getting people to conduct surveys, involving the aging Telephone calls should be made to elderly to learn of their needs Need a bureau where older people can call and be referred to proper channels for advice and help on any problem Most of those working on aging programs and services are not aware of other programs underway; more could be done if programs were organized and coordinated by a central office or coordinator "I see Clinton expanding in many directions and beginning to offer its senior citizens a great deal more - beautiful new nursing homes, a recreation center, and people who are becoming more interested in their plight and caring more about their welfare" Many of us have fallen into trap of wanting to do something for the elderly rather than of participants The elderly who are not mobile or cannot pay have been side-tracked.

Clinton Chamber of Commerce, Howard K. Knutson, President, Clinton,
August 17, 1970

Reports available services for older people include two new hospitals with 450 beds, Visiting Nursing Association, County Health Nurse, City Ambulance Service, County Home at Charlotte, Mt. Alverno Residence for Retired Citizens which has new building nearing completion, Sarah Harding Home for the Aged with a new addition under construction Also a Senior Citizens group sponsored by Clinton Park and Recreation Department with activities at new Ericksen Community Center; Mobile Meals, hot noon meal prepared at both hospitals and delivered to elderly for a small fee by inter-church, inter-club representatives "Fairly adequate city bus service and taxi service for those who don't drive" Provision for double homestead exemption on property tax for over-65 homeowners who live in home, claim homestead exemption, and earnings qualify them for double exemption.

Needs to be met would include "good low cost housing for elderly More public buildings with easy accessibility (Post Office, Main Library, Auditorium have steps making it difficult for elderly and disabled to enter) Though Social Security, Medicare, etc. are helpful, high cost of living, being ill, and dying pose real threat to savings of elderly Elderly have feeling of being "alone - no longer needed, no one cares" Other cities have volunteer telephone programs.

Community Action Program, Dubuque, Delaware, and Jackson Counties,
James W. Platt, Executive Director, Dubuque, July 6, 1970

Twenty-one clubs of senior citizens Over 1,000 participants in 21 communities Six local donated buildings used as centers. Various programs, leisure time activities most successful. One rural community (Dubuque Co.) plans local millage for activities. C.A.P. developed Tri-County Senior Citizens Corp. It has a board of directors Articles of Incorporation completed with state of Iowa C.A.P. is developing funding package for programs from H.E.W. - Department of Labor, O.E.O. and local city and county in-kind cash donations. O.E.O. will give at least \$20,000.00 for the corporation to develop further nutritional and educational centers To meet the needs throughout the rural and urban areas. Priorities of the elderly, (1) adequate housing, (2) nutritional and health needs and transportation. Thinks Commission on the Aging has served more middle and upper income groups of senior citizens It has not met the needs of entire senior citizens population. An action oriented commission and staff would be more useful. Federal, state and local funds limited

Need for development of resources for priority needs. Need for complete redirection of State Commission on the Aging and its involvement with other agencies for more realistic systems to meet the unfulfilled needs of the elderly.

Community Service Council, Inc., William Bartlett, Executive Director, Marshalltown, July 17, 1970

Priority needs of senior citizens of Marshalltown seem at present to be housing (well elderly and extended care) and recreational centers At present, Marshalltown has Meals on Wheels and Home Health Aides, directed by the Visiting Nurses Association Meals program has grown from ten to twenty clients daily Most of the senior citizens have their individual initiative groups and develop shuffle board parties and various other entertainment Older citizens are undertaking a home for the well elderly and ... a Senior Citizens Drop in Center, Recreation The Community Service Council Committee on Aging continually reviews and studies the existing programs and seeks new and improved programs for senior citizens The Commission on Aging and other state and federal agencies should work with local planning councils where these exist Government agencies should make money available only after a local study group, such as the council, has recommended the program and service. Too much red tape is involved when seeking state and federal aid.

Co-operative Extension Service - Iowa State University, Marvin A. Anderson, Dean and Director, June 24, 1970

National office provided a background statement on the White House Conference on Aging Requested to provide chairmanship of Nutrition Working Task Force As Commission on the Aging develops plans from time to time, they should stand ready to be of assistance in relationship to their resources.

Council Bluffs, Community of, Kenneth G. Jensen, Mayor, June 9, 1970

City is accepting responsibilities to older people in a growing way Recreation, health and public works departments are involved. Senior Citizens Program varies with the seasons, includes dinners, trips, meetings, seminars Senior Citizens Newsletter published monthly. Protective care through health inspection and nursing services. Provide street maintenance and weed control for safety -- programs are successful Number of people benefiting on the increase City program is complemented by Southwest Iowa Area Council on Aging In immediate future expect to expand and improve existing plans and programs but not receptive

to any new major programs These will be dependent upon federal or state assistance or both.

Cresco Senior Citizens Club, Mrs. Mildred Mettlin, Mrs. W.A. Mohs, Mrs. Abbie Peter, Mrs. Ernest Peter, Cresco, July 16, 1970

Most need more social security Property tax relief needed Homemaker-Home Health Service is available A ten unit low cost housing project is underway Craft work available during winter Some transportation provided for those attending church "Meals-on-Wheels" needed The present center is adequate Taxi service needed.

Davenport, anonymous, no date

Dollar saved is not worth a dollar at today's prices people living longer, using up savings Medicare - helpful for acute illness, but "biggest financial problem is still the long term chronic illness" Severe blow to aged when Medicare cut back on payments for home health care and extended care Rent and taxes are out of proportion to income of older people Housing inadequate even at high cost Many are shut-in because they live upstairs and cannot climb steps Lack of one-story homes and apartments with elevators More housing developments within price range of elderly are needed Many older people have productive years to raise limit on earnings to about \$3000 Many do not eat properly because of loneliness, poor digestion, poor teeth, lack of energy to prepare food, and finances Many are unable to drive Buses are not always the answer because they do not run when and where needed Special taxi rate would be a help Also if drivers would help people inside and outside of house FISH is helpful but only on emergency basis Visiting Nurses, Homemaker Service, Meals Service, Social Services, Social Security, and Scott County Commission on the Aging serve older people but all are restricted by a lack of sufficient funds.

Decatur County, community unspecified, anonymous man 80 years of age, July 7, 1970

In general "I think we are being treated very well" Would be helpful to increase Social Security Loneliness is a problem, would be helpful to have more home visits

Decatur County Older Americans Forum, Leon, Sept. 26, 1970

Suggested solutions to problems of:

1. Income
Increase social security payments so every senior citizen has a minimum of \$100 a month Prohibit cutting one benefit when another is raised Freeze (property) taxes after 65 years of age Lower postage rates for the elderly poor
2. Health
Extension of Meals-on-Wheels program Nutrition classes National standardization of drug prices and of writing prescriptions Have drug costs covered by Medicare Delivery service from drug stores Petition AMA for hospital recognition of osteopaths and chiropractors
3. Transportation
Improve sidewalks Community organizations hire buses Special taxi rates at slack times of the day Allow purchase of taxi script at a discount Petition taxi service for group rates Volunteer transportation with small donation by recipient to help with gas
4. Housing
Construction of low-income housing for senior citizens Find someone to move in with lonely people, perhaps a student A program of volunteer or low-cost repair and maintenance service
5. Loneliness
Volunteers visiting of shut-in Take lonely people to visit other lonely people Invite elderly into homes for meals Take them to community events and for car rides Letter writing Volunteers run errands for shut-ins "Crosslines" Use newspapers and posters to advertise events and services available Senior citizens newsletters

6. Employment and Education
Volunteer work in community Take volunteer work to an elderly shut-in Classes in crafts and hobbies Training for specialized jobs Starting own businesses Help with marketing goods Pre-Retirement programs Free passes to school events Educational radio programs directed toward the interest of seniors Organized recreational programs

Delta Kappa Gamma, Miss Viola Karstens, Manning, July 1, 1970

Local chapter entertains retired teachers.

Department of Housing and Urban Development, Federal Housing Administration, Nate Ruben, Director, Des Moines, December 15, 1970

FHA has been seriously restricted in the use of Section 236 funding for elderly projects in this fiscal year. This has been occasioned by the high national commitment that was made against these funds because of existing projects in the pipeline. FHA plans to plea for serious consideration for extra funding for elderly housing projects in the next fiscal year.

Iowa should take advantage of all forms of financing that are available to assist in developing the much needed housing for the elderly. Cities must take a hard look at public housing for the elderly. Small towns should take advantage of the Farmers Home Administration program and Federal Housing programs also.

A uniform state building code could have a beneficial effect on all housing as well as housing for the elderly. The present hodgepodge of codes in Iowa is very restrictive and an up-to-date state code would reduce costs by permitting use of some of the newer cost saving materials

Department of Health, Education, and Welfare, Public Health Service, Food and Drug Administration, E. C. Claussen, Resident Inspector, Des Moines, January 25, 1971

The administration is responsible for assuring under the Federal Food, Drug and Cosmetic Act that foods are safe, pure, and wholesome; that drugs and therapeutic devices are safe and effective; that cosmetics are safe; and that all these are honestly and informatively labeled and packaged. In addition, it has broad responsibilities in other areas of consumer protection: Hazardous substances, poisons, and pesticides as well as other consumer products used in and around the home which may present hazards to the user.

Through resident posts in Cedar Rapids, Davenport, Des Moines, and Sioux City, inspectors carry out a continuing surveillance program to protect the consumer from adulterated, contaminated, or misbranded foods; unsafe or ineffective drugs and medical devices; unsafe cosmetics; and hazardous household products. These activities are carried out through inspections of manufacturers, packagers and distributors, collection of samples to demonstrate violations, and investigations of consumer complaints.

Each of the above activities has an impact on the health and welfare of the older citizen as well as citizens as a whole.

The Kansas City field office of the Food and Drug Administration through its consumer specialists, carries out an active consumer education program in Iowa and in regional states The program for the older citizen includes speeches, radio-TV appearances, educational workshops for senior citizen educators, quackery seminars, exhibits, and providing of program material for club meetings and other planned projects

A film "The Health Fraud Racket" is available for use with the aged. "Dr. Quack's Clinic," a slide series with narration, points out fakes and swindles in the health field. Transparencies for use on an overhead projector include "How Safe are our Drugs" and "Drugs And Our Body."

The consumer specialists plan to continue their cooperative work with the State Divisions of Aging in the district, the Extension Home Economics Specialists in Aging, and other existing state aging organizations

Department of Health, Education, and Welfare, Social Security Administration, LeRoy T. Larson, Acting District Manager, Des Moines, February 16, 1971

The Social Security Program provides monthly benefits for retired workers and their dependents, for disabled workers and their dependents, for survivors of deceased workers, and hospital and medical insurance under Medicare. As of June 30, 1970, 413,291 Iowans were receiving a monthly Social Security benefit. Of this total, 222,401 were retired workers, age 62 or older. These retired workers were receiving cash benefits totaling \$25,700.00 each month On the national level, all indications are that there will be major Social Security legislation An across-the-board benefit increase and a liberalization of the retirement test is expected The District office recently instituted the "teleservice" concept in the 13 county service area The "teleservice" is now a nation-wide policy and is expected to provide more efficient and convenient service to the public. As a result, many matters, including the filing of claims applications, are conveniently handled by telephone.

Dietrich, Hilda, age 81, Dubuque, Sept. 24, 1970

Extra expenses, as for uncovered hospital care, must come from savings (which are getting smaller) or must give up buying clothes All (of my) government bonds redeemed

House taxes (were) frozen but Iowa legislature has taken off the freeze Can't get to church nor anywhere evenings because buses do not run after 6 p.m.

Dolores, Sister, Davenport, Aug. 23, 1970

Recommends setting up for the older people "coordinating agencies throughout the state (representing all the agencies) with counselors with authority to issue specific needed forms and give assistance in filling out forms when needed" Counselors available to go to elderly citizen if necessary

Dubuque, anonymous, May 12, 1970

Consideration for older laborers, teachers, office employees is often at low ebb People on the job fail to appreciate that business and education were built to present state by the ones about to retire Older people might have years of happiness if their past achievements were recognized in some small way, such as asking them to substitute on the job for a person who is ill, asking them to contribute advice or use them in an advisory capacity Our government could put some of its billions (on help for the poor) instead of trying to explore the moon.

Dubuque, anonymous, letter, no date

"Project Concern," a local Title III project, provided a balanced meal to the elderly writer after hospitalization "with a cheerful smile" and it was "face-saving as well as nourishing" Project is "a place to turn when in trouble" Their telephone service is valuable to lonely people in several ways

Earlham Care Program, Mary Smith, Director, Earlham, August 19, 1970

Low rent housing is enjoyed A large percentage are unemployable A taxi-service handled by retired persons works very well An "over 60" party once a month Six county Spring Festival annually A county Covered Bridge Festival in the fall Encourage and provide transportation to Pella Tulip Festival Services are self-supporting with the aid of Earlham care office for meeting place

Early Seek and Share Club, Mrs. Lester Betten, Early, July 13, 1970

Income is inadequate No facility for continuing education Employment is problem in small town Church facilities are adequate Most depend on friends or relatives for transportation Town provides a meeting place

Crafts is a favorite of the seniors who attend A six unit housing project is underway

Easter Seal Society, Scott F. Wagler, Jr., Deputy Executive Director, Des Moines, December 8, 1970

Recommend additional public health nurses, lower drug costs, help in purchasing prescribed equipment and treatment with emphasis on eye glasses, hearing aids, and dental care

Extension Service, University of Northern Iowa, Raymond J. Schlicher, Director, Cedar Falls, January 21, 1971

- A. Existing programs and services relating to elderly
 - 1. Correspondence study programs.
 - 2. Extension (off-campus), campus night and Saturday classes, radio and TV programs.
 - 3. Non-credit "Community classes" are organized upon request.
 - 4. Speakers made available to homes for the elderly.
 - 5. Participation in the Iowa Arts Council and in Title I. Higher Education Act of 1965 makes participation in a variety of programs possible.
 - 6. A current program in continuing education for mature women.
 - 7. Assist adults of all ages to improve their skills and knowledge through seminars, workshops, and conferences.

- B. Comment on plans for improving these or developing new ones
 - 1. We expect to work with people who are in their later years as we have opportunity. We will expand and increase our efforts as requests for service are received. The only foreseeable limitation is financial resources.
 - 2. Currently we are in the process of working on plans to cooperate with the newly organized Black Hawk chapter of American Association of Retired Persons.

- C. What should Iowa do to better serve its older residents in the field of extension services?
 - 1. Move more rapidly to make state educational TV channel reception available to all areas of the state.
 - 2. Increase the knowledge of existing services available to older people such as a pamphlet listing the sources of assistance in educational and cultural areas.
 - 3. In-service and pre-service training for those working with aging persons.
 - 4. Wider circulation of federal HEW News Roundup for Region VII
 - 5. Develop ways and means for Iowa Commission on the Aging to work closely with the Regents' institutions Extension personnel and the Directors of Adult Education in the Area Vocational Schools and community colleges.

Fairfield Chamber of Commerce, R. B. Cox, Executive Vice President,
Allen Pedrick, Chairman, Low Rent Committee, Fairfield, July 8, 1970

Seeking to provide some type of low rent housing for the elderly 300 would appear to qualify, according to survey that has been made In process of completing HUD forms for initial program of 100 low rent units with provision to expand to 300 units in future

First United Methodist Church, Mrs. Grace Durkin, Boone,
August 31, 1970

Medical rates are too high Inflation is a problem Meaningful employment needed for retired people Television could be used to teach new hobbies and interests to the Aging Programs and services include Time to Share - Church Women United; Y.W.C.A. weekly card party and lunch; Gray Ladies; county home visitation; voluntary transportation service

Fort Dodge Chamber of Commerce, Quinn Johnson, Executive Vice President,
Fort Dodge, July 2, 1970

For most part, needs of elderly are being adequately met by existing agencies Many older people are self-sufficient and do not desire to have people from agencies interfering with their activities Not necessary for federal agencies to take over the complete control of lives of all aged people Every possible assistance should be given those who must depend upon various local, state and federal agencies for survival There is need for place where elderly may gather to meet, play cards or simply just visit No funding readily available for securing location, paying rent or salary of someone to supervise it but such a place could become a reality as result of a housing for elderly project underway in the city

Fort Madison, Community of, Gordon M. Lane, Mayor, June 2, 1970

Seniors are just getting active Real spark has been their own campaign to merchants for special discounts No tax supported programs Contemplating donating a building for seniors Tourism activity has attracted a few elderly to greet people in parks, visit about community, attractions, pass out brochures, etc. Plan to bring civic organizations into assistance and entertainment programs Those people think Commission on the Aging should provide equipment they can't afford for a meeting place, including capital improvements Any suggestions from Commission on the Aging will be appreciated

Franklin County Board of Supervisors, E. A. Fredericks, Chairman,
Hampton, June 11, 1970

Feel that no one in county suffers because of lack of financial assistance Meals on Wheels program, community supported, meeting needs of those who are unable to prepare own meals or go to restaurants Active Senior Citizen program Full-time public health nurse An integrated county and Department of Social Services is most aware of older citizens in county and present programs are meeting needs of people

Golden Age Cooperative Board, Mrs. Walter Meads, Executive Secretary,
Ames, June 27, 1970

The high cost of health facilities takes a disproportionate slice of low incomes Most seniors can't drive cars and bus service is inadequate, expensive and, after 7 p.m. in Ames, non-existent The Golden Age Co-operative Board brings together the activities of Golden Agers of Ames. The Board is made up of representatives of the service clubs of Ames.

Golden Aires Club, Mrs. Fonta Campain, President, Bedford, June 29, 1970

Programs have included instruction on making a will, medicare, Social Security. The club does not have the cooperation of town or churches Need low-rent housing and apartments with fewer steps

Golden Circle Club, Mrs. O. L. Deming, President, Carroll,
June 30, 1970

Lonely men need more recreation than pool hall and taverns provide

Gilmore City, Community of, Dorothy N. Gleason, Town Clerk, June 5, 1970

O.E.O. helped form senior citizens group Furnished much equipment. Town Council bought a building Paid for some repairs Also will budget \$1,000.00 a year

Gray, Community of, Floyd B. Boers, clerk, June 17, 1970

No program or services for elderly Needs filled by programs in Audubon and Manning

Retirement income, Social Security benefits and other pensions are low. Liability to chronic illness and disabling conditions is certain Rapid increase in 75+ group Many more three and four generation households exist today. A special service unit is needed A center also needed in downtown area for older adults to stop in or call to obtain housing information, health service information, home health agency referral, welfare information, Social Security information and referral, consumer protection information Possibly visual and hearing screening. A mobile unit should also be available for shopping centers or other concentrations of people. These units to be staffed by professionals and volunteers; churches, clergy and membership. Develop a transportation system subsidized by tax support, assuming church attendance, social gatherings, shopping, etc. Obtain health insurance benefits under medicare to pay for custodial care and home health agency services through social action and Legislation committee of the Community Planning Council.

Retirement

People reaching retirement need purposeful, satisfactory activity Some need employment. These people are almost as able as they were prior to age 60 but have not learned how to use their leisure time enjoyably A need to place senior citizens in volunteer activity. Need for coordination and planning of all resources for recreation for the aged. This should be publicized and so far as possible implementation should be done by the aged Churches, clergy and membership should be recruited and trained to place volunteers in pre-retirement as well as retirement period activities.

Housing

Often makes the difference if a person can live independently with ability to climb stairs, maintain repairs, shovel snow, etc. Funds to pay for housing and supply of housing are important factors Special knowledge should be developed as to housing needs Public housing should be sought Physical planning and zoning should consider the needs Accessibility to health resources should be considered for location of housing projects. Special allowances for living independently should be considered as a way of preventing institutional care. Some aged on marginal or sub-marginal incomes experience difficulty in finding suitable low cost housing Most want to stay in own homes rather than retirement homes

Health Matters - Chronic Illnesses

Prevention and control of chronic disease problems emerge as the most pressing health needs here. Heart, stroke, cancer, and related diseases are the most prevalent of chronic diseases An organized community program in this regard becomes imperative due to increasing numbers of aged who are liable to these disabilities Need for development of an organized, continuous program for prevention and control and a maintenance program with special emphasis on service for the medically indigent adult can be accomplished: - 1. Short term home service around the clock, seven day a week basis. 2. Congregate living residences be provided medical supervision as part of residential service. 4. Home service be expanded by addition of occupational and recreational social service and friendly visiting Need for foster adult program. Would assist some single individuals who are aged or chronically ill and unable to live independently to have substitute family care and avoid congregate living if not needed. Health Planning Council of Central Iowa now reviewing and exploring criteria for foster adult home care. This should be developed Add continuum for care of chronically ill and aged especially those suffering from heart, stroke, cancer and related diseases. Manpower shortages can be greatly compensated by volunteer service by recruitment and training. The volunteer in turn receives a sense of satisfaction and participation in the community. The chronically ill aged, suffering from the aforementioned diseases received Handyman Service i.e. yard work, snow removal, storm and screen windows and other special tasks. Mobile meals also were made available and served. These are now being handled by Des Moines - Polk County Home Care - Homemaker Service. Transportation survey indicated a need for transportation for the chronically ill and aged. Broadlawns plans to provide emergency transportation (other than ambulance) for evenings and week ends Greater Des Moines United Way has purchased a "Busmobile" which has been put at the disposal of agencies needing assistance in transporting patients.

Grinnell, Community of, Elston K. Bowers, Director of Recreation,
June 18, 1970

Two tax supported senior citizens clubs. There seems a need for a "hot meal" program Also "transportation stamps" like food stamps. Elderly centers should participate in planning and defining programs, local, state and federal agencies can do a better job of disseminating information concerning existing grants available.

Guthrie Center, Community of, L. L. Reed, Mayor, June 11, 1970

No local tax supported programs. Low rent housing needed, is now under study. The Commission on the Aging should be able to improve Medicare payments.

Hartley, Community of, Lyla M. Balliet, Town Clerk

Town group is taking hot dinners to older people Senior Citizens meet in community building However, many older people live alone, aren't able to get out They need sunshine and happiness too.

Hiawatha, Community of, M. L. Albaugh, Mayor, June 17, 1970

The mayor states that Hiawatha is a young community with no aged relief problems and he does not foresee problems in the future.

Higher Education Facilities, Commission of the, State of Iowa
Norman W. Kladstrup, Executive Director, Des Moines, December 31, 1970

For the elderly citizenry, the goal of the state government and the institutions of higher education should include a means of inducing them to pursue "continuing education" opportunities as well as to provide the educational facilities.

The state should not lose sight of the contributions the older citizens can make to society Their guidance and counsel should be vigorously solicited.

Independence, Community of, Henry M. Funk, Mayor, June 5, 1970

The community does not have many programs for elderly Need a nursing home and a low rent housing unit for the elderly. The chamber of commerce and Buchanan County Neighborhood Center have been working in these areas.

Institute of Gerontology, The University of Iowa, W. W. Morris, Ph. D.,
Director, Iowa City, Iowa February 8, 1971

The Institute has conducted, since the Spring of 1963, on campus, annual five-week training courses for nursing and retirement home administrators; five annual advanced training institutes have been held on campus in the fall; and for four years, regional clinics for administrators have been held in six areas of the State of Iowa. Through these efforts, approximately 600 administrators have been reached in the five weeks training courses; 350 in the advanced training institutes, and 600 in the regional clinics. An additional result of the

training courses has been the editing and publication of the book, Nursing and Retirement Home Administration, edited by Drs. H. Lee Jacobs and W. W. Morris. This book, now in its second printing, has sold over 3225 copies.

Following Federal legislation requiring the licensing of nursing home administrators, the Director of the Institute, Dr. W. W. Morris, was invited to become a member of the advisory committee for the development of an examination for administrators by the Professional Examination Service, American Public Health Association. The Institute developed, with the assistance of related organizations, a planning committee for the licensure education program in Iowa. Through this effort, a series of fourteen syllabi on Administration of Long-Term Health Care Facilities has been produced and is now being published. Because of the great national interest and need for such materials, they will be distributed on a national basis.

Dr. Morris was a member of the President's Task Force on the Aging. The report of the Task Force, entitled Toward a Brighter Future for the Elderly, sets forth twenty-four recommendations.

The Institute offers three credit courses (a total of eight semester hours): "Biological and Psychological Aspects of Aging," "Societal Aspects of Aging," and "Seminar: Selected Problems in Aging."

The monthly bulletin, Adding Life to Years, goes to some 5,000 people in all walks of life.

Internal Revenue Service, John F. Hanlon, District Director, Des Moines, Iowa, November 12, 1970

The IRS has numerous publications available to assist the older taxpayer including the specially designed "Tax Benefits for Older Americans." The public has been advised of the availability without charge of this publication by the news media.

The taxpayer assistance area in our office has been especially arranged for the convenience of elderly taxpayers.

In past years representatives of IRS have been furnished for meetings of retirement groups, pre-retirement seminars, and church or social functions to assist elderly taxpayers. Last year a program was initiated whereby IRS instructed young taxpayers to assist older citizens as volunteers. Plans have been made to follow the same program again this year. A roster of selected employees have been trained to man this program.

Inwood Senior Citizens Club, Mrs. Eva Hemness, President, June 30, 1970

Have a monthly social time Bus fare is too expensive.

Iowa Association of Homes for the Aging, Harris R. Stafford, Executive Director, Grinnell, January 8, 1971

The following areas should be considered:

1. Housing. A continuation, even expansion of low rent housing. Proper funding of the 202 program, including expanded services. A provision to allow for custodial and nursing services to keep the older person in the familiar setting.
2. Community services. Homemaker services, "Meals on Wheels," home/health aids, and transportation are areas where communities have been given encouragement and assistance. Older persons should be assisted to remain in their own homes if possible.
3. Medicare: (Health Insurance) Four recommended changes:
 - A. Eligibility for payment in a E. C. F. or Skilled Nursing Home without first having to be hospitalized. This eligibility would be subject to a regular approved doctor admittance.
 - B. A new provision for some long term care for older persons.
 - C. Audits could be simplified and improved. Acceptance of approved C. P. A. audits, with proper guidelines.
 - D. Reimbursement on the basis of reasonable cost.
4. Social Security. Raise the limit for earned income for any calendar year to \$3,000 to encourage seniors to remain in society's main stream.

Iowa Association of Private Colleges and Universities, The, Lloyd L. Watkins, President, Des Moines, May 27, 1970

The association is not directly involved in programs for the elderly. Some of their member institutions are involved in

programs for the elderly. Wartburg College of Waverly, Iowa through its Center for Area Research and Enabling Services under the direction of Rev. Edward Carl Schlachtenhaufen, is helping organize an Area Council on Aging Drake University had a program which concentrated on the needs of retired people.

Iowa Chapter Arthritis Foundation, Howard C. Reppert, Jr., State Chairman, Des Moines, February 12, 1971

In Iowa, an estimated 389,000 citizens are afflicted by some form of arthritis or related rheumatic disorder. The rates in Iowa are greater than in other parts of the nation for two reasons. First, Iowa has a larger proportion of its population over age 65 than nearly any other state and individuals in their later years tend to have a higher incidence of rheumatic disease. Second, a significant proportion of Iowa's population is occupied in agriculture and workers in this occupational area have a greater amount of rheumatic disease than practically any other occupational group.

Facilities for the diagnosis and treatment of arthritis in Iowa are extremely limited. The Iowa Chapter Arthritis Foundation requires federal funds in addition to its voluntary funds if it is to develop and maintain urgently needed comprehensive community service programs for Iowa's estimated 389,000 arthritis victims. A thorough cost-benefit analysis which has been prepared shows that every dollar invested in the application of present knowledge about arthritis could return forty dollars to the economy through prevention of disability.

Iowa City, Community of, Frank R. Smiley, City Manager, June 19, 1970

In Leased 23 housing program elderly citizens have top priority Golden Age program in Park and Recreation Department No definitive knowledge of other services and programs needed; this may represent a deficiency in analysis If needs are presented, City Council would aggressively undertake to meet them Best service Commission on the Aging could provide would be to assist local individuals or agencies in determining the extent of needs for new programs and services.

Iowa Commission for the Blind, Kenneth Jernigan, Director, Des Moines, January 14, 1971

There are something over 6,000 blind people in Iowa. About one half of these are over 50 years old A high percentage of these are above 65. The Commission provides library service, home teaching, home industry opportunities, appli-

ances for the blind, direct and community consultant services, and - in some select situations - orientation center training to aging blind residents of Iowa.

The Commission operates the world's largest library for the blind and has created an effective system of communication with library borrowers The books and magazines available in Braille, on talking book record, in large print, and on both reel and cassette tapes are sent to and from borrowers postage free. As of December 30, 1970 there were in Iowa's library for the blind collection over 25,000 book titles and over one hundred different weekly, monthly, or quarterly magazines. Current library circulation averages almost 20,000 books and magazines per month.

Programs of the commission include:

- (1) Telephone Pioneers of all telephone companies in Iowa have periodic training sessions to learn use and repair of play-back recording machines and procedures for book selection. Then they volunteer their services to deliver the machines to borrowers, instruct new borrowers in machine use, and methods of book selection, do local repair of broken machines, or handle other questions a blind person in the community might have.
- (2) Most public libraries in Iowa also assist elderly blind persons in book selection and in acting as a local contact for Commission for the Blind services Also the commission has a staff of home teachers who visit elderly blind persons in their homes Another program is Home Industries Products are distributed by the Federated Women's Clubs throughout Iowa The commission has a field consultant (and rehabilitation counselors, if needed) to work directly with the elderly blind on special problems that may arise, to develop programs in nursing homes having blind residents, etc.

Finally, the commission distributes special tools, aids and appliances used by the aging blind to assist them For future planning, existing programs, staff, and referral systems need to be maintained and expanded where necessary.

Iowa Community Theatre Association, L. K. Boutin, President,
Des Moines, May 27, 1970

In writing and in speaking engagements the president stresses that there is opportunity for people of all ages in the community theatre, "sometimes especially older people" Some theatres make special visits to homes for older persons, giving readings or short plays.

Iowa Conference of Seventh-day Adventists, F. J. Kinsey, Health and Welfare Director, Des Moines, November 5, 1970

1. Priority needs of older S.D.A.'s and other Iowans

Regular visits, balanced diet and need for more exercise
.... Showing that we remember and care Transportation to shop or some one to shop for them Help with household duties Give them a feeling of belonging Take to store, doctor, church or their center of activities where their friends are Take them into our homes on holidays and other days Help them develop interest in some activity.

2. Programs and services within the church and extending outside the church to the community for older Iowans

Regular visitations; in most instances to nursing homes, furnishing lap robes and literature Sometimes seasonal giving, e.g. may baskets Bring church services and singing Help with crafts Bible studies on film Food baskets at Christmas and Thanksgiving Bring elderly to church Help with shopping Give them tasks they can perform Do cleaning in homes when required Do mending, sewing and assist with arts and crafts Furnish clothing Make bibs and slippers Need to do the programs and services more frequently What has been done has added much to their happiness Have given them a sense of belonging

Other types of programs and services for the elderly needed in church and community

Give them something they can do to help others so they feel needed Some can sew Repair toys for needy children Food service for those alone Need for phone committees Arrange for them to attend club, civic and church functions Transportation to grocery, to pay bills Reading to them Writing letters for them Need for a senior center Should be an involvement of high school and college level students for family relations programs, social service and other types of mutual benefit House-keeping help, such as ironing, mending, etc. A home for widows, widowers An apartment for each and a social room

Local, county, state and federal agencies located in Iowa can be more useful in aging programs and services by -

Providing things for older people to do Instituting an exercise program for elderly Helping establish a proper

diet program Providing low income apartment type homes but not be as regimented as nursing homes Meals on Wheels.

"The state or federal welfare should be more selective in some of their personnel who clean or go into homes to assist. Their work is shoddy, the lack interest in the people as it's just wages for them" Need for central commodity store Eliminate or reduce high cost of transportation, if there is any Let the elderly select basic foods at reasonable prices Many elderly like to work in their gardens Means should be provided for marketing same Work closer with local services Greater cooperation by determining real needs in each community.

Iowa Council for Homemaker Services, Mrs. Frances Shambaugh, Mrs. Ethel Trueblood, Mr. William Turner, Ronald D. Eckoff, M.D., Des Moines, February 15, 1971

Homemaker Health Aide programs serve Iowans in fifty-seven counties at the present time. Almost seventy percent of Iowa's population lives in the counties where the service is available. In 1970 these programs provided 400,000 hours of service to Iowans in their own homes. Nearly 300,000 hours of this service was provided to those Iowa citizens over 60 years of age.

Homemaker Health Aide Services provide trained, supervised personnel to perform custodial and personal care for individuals who wish to remain in their homes or within their family groups.

Recommendations regarding homemaker health aide service in Iowa are:

Home care of elderly Iowans is less expensive than institutional care. Therefore, Homemaker Health Aide services should be made available to the citizens of all 99 counties in Iowa. Homemaker Health Aide agencies should offer a broad comprehensive program of health and social needs to the residents in the area they serve. There must be found a source of local, state, Federal, or combination thereof, funds to provide the basic continuing support of homemaker health aide agencies. The provisions for purchase of homemaker health aide must be strengthened. A statewide implementation of the purchase of homemaker health aide services by County Departments of Social Services as provided by Public Law 90 - 248 is requested.

Medicare and Medicaid or some similar program should pay for that portion of homemaker health aide service which is a part of or related to active patient health care.

The inclusion of provision for the purchase of homemaker health aide service by private insurance is urged.

One inter-departmental state agency with responsibility for all homemaker health aide services be established in the Office of Planning and Programming. This agency would :

- (1) Establish and enforce standards of homemaker health aide service;
- (2) Establish standards for training;
- (3) Provide consultation to local areas in the organization and operation of homemaker health aide programs;
- and (4) coordinate the various state agencies' activities related to homemaker health aide service;
- (5) administer all monies available for homemaker health aide services.

There should be coordination of a number of related ancillary services, such as mobile meals, telephone visitation, special transportation for the elderly, volunteer service, etc. The most logical location of coordination for services such as these is the homemaker health aide agency in the community.

Iowa Dental Association, James M. McKay, DDS, President, Des Moines, February 10, 1971

Because of the physical nature of a dental practice, complete dental care for the aged in Iowa is available mainly to those healthy enough to be transported to the dental office. Except for the state institutions which are equipped for dental care and manned by salaried dentists, the facilities for care, except for emergency are almost non-existent.

Following a report of the Comprehensive Health Planning Council of Iowa dated November 18, 1970 A Task Force on Dental Manpower Needs has been formed by the Iowa Dental Assn. The work of this Task Force is to explore all facets of delivery systems for dentistry in Iowa

The Council on Dental Health of the IDA is organized to educate other members of the health professions as to the importance of dental care for all ages. Their projects are directed at grade school, high school and public health nurses, teachers and other educators.

At the present time, education is the most valuable tool available to the profession as far as advancing the dental health needs of the aging. The daily dental health of the shut-in, the patient in nursing homes and custodial institutions has to become part of the health creed of administration and nursing staffs.

A mobile dental unit soon to be put in operation as part of an experimental grant at the College of Dentistry at the

University of Iowa is an experiment in delivery systems which could prove to have far reaching effects in making dental care for the aged more available.

Working with the Regional Medical Programs, educating the personnel in charge of health care for the aged, and development of delivery systems form the basis of what the Iowa Dental Association feels should be done in Iowa to better meet the health needs in the later years, particularly in regard to dental care.

Iowa Development Commission, Chad A. Wymer, Director, and William M. McLaughlin, Des Moines, January 12, 1971

The efforts of the Iowa Development Commission to attract new investment in Iowa, which in turn, provides additional employment to Iowans, means a broader tax base can be realized, thereby hopefully giving some relief to senior citizens' property taxes.

Much care and consideration must be given to the location of facilities to house senior citizens to allow these people reasonable access to shopping and other services as transportation can be a problem.

The Planning Division provides information to local governments regarding the low-income elderly housing programs of Farmers Home and Federal Housing Administration. The division does provide direct technical services to a local housing authority in regards to site planning.

Information is provided in the area of building and construction of extended care facilities and other related medical facilities.

The state could provide supplements to elderly people who are physically able to be independent but do not have sufficient income to provide adequate food, shelter and clothing. The state and federal government could work together on this.

Some program through the state, and possibly with federal assistance, should be developed that would provide housing which would be turned over to the state in return for a small monthly financial stipend, not to deteriorate and become dilapidated through lack of maintenance.

Iowa Department of Public Instruction, Division of Rehabilitation Education and Services, Jerry L. Starkweather, Associate Superintendent and Director, Des Moines, February 12, 1971

Two service programs that relate to the "older" population. (1) Since 1955 the division has been responsible for determining whether or not applicants for social security meet the requirements for benefits based on disability. This program is administered by the Disability Determination Unit. Since 1955 this unit has processed the applications of more than 83,000 Iowans. (2) With the anticipated increased liberalization of the Social Security Act, the indicated processing caseload for the D.D.U. will be substantially increased in the immediate future. Plans have been developed with the regional office representatives of the Social Security Administration to allow for an expansion of staff that would permit the agency to effectively and efficiently process these many thousand additional applications. In addition to the above, plans have also been initiated to help the decision-making process in those situations involving questionable or marginal circumstances.

To improve services in other areas of the state agency the Division of Rehabilitation Education and Services is going to have to become more intensively involved in programming with and for the residents of county and nursing homes. As a step in this direction our Table of Organization calls for the hiring of additional staff. A modest beginning has been made in discussions with Mental Health Institute staff concerning the development of a cooperative program of re-evaluation of residents of three county homes.

The state needs to take more vigorous and aggressive leadership in at least the following areas:

1. The removal of architectural barriers from buildings both public and private, with penalties for noncompliance at least in the public sector.
2. That the state take more aggressive leadership in cooperating and assisting in the development and operation of sheltered workshops that could accommodate substantially larger numbers of "older" physically and mentally disabled adults (at the present time most of the emphasis in sheltered workshop programs is on the young mentally retarded, cerebral palsy and other physically disabled with relatively little emphasis being given to the sheltered workshop programs for the "older" client).

3. Greatly expanded fiscal resources should be made available to DRES in order to stimulate and encourage the development of additional clearly defined programs of service to "Older" disabled Iowans.
4. Require that all residential program agencies be aware of and to the extent feasible be encouraged to establish within their own facilities active, constructive, meaningful vocational rehabilitation programs for their residents.

Iowa Department of Revenue, W. H. Forst, Director of Revenue,
Des Moines, December 7, 1970

The Department has two major areas which pertain to the elderly: additional homestead tax credit, and an additional individual income tax exemption. Another program which could pertain to those over 65, exempts from income tax the income of both husband and wife if the combined income is \$3,000 or less.

Additional homestead tax credit applies to real property taxes. If the husband and wife earn less than \$3,500 per year and are 65 years or older, they can receive up to \$62.50 as an additional homestead tax credit. In 1969, \$3,970,000 was expended for this program.

On each income tax return, each person over 65 is entitled to receive an additional personal exemption of \$15.00 toward payment of their Iowa income tax.

Iowa District Council of the Assemblies of God, Stanton E. Johnson,
District Superintendent, Des Moines, October 9, 1970

Elderly need more housing with professional care Some patients are not in clean rooms and attention is inadequate Do useful services in helping others, visiting nursing homes, conducting services, talking and listening to elderly and spreading cheer Some elderly who are hard pressed are helped by members so they can have the necessities of life (Council) reached every nursing home in many areas and have administered to own elderly people Whatever programs that can be inaugurated which will give the elderly the dignity, honor and respect that are due them should be initiated The government can help free the church operated nursing homes from taxation.

Iowa Elks Association, Gene C. Gutknecht, President, Fort Dodge,
May 18, 1970

Organization has no particular programs for the aging but is interested in helping with their problems and needs.

Iowa Federation of Labor, AFL-CIO, Ethan Sproston, Chairman, Community Services Committee, Cedar Rapids, June 7, 1970

No established programs or services specifically for aging National AFL - CIO and United Auto Workers have model programs for affiliated organizations Full-time labor representatives on staffs of United Funds in Des Moines, Sioux City, Waterloo, and Cedar Rapids They assist persons or organizations, encourage design and development of new programs Indicate that close communication and cooperation with the Iowa Commission on the Aging would be most helpful.

Iowa Library Association, - Ethel L. Beeler, Boone, President

No particular program as a unit Every library supplies material and reading guidance to aged, providing specialized reading, listening and viewing aids ... Personalized reading guidance. Librarians much interested in service to the aging Few are able to extend adequate service due to lack of funding.

Iowa Medical Society, John H. Sunderbruch, M. D., President, West Des Moines, January 22, 1971

The Iowa Medical Society has a committee, chaired by E. E. Linder, M. D., of Ogden, which is established to consider matters relating to the White House Conference on Aging

Frederick C. Swartz, M. D., Lansing, Michigan is chairman of the American Medical Association's Committee on Aging and is well-known to Iowans. Dr. Swartz has given his solid endorsement to the White House forums occurring this year.

We can take some measure of satisfaction in the activity in progress, the work of the Commission on the Aging and also the Institute of Gerontology The hearing of the U. S. Senate Special Committee on Aging held in Des Moines provided a good review of some of Iowa's programs

A question which should have a priority classification in the discussions at the state and federal levels is accessibility to health care, especially in rural areas.

The Iowa Medical Society, through its Task Force on Medical Manpower, is attempting to increase the number of physicians practicing in the state. The Society is working closely with the College of Medicine to stimulate new young practitioners to locate in the state The Society is attempting public or patient education to accept the fact that a physician is

no longer located where he once was The Society is studying closely the emergence of various new paramedical workers. The physician's assistant may represent a means of alleviating the manpower problem The subject of health manpower is a suggested item for discussion during the White House Conference.

The subject of quackery should have a good airing at the state White House Conference.

The Society is pleased that Earl Nelson is to serve as the state coordinator of the White House Conference on Aging.

Iowa Nursing Home Association, A. L. Schluter, President, Des Moines, December 30, 1970

A more responsible attitude should be taken by the state to see that the basic needs of those in nursing or group care facilities as well as those in non-group situations are being met The "system interest" should not over ride the "people interest," the human factor. Those in government should have accurate, not "second hand" knowledge of the health care needs of the elderly in group care facilities as well as those residing in non-group situations.

Change the name of the Commission on the Aging to the Commission of Aging with the make-up of the Commission to include more able mentally alert and capable people over 65." Also, that they be representative of the entire strata of aging in our state, and that more of the staff, even the Executive Director, be a person aged 65 or over. Young minds cannot be expected to be attuned to the ideas, ideals and needs of those in the over 65 age group.

The publicized activities of commissions in various states indicate that more attention is devoted to social programs than "need" programs.

Iowa Nurses' Association, Mrs. Edith E. Ruppert, R. N., President, Des Moines, February 12, 1971

Recommendation I

While there has been a general increase in health care purchasing power through Medicare and Medicaid funds, very little has been done in innovative expansion of the supply of health services for the elderly. In addition to needed research, there is a need to build on state programs that have already proven to be valuable.

Therefore, we recommend establishing a program of State

Services for the Aging, similiar to the State Services for Crippled Children

Recommendation II

With the problem of transportation to medical care facilities, the increased probability that the older person will be denied a driver's license, and the limited public transportation in small communities, we recommend that communities be encouraged to establish Good Samaritan programs for transportation of the elderly to medical care facilities. This volunteer service could be administered through County Boards of Supervisors or Local Boards of Health, and the local volunteers would be reimbursed for mileage.

Recommendation III

The cost of living is often a burden that could be reduced considerably if the limits on income for those over 65 did not prohibit earnings which take away their rightful benefits We recommend either removing the Social Security earnings clause or at least make it more realistic in light of today's economy and cost of living.

Recommendation IV

The problem of getting emergency service for persons, especially the elderly in rural areas, is one that requires research and trial of various methods to investigate feasibility and cost. For example, one possible way might be an emergency helicopter service. The state has an air program for traffic control, so it would seem feasible to test a program on emergency transportation Therefore, we recommend that a state emergency program, as a demonstration project be given a trial period to determine effectiveness, cost, and utility We further recommend that there be a council established to study methods of organization, financing, and management in addition to the delivery of health care for the elderly.

Recommendation V

Due to the attitudes prevalent regarding mental health care in general, older persons are often fearful and reluctant to avail themselves of what mental health services are present. Even if they are willing to seek help, they are often discouraged by the cost of such care.

Therefore, we recommend that Medicare coverage for outpatient psychiatric care be included along with all other medical care and that 190-day life-time in hospital treat-

ment for psychiatric care be removed.

Recommendation VI

We recommend that the separate financing of physician services through the mechanism of voluntary insurance in Part B of Medicare should be eliminated. This element of medical costs could be adequately covered under the required contributory mechanism of Part A of Medicare.

Recommendation VII

Financial barriers to needed medical care for the elderly persist under Medicare. Deterrent mechanisms, such as co-insurance and deductibles, and self-insurance for physician services, have created serious hardship for those who can least afford even basic health care (50% of those over 65 have annual incomes of less than \$4000 per year).

Therefore, we recommend the elimination of deductibles and co-insurance. These mechanisms which were designed as deterrents to over utilization are actually adherents to early utilization.

Recommendation VIII

Medicare will pay for nursing home and home care only following a hospital admission. As a result, all too often, elderly patients are occupying hospital beds solely to meet the requirements for future coverage of lesser levels of care.

Therefore, we recommend coverage for extended care and home care without prior hospital admission.

Recommendation IX

Medicare does not pay for out-of-hospital drugs. Some hospital stays are initiated and some are extended primarily so that patients may receive necessary medication. Therefore, we recommend that Medicare include coverage of out-of-hospital drugs for both acute and chronic diseases.

Recommendation X

Medicare does not cover diagnostic and preventive measures and as a result older persons are neglecting illnesses until expensive remedial treatment is required.

Therefore, we recommend that Medicare coverage be extended for diagnostic and preventive measures on an out-patient basis.

Recommendation XI

Ninety-five percent of those over age 65 live "at home," however, eighty-five percent acknowledge at least one chronic health condition. Throughout the nation, Certified Home Health Agency services are not uniformly available. (i.e., in Iowa less than 50% of total population have services from certified agencies available).

Therefore, we recommend that the Federal Government take steps to help states expand Home Health Services so that they are uniformly available to all elderly.

Recommendation XII

We recommend that the Federal Government provide initial funding for Multiphasic Health Screening programs at locations which are easily accessible for both current elderly and the future elderly, in order to encourage the states to provide such programming on a continued basis.

Iowa Odd Fellows and Orphans Home, Richard Porter, Superintendent,
Mason City, July 6, 1970

A 75 bed nursing home and a 95 bed custodial home for the aging is in Mason City Visitation of sick and home-bound Provide some transportation to and from doctors, department stores, drug stores, grocery stores, senior centers Contribute to financial needs, and charities

Iowa Podiatry Society, William P. Killen, D. P. M., Des Moines,
April 15, 1971

Two projects have demonstrated the need for foot care among the elderly: First, the survey conducted in 1966 of 1,011 Minnesota nursing home patients. The survey team screened 991 persons who required either hygienic (627) or professional (364) foot health care; and among those who were in need of professional attention, only 163, or 44%, were under the care of a podiatrist or other physician. Furthermore, only 45% of those requiring hygienic care were receiving the attention they required.

Second, the survey conducted in Philadelphia of 1,366 non-institutionalized older persons ... 74% stated that their feet hurt at the time of evaluation.

The 90th Congress amended the Social Security Act to include podiatrists' services under Medicare More than two-thirds of the states with approved and operating Medicaid plans have made provision for the services of podiatrists

in their programs.

The Health Manpower Act has assisted in increasing the student enrollment at colleges of podiatric medicine by 80% during the last six years.

The Iowa Podiatry Society and the American Podiatry Association support the establishment of pre-paid comprehensive health insurance for all Americans that the next generation of older people will not have the same high incidence of foot health problems which podiatrists now are required to treat.

Recommendations:

- Remedy the deficiencies in Medicare and Medicaid prior to the enactment of comprehensive health insurance legislation.
- Strive for a partnership effort in comprehensive health insurance as a minimum, the government should finance a system which draws heavily on the private sector in managing and providing health care services.
- Assure program beneficiaries that they will have a free choice of health care practitioners.
- Strengthen the commitment to "peer review." Assuring quality health care is the responsibility of each participating health profession. Services provided by those in one health profession can most effectively be reviewed by members of that same profession.
- Improve the organization and delivery of health care services by promoting the comprehensiveness, continuity, and accessibility of services. Group practice is one means to assure quality care and effective cost controls.
- Seek additional revenues to supplement payroll taxes in the financing of any such plan.

More innovative programs must be included in the profession, such as intensified foot health training programs for nursing home personnel, and the utilization of trained assistants to the podiatrist.

Iowa Retail Food Dealers Association, Inc., Mary T. Fitzgerald, Gerald, Executive Director, Des Moines, May 20, 1970

No programs or services for the aging Discussed register of individuals over 65 who have had experience in food dis-

tribution Some opportunities available for part time work for those on social security Interested in receiving information on what is being done.

Iowa Retired Teachers Association, Mrs. Mabel Iowa Robbins, President, Des Moines, May 15, 1970

IRTA devotes all of its time, money and energy in trying to improve conditions for retired teachers Secured four raises in pensions in the last six years by lobbying in the separate counties with our legislators Supported an improved nursing home bill Encourage the 20 local chapters to establish reassurance checks among their home-bound and shut ins Hold schools of instruction on how to avoid quackery Insurance expert in each of the 20 local chapters helps retired teachers in buying insurance, making out claims, etc. Worked for completion of teachers retirement home Association members do community volunteer work IRTA has 2,400 members in 24 states and one foreign country.

Iowa Society of Christian Churches (Disciples), Mary Ellen LaRue, Associate Minister, Des Moines, March 30, 1971

Summary of questionnaire on aging mailed to approximately 500 ministers and board chairmen with 7+ per cent response.

1. Priority needs of older Iowans

a. Financial

- (1) Increased income
- (2) Stabilized economy, protection from inflation
- (3) Adjustments on costs of medicine, housing, services
- (4) Financial subsidy
- (5) Financial security
- (6) Financial advice and protection from frauds
- (7) Assistance with tax problems and services available

B. Personal and Social

- (1) Someone who really cares: who telephones, writes, visits, sees that basic needs are met, who "listens" well
- (2) Love and concern from others in community
- (3) Companionship, fellowship, friendship
- (4) Acceptance, respect, a sense of worth
- (5) "Tender, loving care"
- (6) Friends of all ages, recreation opportunities
- (7) Need to feel needed; opportunity to be useful, to use their talents creatively, to share in some way

- (8) Fellowship in church and community groups: all ages, esp. children
- (9) Meaningful worship experiences

c. Counseling, Guidance

- (1) On creative use of retirement years
- (2) On financial problems
- (3) On health, food, medical services

d. Physical

- (1) Adequate housing, both low-cost and other (either alone or in a group situation)
- (2) Handy-man services
- (3) Help with household duties
- (4) Transportation (public or semi-public)
- (5) Someone to run errands
- (6) Low-cost medical care and medicines
- (7) Adequate diet assured

2. Kinds of Programs and Services Provided by the Churches

a. Within the church family and facilities

- (1) Communion to homebound
- (2) Visitation to homebound members
- (3) Regular telephoning of homebound members (weekly, daily)
- (4) Visitation to hospitalized
- (5) Church School classes
- (6) Special programs for elderly members: recreation, tours, fellowship
- (7) Service groups which involve elderly in projects
- (8) Transportation
 - (a) to and from special activities for elderly
 - (b) for church services
 - (c) for errands
 - (d) for pleasure rides
- (9) Meals for homebound
- (10) Program adapted for those who are hard of hearing, seeing
- (11) Worship services provided in Nursing Home

Notes:

"None of the above extend into the community beyond our own members."

"Little or nothing is done for elderly within our church."

(Comment from one church)

b. Extending outside the church to the community

- (1) Senior Citizens programs
- (2) Meals to homebound
- (3) PLACE program for nursing home and hospital extended care facility
- (4) Volunteers from church involved in Community Action Program
- (5) Programs in nursing homes
- (6) Council on Aging in Community, started by churches
- (7) Church-related nursing home, or sponsored by church initially
- (8) Housing for senior citizens: apartments, retirement homes, low-rent board
- (9) Use of older citizens as volunteer workers
- (10) Recreational program
- (11) "Existing strong community program for elderly started by church."
- (12) Social center
- (13) Home health care
- (14) Homemaker service

3. What Success with Above Programs?

- a. Expressions of satisfaction with existing program (20)
56% of those reporting
- b. Programs where church is serving church members only, "well" (3)
- c. Response of church members to community program, "poor" (1)
- d. "slow" (6)
- e. "improving" (2)
- f. "don't know" (1)
- g. No comment (2)
- h. Financial problems (1)
- i. Many people (especially non-church-related) not being reached by present program (1)

4. Other Types of Programs and Services Needed

- a. Transportation, especially in smaller towns (6)
- b. Improved housing
 - (1) Minimum care and upkeep
 - (2) Low cost for those on low incomes
 - (3) Efficiency apartments for more affluent (1)
- c. Nutritious, low-cost meals delivered to homebound (4)
- d. Opportunities to be useful and involved; vocational assistance (4)
- e. Social center (5)
- f. Guidance on preparation for retirement (2)

- g. Counseling
 - (1) Economic
 - (2) Legal
 - (3) Medical
 - h. People who are genuinely concerned to make personal contacts, help when needed.
 - i. Financial assistance
 - j. More and better Nursing Homes
 - k. Easy access to church and other buildings for handicapped
 - l. More service to homebound
5. How can local, county, state and federal agencies located in Iowa be more useful in serving communities in aging programs and services?
- a. Present commissions are doing a good job (2)
 - b. Sponsor workshops on creative use of leisure time (2)
 - c. Alleviate hardship of persons on small, fixed incomes (3)
 - d. Increased financial aid (6)
 - e. Review present Social Security system (1)
 - f. More government funds for housing (3)
 - g. Subsidies for meals (2)
 - h. Good public transportation in smaller communities (2)
 - i. Improve Medicare and Medicaid programs
 - j. Counseling to communities needing various types of facilities for elderly
 - k. Visiting nurses in smaller communities
 - l. Program of education on services that are now available (3)
 - m. Recreation facilities especially designed for older citizens
 - n. More extensive use of co-operative medicine supply

Iowa State Association of Counties, Mrs. Ramona Williams, President, Waterloo, July 14, 1970

Association works for better legislation for governmental employees who have retired and are receiving IPERS

Iowa State Dairy Association, Maurice Sutton, Field Secretary, Des Moines, May 27, 1970

Association has never been asked to assist in area of aging and would like to hear what is being done and how association might serve.

The Department's Chronic Illness and Aging Service provides:

1. Occupational and recreational therapists on the staff are available as consultants to assist in the development and implementation of activities programs in nursing and custodial homes.
2. The Department will provide information and assistance for the Diabetes detection program. Since the prevalence of diabetes increases with age, this is a service of particular value to the aged.
3. The Department provides funds to support the Iowa Cancer Information service to improve physician knowledge in the diagnosis and treatment of cancer.
4. The Department promotes homemaker health aide services in nearly 60 HHA agencies. Prime targets for the future are the 44 counties which lack these services.
5. Mobile Meals are fostered by the Department Forty such programs are now operational.

The Department's Community Health Service provides:

1. Public Health nursing services in 80 counties.
2. Emergency Health service Ambulance service geared primarily in conjunction with highway safety.

The Department's Health Facilities Service provides:

1. Licensing of nursing homes and custodial homes, and in the near future will license adult foster homes.
2. The Department is the inspecting agency for certification of health care facilities for participation in the federal Medicare program.

The Department's Preventive Medical Service provides service to the aged in the tuberculosis control program.

Department of Health recommendations:

1. Look for practical and feasible solutions to the problem of transportation of the aged.
2. Look for practical and feasible solutions to the problem of unsuitable low-cost housing, particularly in some rural areas.
3. The provision of adequate diet, especially those living in their own homes. Difficulty of shopping, the work entailed in the home preparation of food, and the frequent limitation of income contributes to the problem.
4. The problem of medical care Complicated by the medical manpower deficit will not be easy to solve and will require a coordinated effort from many agencies to overcome.

5. Loneliness is a problem area The fostering of telephonic contact points for daily communication is one solution The provision of meeting places for the aged to congregate Organized community programs aimed at utilization of the skills and abilities possessed by the aged.

Iowa State Horticulture Society, Des Moines, Corwyn Hicks, Sec. Treas.
May 14, 1970

Fifteen organizations Many conduct "busy activities" with the aged in rest homes and hospitals. Assist in many aged areas Only scratched the surface as far as potential concerned. Many aged perform seasonal tasks in orchards and gardens and are remunerated. Have done much -- we can do much more. Commission's purpose and concern most laudable.

Horticulture is excellent for aged activity, whether it be active gardening, flower arranging, touring, or relaxing in beautiful horticulture sittings, etc.

Iowa State Traveling Library, Ernestine Grafton, Director, Des Moines,
November 4, 1970

Future plans are to have a full-time person working with the older people and the handicapped under Title IV B

Provide large print books Special reading devices for the older eyes and the trembling hands The seven field offices have a staff working in the nursing homes, using large print books and phonograph records and films

The people receiving these services are not declared legally blind so they cannot partake of the Commission on the Blind's services.

Iowa Tuberculosis and Respiratory Disease Association, George N. Bedell, M.D., President, Des Moines, February 10, 1971

The principal respiratory diseases which affect older people are tuberculosis, chronic bronchitis and emphysema, and lung cancer. In order that these diseases can be dealt with effectively, Iowa needs to have adequate facilities for diagnosis, in - patient treatment, follow-up, rehabilitation and adequate opportunities to provide income for those individuals who become disabled because of disease.

Chronic bronchitis, emphysema and lung cancer are closely related to cigarette smoking and so efforts to intensify the crusade against smoking must be made The state has an

obligation to train specialized health personnel at several levels of sophistication to deal with respiratory problems facing aged persons.

Significant advances in preventive medicine, early detection of disease and treatment of fully developed diseases will depend upon research. The adequate support of research is a mandatory obligation if the health of future generations is to be improved.

Izaak Walton League of America, Iowa Division, Iowa City, Robert C. Russell, Executive Secretary, June 25, 1970

Interest and concern for natural resources is a subject including many senior members Outdoor recreation, conservation, concern for quality environment all relate to human resources League is interested in and working with the matters of aging Many "senior" members are active in the organization .. thereby relate to life.

Jenkins, Katherine L., Davenport, no date

Suggested a 15% increase in Social Security to cover medicines and doctor bills National health insurance to close "the gap in Medicare" Federally assisted low-rent public housing for those who can't afford standard private housing Senior citizen aides program or foster grandparent program Pre-retirement course and classes in bridge, antiques, fishing, etc. Have senior citizen classes in churches, also social gatherings Have a meal service program for elderly unable to prepare a nutritious meal and neighborhood workers to assist families receiving food stamps to educate them how to buy right kinds of foods and how to prepare them Good Sunday bus service with reduced rates for seniors and reduced air charter flights for seniors Also listed a senior citizen center, friendly visitor program and educational classes as being needed for seniors in community, urged publicizing existing programs and developing closer working relationships with all agencies.

Kings Daughters and Sons, The International Order of, Iowa Branch, Mrs. L. A. Lower, Cedar Rapids, June 23, 1970

Owns homes in Fort Madison, including aged among those served Serves Des Moines County with a home at Burlington 250 circles in Iowa help aged with limited incomes, especially at Thanksgiving and Christmas, taking dinners to them One of the Order's objectives is helping the less fortunate.

Kjeseth, Peter L., Wartburg Theological Seminary, Dubuque,
April 27, 1970

Housing for elderly must be "where the action is - downtown, within walking distance of drug stores, grocery stores, theatres, libraries, etc." "Nothing more depressing than a new old folks home in the middle of a beautiful park, away from everything - even bus lines!" Housing should be in a "mixed" neighborhood, not all older people Housing should be available in every community so that old do not have to leave the geographical location that has given their life its meaning.

Lake City Chamber of Commerce, Mrs. Coleen DeVries, Secretary,
Lake City, July 13, 1970

Priority needs - low cost, but good housing and care, an organization that provides some social life for older persons, and a group or organizations that would see that those still living in homes are eating properly and help them get around the community for medical and shopping needs, etc. Community has an organization that provides social life but does not "have groups to do anything else"

Laurens Chamber of Commerce, Ralph Hitchcock, Secretary-Treasurer,
Laurens, July 23, 1970

Elderly of community need recreation to give them something to do during day and be made to feel part of the community Need is being filled by churches separately and jointly, by fraternal organizations, and federal, state, and county social programs help elderly with their problems

League of Iowa Municipalities, Robert E. Hays, Executive Director,
Des Moines, May 14, 1970

Not directly involved in any services for the aging Assist member towns and cities in their programs of service for the Aging Provide information to communities desirous of entering into the development of housing for the elderly Little has been done specifically for the elderly due to lack of funds, lack of knowledge, lack of interest and lack of information or assistance in the field.

Leon Community Center, Mrs. Georgia Woodard, Chairman, Leon

Increased income needed Lower drug prices More low cost housing needed Service projects are the manufacture of pillows for children in hospital

Lucas County Retired Teachers Association, Catherine M. Stack,
Vice President, Chariton, July 1, 1970

Needs for low cost housing have been met in (Lucas) county but housing for middle class income is lacking Many retired teachers live alone in fairly large houses and would be willing to move to apartments but we have no desirable ones Need bus service north and south; many do not like to drive out of town Chariton churches "doing a good job of looking after people in nursing homes and older church members" Few retirement activities except those made by older people themselves.

Lutheran Social Service of Iowa, Reid L. Seastrand, Consultant on
Services to the Aging, Des Moines, March 10, 1971

Seven hundred fifty questionnaires sent out to Lutheran Congregations Response from 350 congregations Similar questionnaire sent to same congregations seven years ago and only seventeen responded. No accurate count as to number of projects now active It would easily run up to many times the situation seven years ago Few unique things are being done, senior citizens clubs or groups, efforts at meals services in the church, many involved in meals-on-wheels program and some voluntary visitation projects to nursing and private homes of the elderly. Churches are relating by providing recruits to community programs and services for the elderly. In Des Moines, five downtown churches are putting their heads together to see what kinds of joint ministries they might develop, in this case especially as concerns the needs of the elderly living in the area.

One new project that has been undertaken on a state-wide basis by our agency along with Iowa Council of Churches and Iowa Catholic Conference is what we have called the ACTION CALL newsletter. In December of 1970, we held fourteen workshops across the state alerting elderly to their potential power in the halls of the legislature if they would work together in a coordinated way for the remedying of injustices represented in some present laws. From a beginning group of 250 participants our ACTION CALL has grown to where it includes 1,200 elderly persons across the state. We know of no other program in other states similar to this, although there might well be such. But we believe firmly in the value of this idea and have some evidence coming in that the Legislators are becoming aware through the contacts of elderly people involved in ACTION CALL in the persistent needs and wishes of the elderly.

One Lutheran congregation in Central Iowa is about ready to inaugurate what we have chosen to call Corpus Christi. This

is a church sanctioned, role defining effort by which retired persons can feel a better description of their role and of their service potential in the congregation and in the community. We feel that this has tremendous potential and intend to see it through to actuality. Certainly one of the crying needs of elderly people throughout the country, more particularly retired elderly, is to have a role which is defined by the society in general which they are encouraged to fill.

Plan to encourage in every way possible serving noon meals in the churches. Two projects going now and have found that they do meet the needs it was believed they could.

Mapleton, Community of, Merle E. Davis, Mayor, August 11, 1970

Have low rent housing (FHA), not tax exempt Onawa 20 miles distant has older citizens apartment housing (HUD) can rent for \$30.00 - \$35.00 per month less than we can NOT FAIR Not as we planned. Have an "over 40" group which meets regularly Use youth center Commission on the Aging can help in getting taxes removed from non-profit housing If funds available need recreation area Church groups and ladies organizations plan recreation in our nursing home.

Marion County Board of Supervisors, Harvey Sweem, Chairman, Mrs. Carol J. Schlapp, SWI, Department of Social Services, July 21, 1970

Work with aging, provided by county taxes, presently limited to services and programs of county nurse, county home, and homemaker service Also participate in programs for general relief, soldiers' relief, aid to disabled, aid to blind, and food stamp program Need to develop programs to help more older people to stay in own homes. This calls for provision of meals, friendly visiting, and shopping services Programs of preventive services are needed to retard the deterioration of the lonely and isolated older person Need for recruitment of neighbors and volunteers Community planning is necessary for continuous involvement for protective care, living environment, and protection of the person Funds needed for development of centers for community involvement From older citizens obtain teaching staff to develop handicraft skills All community organizations will need to be made aware of these needs as new programs such as these can only be developed with help of all Legislation is needed to provide funds for projects Need an on-going Council on Aging in the county, including business, labor, religious, ethnic groups, etc.

Marshall County Board of Supervisors, Luther Randall, Chairman,
Marshalltown, May 25, 1970

One of county tax supported programs for elderly is the County Home, a registered nursing home with over 100 persons being cared for and occupancy to increase to 200 in future The Marshalltown Community Services Council involves itself "in much help for the aging, such as Meals on Wheels and other projects An incorporated commission in county is developing a retirement home for the aging.

Mason City, Community of, Thomas E. Jolas, Mayor, Mason City,
June 16, 1970

Homemakers Service (tax supported) very successful "Meals on Wheels" is a great help Community backing needed to support and develop better housing and transportation are two areas needing help at this time.

McGregor Senior Citizen Club, Mrs. Lucille Powers, President,
July 1, 1970

Recommend higher income Cheaper housing Better health conditions....

Meneough and Associates, Inc., E. M. Meneough, Des Moines,
Iowa, May 22, 1970

The firm serves several associations as their "executive secretary." The Iowa Funeral Directors and Embalmers Association is significantly concerned with the adjustment of the remaining spouse in the area of grief therapy and in the best use of retirement plans (IPERS, etc.) and their activities in their over-age years The State of Iowa Employees Association is significantly concerned with the adjustment of the remaining spouse and in the best use of retirement plans (IPERS, etc.).

~~Would appreciate information through Commission on the Aging to distribute to association members.~~

Mid-American Baptist Churches, Richard G. Smith, Associate Region
Minister, Des Moines, March 11, 1971

PRIORITY NEEDS OF OLDER IOWANS -

Make elderly feel they are a whole person with physical and spiritual needs In our society today elderly people see some sort of monster absorbing their life savings, making them feel they are a burden to society Need for assurance they have a place, are important, Often

they are lonely, neglected, forgotten by younger people
.... Occupational therapy is needed to help create feeling
of worth and of being wanted Need for closer relation-
ship between elderly, relatives and friends Want to
feel useful and wanted Let those that want to live
alone be permitted to do so Adequate health insurance
which pays for all medical, dental and drug bills
Pension and all government assistance should be automatic
to keep pace with cost of living, subject of legislative
action Several of the members of the (local) medical
profession take a very calloused attitude toward the
elderly Housing needs are of great importance and
vary by communities, from small apartment living alone to
nursing homes Need realistic allowance to be made by
the State of Iowa for welfare patients in nursing homes
.... Need for more of us to take time to listen and under-
stand.

PROGRAMS AND SERVICES WITHIN THE CHURCH AND EXTENDING OUTSIDE TO THE COMMUNITY

Some communities have homes Some senior citizens
groups meet often for fun, fellowship, entertainment and
refreshments Some churches have buses to take these
people places. Pastors conduct weekly services in the
Homes and County Farm Homes Young people in many
situations serve as volunteer workers i.e. write letters
for them, run errands and play games In many places
United Church women volunteer under several names, e.g.
"Project Friendship" to visit homes, grocery shop, pay
bills, cook and deliver meals, take elderly for rides and
telephone them regularly. Supplemented by assistance from
Commission on the Aging Council where available
Activities such as 'adopt a Grandparent' program with
Camp Fire, Girl Scouts and Angel Flight at I.S.U.
Participation in drama theater Senior Employment
Service and "Autumn Leaf" - Monthly publication for shut-
ins and all over 65. Many churches working hard at the
traditional things churches have done. Many participate
in the Meals on Wheels program

Young people generally respond eagerly and are dependable.
Many have centers Many centers are planned. Generally
programs and services are good in direct comparison
to effort expended. More people need to become involved.

OTHER NEEDED PROGRAMS AND SERVICES -

Need for more Christian fellowship outside the church con-
fines and stated programs and services Low rent
housing need ranges from moderate to desperate Com-

mittees in various communities are working on this need for a place to develop hobbies Spend time reading to those with failing eye sight Also assist them in personal grooming and "listen out" their emotional involvements, anxieties and apprehensions Have charge of a senior citizens' group whereby they would become active in group projects such as crafts, mending clothes for the needy, mending toys for the children and provide them with a ministry, delivering them from boredom and a sense of uselessness The problem of housing for couples is also frustrating. They would be much happier if in a nursing home together.

HOW LOCAL, COUNTY, STATE, AND FEDERAL AGENCIES CAN BE MORE USEFUL -

Too many people in public offices are not trained or experienced Some have too little real interest Legislation is needed but too many set back and say It's no use The government will do it their way" All can make our voice heard Public officials need to hear from grass roots.

Example: elderly person taken to the hospital on Old Age Assistance; cost of hospital = \$27.50 per day; government paid all of that amount. Within a week this individual transferred to a Home for the Aged with orders to continue the same care, but the same agency said they would only pay the Home \$7.50 per day. Somebody needs to get to work and get the message across to the right people that Homes cannot exist with this kind of dealing. Government rulings are getting so bogged down with rules, regulations, organizational activities they do not get the necessary job done of caring for the elderly people. These "officials" cannot know all things about all things; unless we keep them informed - letters, telephone calls, visits, etc. - how can we expect them to do what is really needed?

More money and materials should reach the elderly through various agencies Need to provide a more realistic level of support, - especially nursing home care Various agencies need to fully inform elderly and those who are helping them just what is available at various levels of government and how to go about getting assistance One church group believes - "the more we can keep the government out of it the better everyone will be both financially and emotionally"

The welfare program in Iowa falls far short of adequately

financing the cost of the patients that require nursing care. In many cases the relatives of a welfare patient would contribute toward making the payment adequate, but when this is offered, the Welfare Department only decreases their contribution for that amount. This leaves the nursing facility far in the "red" on nursing-care patients. This could be corrected.

Mills County Board of Social Welfare, Mrs. Mary L. Barton,
Director, Glenwood, October 6, 1970

County tax money provides public health nurse, ambulance service, prescriptions, medical care and hospitalization Low priced clothing, household goods and an activity center. Need more homemakers' help, housing for low income elderly, Meals on Wheels, grocery delivery and transportation No organization or agency to work on small rural community problems Need assistance especially on low income housing for the aged; application has been in the process for four - five years.

Modale Friendly Citizens, Modale, July 9, 1970

Requests state to set up a four county regional office in their region with field workers in each county Local problems are lack of transportation, doctors, and medical supplies.

Muscatine Park Commission, John C. White, Director, Muscatine,
July 6, 1970

Present program is not as successful as hoped Believe elderly will work for their personal interests Park commission plans a survey, offering participation Commission on the Aging can help best by furnishing information on what other communities are doing for recreation for the aged.

National Association of Retired Civil Employees, Davenport Chapter
#279, Dr. A.C. Hanson, President, Davenport, October 15, 1970

Most important of personal needs are lower taxes, especially property taxes, lower health insurance costs, transportation and lower drugs and nursing costs Need for research regarding special mental gymnastics Also research on the beneficial or detrimental effects of various foods, vitamins, drugs and polluting gases in the atmosphere, on mental health.

National Association of Retired Civil Employees, Dr. A.C. Hanson,
President, Davenport, August 22, 1970

Adequate bus transportation should be available, even if it must be subsidized, and at a reduced cost. Taxi fare should also be reduced for the elderly Organized retirement activities should be available at reduced cost Provision should be made for one balanced meal a day Establish clinical health centers for the aged There are sufficient church related activities; the elderly should be urged to take advantage of them Elderly people with low income should be given preference over younger people in reference to welfare aid Provide low cost housing and limit the rent that can be charged Adult education is no problem except in special cases Employment to supplement low incomes are needed Existing programs in Davenport: "Meals-on-Wheels," "Dial-A-Listener," reduced cost of movies, golf and bowling, organized senior citizens bowling.

Other programs needed: More recreational activities, clinical health center, low cost housing. Additional funding needed for existing programs.

National Association of Retired Civil Employees, Tallcorn Chapter
No. 918, Mrs. Estelle M. Burroughs, President, Marshalltown,
September 23, 1970

Many people who must live on annuity checks and Social Security checks are in a terrific economic bind Tax burdens and outrageous cost of drugs and medical care are problems Cost of living has exhausted meager savings set by for a rainy day There are too many relief organizations, should be coordinated Many of these don't know the needs Housing is in serious condition If all the thousands of dollars that are spent on surveys were put into a fund, it would relieve much poverty Transportation a very serious matter also; local bus service curtailed, small towns isolated as no trains or bus service "Our Open Forum Group was of the opinion that there will be nothing accomplished in this 1971 White House Conference on Aging, due to the fact that these decisions must be recorded and arrangements made for financing, thus making it a long time before any help can trickle down to the real people who are the real sufferers." Seems most O.E.O. funds spent on salaries. Welfare projects should be taken out of politics "Iowa needs an OMBUDSMAN person just like a dog needs two heads." Lawyers are a dime a dozen in every county!

National Senior Citizens, Mrs. Margaret Schmidt, President,
Muscatine, September 29, 1970

Some older people on relief and need more attention
Some in nursing homes and get very little attention there
for the money they have to pay out In less than a year
cost of a patient "I have to pay for has been raised three
times - from \$280 a month to \$313"

Nebraska - Iowa District Kiwanis, Art Brownlee, Governor,
Omaha, July 7, 1970

Now days so much emphasis on youth -- Feel sometimes older
people are forgotten people Information on ways Kiwanis
could help would be welcomed

Newell, Community of, Walter Johnson, Mayor, by G.D. Hill, June 23, 1970

Have applied for an FHA loan to build apartment unit for
those 62 and over Think most older men like part time
work Some employed in park and cemetery Need help
with capital outlay to do more.

Nutrition Council of Iowa, Anna Katherine Jernigan, R.D. Chairman,
Des Moines, January 13, 1971

The Nutrition Council has sponsored eight T.V. and four radio
programs on Food Stamps, and will sponsor the same number of
informational programs on Meals on Wheels.

Problems of elderly citizens are:

- (1) Lack of transportation to get to the grocery to pick
up food.
- (2) Lack of incentive to prepare food.
- (3) Eating habits that are such that they are not willing
to include the foods that provide a balanced diet.
- (4) Lack of funds to always purchase food needed.
- (5) Physical problems such as poor fitting dentures or no
dentures.

The use of food stamps by eligible elderly is encouraged to
help alleviate shortage of funds A delivery service of
some kind could be helpful for those lacking transportation
for groceries. A community group or a service club could
organize volunteers for the delivery service

The Meals on Wheels increased from 28 to 46 programs since
March of 1970. An expansion of these programs is needed
The Meals on Wheels program has value, not only for providing
food, but as a check on the health of the individual. Some
provide handy-man service also.

The Nutrition Council of Iowa will continue to work through the Iowa State Department of Health, the State Universities, and Extension Service, Iowa State University, to provide nutrition education and information for the people of Iowa - including the elderly. One goal is to encourage people of all ages to consume a balanced diet and to avoid establishing food habits which would preclude doing this.

Odgen Sixty-Plus Club, Mrs. Clyde R. Robinson, July 24, 1970

Party games, visiting and hymn singing are provided by club
.... Various Churches meet for fellowship

Open Bible Standard Churches, Inc., O. Ralph Isbill, General Secretary-Treasurer, Des Moines, January 28, 1971

Priority needs of older Iowans: security-housing, food, taxes (funds to meet increasing costs); social contacts, many feel lonely; someone or some agency which will consider them as persons and help them find answers to their often and many questions

Programs within and extending outside church for older people - transportation to bring members to church; visitation by clergy and laity; a few churches now provide tape recordings of services to shut-ins and hospitalized; Des Moines churches help support retirement home, "Valley View Village."

Other programs needed - someone or some agency to help with personal problems where no relatives are willing to do so; more activity and entertainment Program to make it possible for aged to obtain medicines or fill prescriptions at reduced rates, since medical costs continue to inflate and pay for by largely fixed incomes"

Orange City, Community of, R.M. Dunlop, Mayor, June 22, 1970

Maintain room with pool table exclusively for elderly men
.... Attempted to sponsor church services for elderly in the three homes in the community Work with Siouxland Council on Aging to improve programs and services Interest is good but program just starting Anxious to improve existing programs and develop new ones Anxious to co-operate with Siouxland Council and Commission on the Aging Want information to aid and assist

Order of the Eastern Star, Grand Chapter of Iowa, Miss Kathryn Anderson, Grand Secretary, Des Moines, June 3, 1970

Two homes for elderly members of the Order, one home, new; other, old. Serve all Eastern Star members of Iowa. No homes on local level Homes provide for physical needs but are "always happy to have assistance in programs" of interest to elderly members Honor members who have fifty years of membership Financially unable to do much in addition to present service

Osage Chamber of Commerce, John Widmer, P.T. Secretary, Osage, July 1, 1970

Highest priority in Osage - rental units that elderly could rent at a price commensurate with income

Osceola, Community of, Floyd O. Wilson, Mayor, June 26, 1970

O.E.O. supports a craft program through Community Center staffed by them (federal dollars involved) Great need for low rent housing Inexpensive transportation badly needed Crosslines is new group of church people to do volunteer work and fill needs to extent possible and not met by organized agency - Continued funding of mobile meals by Commission on the Aging is important A larger community center would be a great service to Community.

Parkersburg Sixty Grand Club, Mrs. Frank McLean, President, July 6, 1970

Able to continue meetings on present income for rentals Favor low cost housing Employment is no problem Adult education interests include arts and crafts, ceramics, woodwork, furniture refinishing, art work The churches have so far not become involved with the elderly. Most people are involved in religious work Retirement activities are cards and bingo but wish additional entertainment Tours at home and abroad with trained guides are desired Parkersburg Women's Society has entertained the Sixty Grand group Fishing license free desired for elderly Don Christian's past leadership is commended Governmental grant and leadership requested

Patterson, Community of, Anna Faux, Town Clerk, June 17, 1970

Small town No (aging) commission No Comments

Pella Recreation Commission, Keith Gates, Director, Pella,
September 4, 1970

In process of organizing the elderly under the Recreation Program Some meet in the Legion Hall; also picnics held in the summertime There is need for a good place to meet Commission would like to provide bus tours, are now in planning stage Need for more information on Golden Age clubs and what the Commission on the Aging could do for them.

Pengra, Ray F., Council Bluffs, April 30, 1970

No other field would contribute more to welfare of aged citizens than to promote constructive work for them Card games and other social functions help But special effort should be made to locate jobs

Pocahontas Golden Age Club, Mrs. Elma Stoulil, President,
Pocahontas, July 28, 1970

Card playing is primary diversion A Pancake Day planned The Center is being supported by Golden Age Club

Polk County Department of Social Welfare, Mrs. Carmen Brackett,
Des Moines, October 14, 1970

Thirty programs benefit the elderly, only eight involving county tax funds (The usual programs supported by most county welfare departments) The elderly want and need transportation, food stamp proxies, friendly visitors (volunteers), better coverage by Medicaid for public health nurses, and "Adopt an Adult" volunteer program To accomplish, would disband the Commission on the Aging and use the funds to help finance the transportation program People closest to the community problems are best equipped to offer direction; "unfortunately the programs continue to be planned by higher-ups who do their planning from invalid questionnaires Two programs need to be planned and executed at county level; these would solve many other problems simultaneously. These are - (1) Transportation, for medical reasons, housing, food, loneliness, and better living, and (2) "Adopt an Adult" volunteer program, to help older people live again, feel needed, loved, not quite so forgotten

Postville Commercial Club, Wayne V. Schroeder, Secretary,
Postville, July 1, 1970

Feel Postville has met needs of older people for the present time A 48 bed Good Samaritan Center has been opened, not at full capacity at time of writing

Pottawattamie County Board of Social Welfare, Ron Pfiefer,
Social Worker II, Council Bluffs, October 28, 1970

More should be done for elderly Services in existence should be expanded and new services developed County tax supports, at least partially, usual county programs Needs still not met. Need for public housing, more nursing homes of higher quality, public transportation, expanded homemaker services, coordination of friendly visitors and a cooperative custodial home and/or central food service Need to raise basic allowance for elderly on Old Age Assistance Trying to improve existing services and programs and trying to develop new services working with Director of Southwest Iowa Area Council on Aging. It needs more funds and personnel to do a more adequate and equitable job Commission on the Aging, other state agencies and Iowa headquartered federal agencies can better serve on aging programs and services by providing more money

Questionnaire Summaries

Essay type questionnaires, similar to one that was developed for use in the public hearing held in Adair, September 22, 1970, were used in a number of communities. Similar questions were asked at forums, too. The answers provided are assembled following.

Questionnaires were distributed or forums were sponsored by-

Decatur County Older Americans White House Community Forum,
South Central Iowa Community Action Program, Mrs. Margaret Lewis, Senior Citizen Director, Jane Galehouse, Ellen Guethlein, Steve Iverson, and VISTA volunteers, Leon, September 26, 1970

Dubuque Write-In Forum and Public Forum, Project Concern,
Mrs. Dolores Glenn, Director, Dubuque, May 1970 and October 1, 1970

Monroe County Senior Center Program, Mrs. Bertha Swartz, Albia

Senior Citizens Coordinator, Northeast Iowa Community Action Corporation, Mrs. Veronica Ohrtman, Decorah, including responses from Decorah, Harpers Ferry, Oelwein, and Waukon

Senior Citizens, Waverly

Sources of answers are shown in each instance below. When the same answer was received from all sources, this is also indicated.

1. a.) WHAT ARE THE MONEY PROBLEMS OF OLDER PERSONS?

(All) - Not enough money * Inflation *
Fixed income

(Decatur) - The mystery of why a raise in Social Security often results in a cut in another benefit, such as veteran's check, to the effect that there has been no "cost of living" raise at all for many people.

(Decorah) - Cost of hospital and doctors' bills
* High taxes * Not enough income *
Pensions too small * How to stretch dollar
to meet minimal costs * Social Security too
small * Limit to outside income on Social
Security until age 72 * No problem.

(Dubuque) - Concern over possibility of having insufficient income in retirement * What can be done about lowering or eliminating taxes for people on Social Security, especially those over 75?
* Taxes should be eliminated on homesteads after 65 and not return to taxation after owner's death * Include all who reach age 72 on Social Security * Old age assistance grants should be raised to an adequate level *
Shouldn't have taken away "freezing" of property taxes * Many elderly will lose homes because of paying so much in taxes * Social Security should include escalator clause and also assist on payments for hearing and optical aids and dental bills
* Social Security should be lowered for women as well as including medical aid at lower age
* Social Security should be exempt from total income and should guarantee benefits of health service, house service, and needed nursing care *
Just how concerned is Project Concern about low income people?

(Waverly) - High cost of food, living and medical care * Loss of earning power *
No problems

b.) WHAT CAUSES THE MONEY PROBLEMS?

(Decorah) - Small earnings * Many elderly didn't work when Social Security was taken out
* 35 years of reckless spending by both federal and state governments * Cost of

medical care * Buying too much of high
priced items * Retirement on small income
* Lack of earning power during working years and
high costs during retirement years.

(Monroe) - Poor management ("large families") *
Increased taxes * Labor costs and
wages too high.

(Waukon) - Poor planning in earlier years *
Huge government spending * Lack of self-
discipline

(Waverly) - Poor health * Small Social
Security payments * Poor family planning
* Poor money management * Strikes for
higher wages * High taxes * High
labor costs

Fixed income and inflation were given in several
instances.

c.) WHAT SOLUTIONS WOULD YOU SUGGEST FOR MONEY PROBLEMS?

(Decatur) - The report from Decatur county said
that suggested solutions fell into the categories
of legislative action sparked by grassroots
interest and petitioning, expansion of Commu-
nity Action Programs, volunteer efforts on the
part of senior citizens and others, and individual
determination on the part of senior citizens to
do all they can to combat their own problems
rather than sit back and accept their frustra-
tions. Solutions suggested for income problems
were - Increase Social Security payments to a
minimum of \$100 per month * Prohibit
cutting one benefit when another is raised *
Raise gardens * Freeze property taxes
after age 65 * Vote and be knowledgeable
on voting issues * Lower postage rates for
the elderly poor, perhaps worked like Food Stamps
* Free fishing licenses for people over
65.

(Decorah) - More help from government *
More Social Security * Young people work
more and spend less * Lower cost of living,
taxes, and medical bills * It's nearing the
point where solutions are almost impossible *
Put ceiling price on medicines; charge accord-
ing to income * We learn to get along with
*

what we have to spend * I don't think that the
ones who raised these problems are willing to correct
them; time will tell * See that those who are
getting rich off relief get less and those who haven't
sufficient (money) get more * Reevaluate total
government spending; set new priorities * Low
income housing

(Dubuque) - More adequate Social Security benefits
* Higher earnings limit before being subject
to cut in Social Security * Gear Social Securi-
ty to cost of living index * Supplemental jobs
to add to income * Opposition to arbitrary re-
tirement age * Be allowed to retire part-time
on regular job rather than being forced to quit work-
ing all at once.

(Harpers Ferry) - Lift restrictions on retirement

(Oelwein) - Low cost housing * Increased pen-
sion benefits * Reduced rates

(Monroe) - Better money management * Birth
control * Low cost housing * Discounts
for elderly * Price and wage freeze *
Lower taxes for elderly * Lower rent
* Increased Social Security benefits *
Stop strikes

(Waukon) - Be thankful for what you do have *
Have a worthwhile goal * No work, no
welfare * Stop inflation

(Waverly) - Increase Social Security benefits *
Curb wages * Throw away pride and ask
for help * Help in money management *
Develop hobby, try to sell products *
NRTA - AARP membership provides reduced rate privileges
* Less property tax * "I don't know"
* Stabilize prices * More Medicare
benefits * Eradicate parts of our bureaucracy
* Better managed foreign aid * Cut
down on graft * Low health insurance for elderly
* Freeze property taxes for those over 65
* Increase in homestead exemption for those
65 and over

2. a) WHAT ARE YOUR CONCERNS ABOUT HEALTH, HEALTH CARE, AND
AND HEALTH CARE FACILITIES?

(All) - High cost of health care

(Decatur) - Medical and drug costs * Financial
problem of special diets * Transportation to
doctor * Inadequate unbalanced meals due to
lack of funds and lack of motivation to cook properly
for one person * Insurance benefits being cut
at 70 years * High ambulance rates *
Need for a nursing home in Lamoni * Cost of
nursing homes * Need for hospital recognition
of osteopaths and chiropractors so that their costs can
be covered by insurance and Medicare.

(Decorah) - No concerns * Outdoor toilet *
Quite well taken care of * Don't think
doctors need so much money * In our town, must
have one doctor and six beauty operators; it doesn't
make sense * No real concerns except don't
like being confined in a nursing home * Doctors
too concentrated in urban centers * Too few
doctors * More thoughtfulness needed in hospital
supervision * Drugs to keep people docile.

(Dubuque) - Rising cost of medical care * Need
for special rates on drugs and medicines * Trans-
portation to clinics and doctors' offices *
Chronic health condition * Some indicated no
concerns; average age of those with concerns was 68;
average age of those with no particular health concern
was 72 * Need a place for sick elderly people;
why does county hospital have to be a political football?
There are 60 beds not being used * State Depart-
ment of Social Services needs to fill gaps in health
care that Medicare and Medicaid are covering, i.e.,
paying for home care of person receiving O.A.A. who
has chronic illness like arthritis * Need more
and better nursing homes * Need medicines for
those over 65 who aren't hospitalized * Need care
from osteopaths and chiropractors as well as medical
doctors.

(Oelwein) - Some don't get any hot meals * Not
eating a balanced diet * Inadequacy of Medicare
*

(Monroe) - Abuse of Medicare * Continuation of
Medicare * Poor or inadequate health care *
Improper care * More doctors needed.

(Waverly) - Someone to care for older person in the
home * Keep Medicare * Inadequate care

and supervision of nursing homes * No concerns.

b) WHAT SUGGESTIONS WOULD YOU HAVE FOR IMPROVING HEALTH CONDITIONS?

(Decatur) - Extension of Meals on Wheels program to other towns and rural areas * National standardization of drug prices and of writing prescriptions * Nutrition classes * Have drug costs covered by Medicare * Delivery service from drug stores * Petition AMA for hospital recognition of osteopaths and chiropractors.

(Decorah) - More homemaker services * Home-maker services in every Iowa county * County health nurse report to medical society on total number of elderly cases and health problems * Extra health insurance to cover medical costs * Centrally located health facility * See that all qualified men who want to study medicine are not banned by any organized group * Teach preventive health care at early age * Tighter controls on Medicare payments * Improve diet and balanced meals

(Dubuque) - More "home health services," such as home delivered meals to shut-ins, homemaker services or help with housekeeping, and home nursing services *
Extension of Medicare to cover eye care, dental care, hearing care, doctors' office calls, and chiropractic treatments * Medicare should lower its rates * Medicines should be available at discount rates that low income elderly can afford.

(Oelwein) - Meals on Wheels * Vitamin tablets for elderly * More adequate insurance coverage * Low income housing

(Monroe) - Prohibit drugs, alcohol, and tobacco *
Birth control * Eliminate Medicare insurance * Lower health costs for those who pay personally * Better care in health facilities * Annual check-up * A convalescent home here * Larger incomes

(Waukon) - Temperance in food and drink * A community hearing * Utilize the Kaiser plan.

(Waverly) - Better inspection of health care facilities * Information to elderly regarding available (health) programs * Lower prices on medicine

and medical costs * Extended Medicare coverage
 * Relax restrictions on nursing home eligibil-
 ity * Free annual check-up for elderly *
 Lower deductible for doctors and hospitals *
 "Who wants to live to be 100?" * More
 rest for the elderly * Consult Modern Maturity
 magazine * (Hire) a county nurse * More
 frequent garbage collection * Periodic health
 check-up

3. TELL ABOUT THE HOUSING PROBLEMS OF OLDER PEOPLE AND WHAT YOU THINK MIGHT BE DONE WHERE PROBLEMS EXIST.

(Decatur) - High cost of fuel, rent, and repairs *
 Shortage of help for chores around house *
 Stairs * Need for homes for aged in outlying areas
 * Suggest - construction of low-income housing
 for senior citizens * Finding someone to move in
 with lonely people, perhaps a student * Moving in
 with a friend * Volunteer program of low-cost
 repair and maintenance service.

(Decorah) - Living alone * Cannot afford repairs
 on available income * Too high rent *
 "I don't know of anybody without a roof over their head."
 * No bedroom or toilet facilities on first floor
 * Need smaller homes for older persons living
 alone * Housing far removed from services *
 One level housing * Suggest - more conveni-
 ent homes * Indoor plumbing * Low income
 housing * Rest homes at minimal costs *
 Not much can be done; just make the best of it *
 Free insurance and taxes on homes * Higher
 pensions and Social Security to help pay taxes and property
 improvements * "Some are old homes, but we try
 to make the best of it." * "Sometimes I wonder if
 it pays to grow old." * Lower taxes *
 When they are satisfied, leave older people where they are
 until they become helpless * Rent subsidy.

(Dubuque) - Adequate housing should be provided for elder-
 ly at prices they can afford on fixed income *
 Should have apartment complexes, built with all the safe-
 guards to protect the elderly * Low rent housing
 and apartments should be built close to downtown or
 shopping centers * Could lower rents by eliminat-
 ing fancy carpeting, stoves, and refrigerators; many
 elderly have these * What does the Commission on
 the Aging do about welfare lien law or what do legislators
 do? * Strong desire of people to remain in their
 own homes or apartments, living privately and independently,

but with help for heavy household and perhaps community dining and social rooms * Housing, in general, felt to be too expensive for elderly, ranging from low to middle income elderly * Middle income persons caught in a squeeze; can't qualify for subsidized housing and can't afford regular rental rates * Strong dissatisfaction expressed with nursing home picture *

Most frequent complaint - good nursing homes too expensive, lower priced ones too crowded and offer inadequate care.

(Harpers Ferry) - Housing not a problem

(Oelwein) - Maintenance of deteriorating homes *
Need low cost housing

(Monroe) - High cost of rent * Inadequate housing
* Large homes difficult to maintain *
Government waste * Upstairs apartments inconvenient for elderly * Suggest - lower rent *
More ground floor apartments * Lower property taxes * Low cost housing

(Waukon) - One respondent said there is no significant (housing) problem * High rent * Taxes *
Suggest - lower taxes, low cost housing

(Waverly) - Number of respondents indicated no housing problems * High cost of housing * High taxes * Maintenance of older houses * Too many steps to climb * Excessive rent *
Eligibility requirements too stringent to federally financed housing * Suggest - low cost housing and better location * Lower taxes and utilities *
Young people should contribute to solution * Go on county welfare rolls * Improved care and supervision of nursing homes * Compensation for those who rent to elderly * Public funds to those who maintain their homes * More liberal entrance requirements for low cost housing.

4. a) DO YOU KNOW OF OLDER PEOPLE WHO WANT PAID EMPLOYMENT?

(All) - Of the answers that were given specifically to this question, 60% said "No," 40%, "Yes."

b) ARE THEY ABLE TO GET PAID EMPLOYMENT?

(All) - 70% - no; 23.3% - yes; Others said "sometimes" or "I don't know."

c) DO YOU KNOW OF OLDER PEOPLE WHO WANT VOLUNTEER COMMUNITY WORK?

(All) - 62.5% - no; 37.5% - yes

d) IS THE COMMUNITY USING THEIR SERVICES?

(All) - 41% - no; 59% - yes

(Decatur) - Employment problems are - compulsory retirement * Age discrimination in finding jobs *
Difficulty in competing in job market when younger people with specific skills are hired first *
Lack of transportation to do volunteer work * Need for recreational opportunities *
retirement for men especially * Difficulty of Doing volunteer work in community *
Suggestions - Taking volunteer work, e.g., sewing or perhaps a child in need of help with reading, to the elderly shut-in *
Training for specialized jobs * Starting own businesses, baking, selling handiwork, etc., with education to help on pricing, wholesale buying of supplies, and marketing *
Help with marketing goods.

Additional comments -

(Decorah) - We have young people not working *
Many older people lack training and experience and are not able to accept possible employment *
Some would like paid employment but nothing is available *
Some seniors take turns visiting hospitals and nursing homes *
Not enough volunteers *
Employers want younger people

(Dubuque) - Post-retirement jobs are needed either for income or for the feeling of worth and dignity that goes with doing something useful with one's time *
Some mentioned need of opportunity to learn skills for a part-time job.

(Monroe) - Baby sitting, sewing, light nursing are available if people were not so choosy *
Some of the young are even unemployed *
I keep roomers to supplement my Social Security.

(Waverly) - Too many employers will not hire even the qualified older person *
Employment for elderly is not a problem in this community *
Many elderly are unable to work because of poor health *
Young people can do twice the work of an elderly person *
Waverly Senior Center is trying to promote

volunteer work * Someone must be kept promoting
(volunteer work) or it soon becomes a lost cause.

5. a) IS "CONTINUING EDUCATION" OF INTEREST TO YOU?

(All) - answers almost evenly divided yes and no

b) WOULD YOU ATTEND CLASSES IF THEY WERE AVAILABLE?

(All) - 58.2% - no; 41.8% - yes

Additional comments -

(Decatur) - Suggest classes in crafts and hobbies

(Decorah) - "I have poor eye sight to attend classes."

* Too old to learn something new * "I
am quite interested but am quite old to start to learn
any more * "I am too old to go to school *

"If I were younger, I would like to continue my
education." * "We both attend some classes, but
since we both have graduate degrees beyond college, some
classes are not suitable" * Cannot drive to school

(Dubuque) - 15% of respondents state they would like
opportunity to learn and pursue various hobbies and crafts

(Monroe) - "We have our own regular reading and study"

* Transportation would be a problem *
Classes must be during day * "When we are old we
don't need schooling, we only need comforts of life"

* Senior citizen center has some good projects
* "I would like a 'serving' course."

(Waukon) - Interest in training in use of electric type-
writer, world problems, contract bridge, and upholstery

(Waverly) - Senior citizens clubs provide classes in
arts and crafts * Too old to attend *

Older people would feel better if they would keep occupied

* Prefer daytime classes * Too crippled
and tired * Am working, not much spare time *

Would like to attend worlds events' classes *

Would like good golf lessons and pointers on stock
market * Transportation to classes would be a

problem * Classes would be mostly for hobbies
and hobbies do cost money.

6. DESCRIBE YOUR CHURCH PROGRAMS FOR THE ELDERLY ...

a.) (Decorah) - Visitation, transportation, church dinners, Bible study groups, women's groups, mission study groups, quilting

(Harpers Ferry) - None or "if there is, I know nothing about it around here."

(Oelwein) - Pot-luck dinners monthly, church club for widows, church bazaars, sewing and quilt making, Bible study for elderly

(Monroe) - Bible study for elderly, worship services for elderly, missionary projects, visitation to elderly and shut-ins, transportation to Sunday services, Communion, Mass, and Lord's Supper

(Waukon) - Visitation, Sunday classes and worship

(Waverly) - Sunday school class for elderly *
Transportation for elderly to church service *
Visitation to ill and feeble * Women's and
men's organizations * Groups make lap robes
and bandages * Provide food for funerals
* Prayer services

b.) PROGRAMS OUTSIDE THE CHURCH IN THE COMMUNITY

(Decatur) - Make use of Crosslines organization for putting volunteers in touch with elderly who need their services.

(Decorah) - Senior citizens centers * Vol-
unteer services * Mental health programs
* Crafts

(Monroe) - Bus tours * Involvement in senior
citizen center * Improving community con-
ditions * Provide volunteers for delivery
of meals on wheels.

(Oelwein) - Visiting in rest homes * Craft
classes * Card playing

(Waukon) - Senior citizens programs * His-
torical society

(Waverly) - Activity in senior citizens center *
Visitation by deacons * Visitation to
lonely in institutions * Transportation in

community * Radio ministry * Prayer
services

Additional comments -

(Decorah) - "Elderly need to utilize church radio programs."

(Waverly) - "The only attention the elderly receive are the death and funeral notices" * "The church spends much time and material getting offering envelopes to elderly." * "No one has ever called me in the 26 years I have lived here to talk about a church program for the elderly." *
The church utilizes volunteer work of the elderly at church * "Women of the church call on all elderly in the community at such times as Easter and Christmas."

7. a.) WHAT DO YOU DO WITH YOUR TIME? b.) WHAT ARE YOUR MAJOR ACTIVITIES?

Major activities are those which are connected with the home and it was on these that most time is spent....such activities as household duties, watching TV and listening to radio, reading, sewing, hobbies, etc.

Other activities mentioned were visiting club and lodge work, travel, church work, etc.

(Dubuque) - 70% felt use of leisure time is "somewhat of a problem" * 11% feel there is need for inexpensive planned recreation for older people * 5% mention need for special rates to various types of entertainment * Should have free fishing and hunting licenses for all over 65 who want same * Have need for a local meeting place * Why aren't county home rooms opened to the elderly when so desperately needed? * Seems that America is an "elderly-rejecting" society * Need a massive effort to change attitude toward elderly * Project Concern is tops; it should be kept this way for all time in future * After 65 they don't want you to work, but you don't have enough income to work on. Jobs needed.

8.

EXPERTS SAY THAT MANY OF THE ELDERLY, REGARDLESS OF THE SIZE OF THEIR INCOMES, ARE NOT EATING THE RIGHT KINDS OF FOODS FOR VARIOUS REASONS. WHAT ARE YOUR IDEAS ABOUT THIS?

(Decorah) - Elderly people do not eat right *
"I buy what I want to eat and do a little cooking"
* They don't want to bother to cook for one
person * Food doesn't taste good to some when
they have to eat alone * Not enough money
to buy right kinds of food * Difficult to cook
for one person * Inability to shop regularly
* "We are doing fine, don't know about
others " * Meals-on-Wheels * Utilize
food stamps

(Dubuque) - Milk shouldn't be so high *
Grocery stores should have discounts to elderly on
basic items

(Monroe) - Self discipline or temperance is needed
* "Boarders cannot be choosers " *
Cooperative meals or Meals-on-Wheels help *
Loneliness affects one's eating habits *
Cooking for only one is a problem * High
food costs are a problem * Lack of transpor-
tation to market for daily specials * Most
elderly eat sparingly and sensibly * Food
storage is a problem due to limited space.

(Oelwein) - The elderly couples are eating properly
* Cooking for just one is a problem *
Loneliness affects good eating habits * Meals
on Wheels helps.

(Waukon) - Need for self discipline * Lone-
liness hinders good eating habits * Exten-
sion classes on nutrition

(Waverly) - Small portions of cooked food are not as
palatable as larger portions * Not enough
money to buy adequate meals * Advanced age
decreases appetite * The fast pace of living
doesn't give a person enough time to eat *
Eating in solitude affects a person's appetite *
Quickie type foods from the supermarket are not
nutritious * "Some think they can take their
money with them and are too tight to spend it for
food" * Grocery shopping due to lack of
transportation is a problem * Doctors and

dieticians educate the public on proper diet *

Channel the surplus foods into Meals on Wheels *

Need recipes with menus for one person *

Small packages of food at reasonable prices *

Invite friends to eat with you if you are alone *

Children should be made aware of the poor eating habits of parents

9. IN THE MATTER OF TRANSPORTATION, DO YOU HAVE ANY TROUBLE GETTING AROUND? IF SO, WHAT IS THE PROBLEM?

(Decatur) - Need for transportation to church, shopping, visiting, etc. *

for rides * Elderly often too proud to ask

licenses * Problems with restrictions on drivers' service in Lamoni * High cab fares * No taxi

grocery stores * Need for deliveries from

Hazardous sidewalks, especially in winter *

As solutions, suggest - improve sidewalks *

Groups, like churches and community centers, purchase buses * Hire neighbors * Special taxi rates at slack times of day * Allow purchase of taxi script at a discount * Petition taxi service for group rates * Volunteer transportation

* Let older person who is too proud to accept rides (many felt this is false pride) make small donation to help with gas and make him feel better.

(Decorah) - Fear of losing bus service was expressed *

Organized assistance by families, friends, or organization can help greatly * Those with and without transportation problems seemed quite evenly divided.

(Dubuque) - Participation in leisure-time activities would be greater if it were not so difficult for older persons to get places * "Don't care if bingo ever comes back. I would rather see the buses keep running"

*

(Monroe) - Loss of drivers license due to old age *

No car * "I live close in" * Taxi service too expensive * No buses or street cars

(Oelwein) Fear of losing driving privilege in old age

(Waukon) High cost of car insurance

(Waverly) "I do not drive" * No taxi *

Not enough money * Very few people are willing to volunteer their services * No bus * "I do not like to bother anyone for a ride" * No train

10.

MISCELLANEOUS

(Decatur) Volunteers visit shut-ins * Take
lonely people to visit other lonely people * In-
vite elderly into homes for meals * Take them to
community events and for car rides * Write letters
for them * Telephone re-assurance program *
Volunteers do errands for shut-ins * Use news-
papers and posters to advertize events and services avail-
able * Senior citizens newsletters

(Dubuque) "Why have the politicians who talked loud and
long when they were running for office tell us how they
were going to help the old people so far they have
done nothing!"

Quota International, Inc., Seventh District of, Marjorie E. Beales,
Governor, Sioux City, July 2, 1970

Work with aging is primarily in nursing and county homes.
Club reports for previous year show: Waterloo, Christmas
party gifts and treats, County Home; Ottumwa, "wheel chair"
fund for elderly gentleman; Sioux City, turkeys for Golden
Age Club Thanksgiving party, nursing home visits and gifts,
transportation for nursing home residents to tour rose
garden and attend band concert; Cedar Rapids, 180 May
baskets for nursing home; Davenport, exploring possibilities
of providing glasses and dental repair for aged living on
small pensions special courtesies for older members
of organization.

Consider there "is a great potential for work among the
aged" and would appreciate informaion, material and
suggestions to turn over to committee chairmen of nine
clubs for study and possible strengthening of program
"by including more work with the aged.

Retired Teachers Group, Teresa Tullis, Helena Mendenhall, Grace
Cox, Leon, Iowa, August 28, 1970

Income desired for comfortable living Utilize county
nurse Regular physical check-ups Low cost housing
needed Employment needed such as library work, re-
ceptionists, baby sitting, church secretary, clerking
.... Night Adult Education classes Help and invite
people to go to church Community center needed
"Crosslines" recommended "Meals on Wheels" needed
.... Transportation needed to church, shopping, etc.

Richmond, Mrs. Margaret, Lovilia, August 18, 1970

All aged people should be able to stay in their own homes as long as possible Mail delivery needed in Lovilia Help in home has been a real help to some that have been ill or have broken bones.

Roth, Richard and Dick Singsank, high school students, Burlington August 11, 1970

Circulated a questionnaire to 200 older people in community and received 85 responses which showed -

Housing - 49 live in own home; 3 rent house; 8 rent apartment; 3 rent room; 28 live alone; 19 live with wife or husband; 10 live with relative; 1 lives with friend 47 cook own meals; 16 eat at restaurant, 3 eat at boarding house 48 have convenient access to telephone 15 own and drive own car; 36 have someone who provides transportation; 22 ride bus all or part-time 19 of bus riders feel bus services are adequate for needs, 22 do not 2 said additional bus services are needed The biggest problems of older people were listed as high taxes according to 23; high cost of living, 20; loneliness, 18; failing health, 15; medical expense, 13; low income, 10; transportation, 6; help with home, 4; rent, 3; and lack of contact with youth, 2 32 don't think there should be more organized citizens groups, 19 say there should be For recreation they enjoy visiting with others, 39; TV, 32; radio, 22; games, 20; reading, 15; live music, 5; live plays, 1 37 said communication between older and younger people should be increased, 6 said they don't think so 45 said they had heard of the Burlington Autumn Heights low-rent apartment project, 5 had not, and 23 believe that more low-rent housing projects are needed, 33 do not think so.

Royal, Mrs. Frederick A., Des Moines, September 15, 1970

Chief problems of older people: being alone, health, something to do, money Retirement homes not a substitute for own home Giving up own home and old friends and neighbors can be "a serious mistake, psychologically Major need is a visitation corps, like peace corps, plus an expanded public nursing corps for home visits to keep tabs on health of older people

Sabula, Community of, Lloyd L. Mangler, Mayor, June 29, 1970

No kinds of tax support or other programs or services for older residents Need a program for older citizens

so they can play, work and live together Would proceed to do this if state and/or federal funds could be made available. The Commission on the Aging could help in getting funds and planning programs

Sabula Senior Citizens, letters from Mrs. Albert Hatheway, Mrs. Eva Haynes, Mrs. Elizabeth M. Henricksen, Mrs. Florence Norskov, Sabula, May 26 - June 3, 1970

Most of older people in community are widows Many unable to drive for needs due to age and health No grocery store deliveries No doctor or dentist in town (Is there anything we, as Senior Citizens, can do to secure someone to fill this need?) (Would it be possible to have a doctor or two come from Iowa City a day a week to take care of ailing?) Dependent upon friends and relatives "even for their mail" No bus service Trains don't stop Need local newspaper badly Wish to stay in own home Hope to be able to stretch Social Security and pension check to cover needs Want way to get out of town occasionally to shop and attend some functions"that are of interest to me."

Suggestions offered: a doctor to give his time once a week to Sabula, a bus once a month for shopping in a larger community for things that cannot be purchased locally, rate on utilities since "some have meager incomes," housing so "responsibilities would not be so great" in keeping up a home, yard, decorating, carrying burden of heating, etc., one square meal delivered to needy daily at reduced price by volunteers, bus tours once a month during nice weather.

Sigourney Chamber of Commerce, Rufus H. Hoffman, Secretary, July 4, 1970

Businesses of community are greatly affected by what happens to retired Senior Citizens Priority needs - more adequate pensions for those over 75, Medicare coverage of medication (older people still belong to group who want to make own way and look upon relief as a social cancer), tie Social Security to cost of living, low cost housing controlled by state or national government (minimum rent of two private plans being put into effect in Sigourney will be \$75 to \$135 per month. How can \$60 (per month) pensioners afford this, let alone utilities and food?), food stamp program - excellent but being made inoperative through greed of some who should not qualify while thrifty, honest persons are often ashamed to apply.

Property taxes need revising to allow taxes to be paid more often but in smaller amounts. Sales tax or even higher income tax would spread cost over "a longer, less painful period."

Lacking Social Security and retirement plans, business men would be unable to offer present merchandise and services as one-third to one-half of day to day purchases are made by those receiving support checks of some kind.

Locally A.D.C. and relief payments exceed Social Security and "some of the claims are doubtful as to their legitimacy."

Singsank, Dick, high school student, Burlington, See Richard Roth

Small Business Administration, Edgar J. Koch, District Director, Des Moines, November 3, 1970

The Service Corps of Retired Executives is a current program employing the services of retired people Private financing of nursing homes or related type facilities is restricted to these for profit small business concerns. SBA personnel also is involved in assisting non-profit organizations in the management areas.

Management assistance personnel have also taken part in committees and seminars held at Drake University and community groups to help them implement business assistance to the elderly and other applicants. The SBA Equal Employment Opportunity Representative, Mrs. Glanton, acts as liaison in the Model Cities Program and also in the Des Moines Oak Ridge Program.

Continuing efforts of SBA are to implement hiring practices in the office to respect ability at any age.

St. Mark Senior Members and Scott County "Meals Service" of the Commission on the Aging, Mrs. Herbert Neumann, R.N., Director and Chairman respectively, Davenport, September 15, 1970

Reported results of a questionnaire of senior church members

Income - older people "insecure incomewise," especially those who had felt home ownership offered security. Old house keeps them from getting assistance, repairs high, and sale of house is "no where near enough to finance nursing home care." Social Security limitation on earnings prevents them from full-time employment.

Health - drugs, hospital costs remain high. Medicare has helped; if not abused would be good answer to needs of elderly.

Housing - no low cost housing for our older folks. They live in apartments with long flights of stairs, over businesses, etc., for which "they pay way over what the places are worth."

Employment - compulsory retirement at specific ages creates problems.

Education - very fine Adult Education opportunities at night Commission on the Aging working toward inexpensive afternoon classes.

Spiritual Well-Being - churches becoming more aware of how they can enrich lives of elderly Have facilities available, just need to encourage people to train themselves to work in various programs using these facilities Seems Church - at - large could well finance such programs and many do.

Retirement Activities - most older people have decided they have served their time in activities Prefer to have activities planned for them Need encouragement to participate Centers which "offer a variety of activities would be fine, including food facilities."

Nutrition - elderly on limited incomes tend to limit food budgets first Difficult cooking for one or two persons Eating alone "doesn't improve diet intake either" Meals service provides a daily visit, eliminates need for meal planning, and provides foods that would be too expensive otherwise.

Transportation - just getting to church or doctor is a problem Volunteer organizations, such as FISH, help

Available Programs And Services - volunteer programs are significant Should not expect government assistance in all areas Needed in housing, however Community has FISH organization, some senior citizen centers operating weekly, senior social activities in churches, Dial-A-Listener and Meals Service under Scott County Commission on Aging Tried educational classes (daytime) "which were great but program fell through due to lack of promotion" adult education director most cooperative.

Needed Activity - would be "very nice to have senior citizen center in inner city which provided food services, crafts, activities, etc. daily, even Chapel Services on Sunday"

Tama Chamber of Commerce, Arthur Mason, President, Hugh Hill, Secretary, Tama, August 1, 1970

Federal minimum wage law makes it impossible for many industries to hire able bodied persons over 65 who are willing to work for less than established minimum hourly rate and can perform many of required duties Suggest removal of this restriction "to enable many of the elderly people to augment their Social Security and live a better life" For same reason, raise "limitation of the amount an elderly person on Social Security can earn."

United Community Services of Johnson County, Mrs. Roberta Patrick, Executive Secretary, Iowa City, July 27, 1970

The needs of older Iowans in Johnson County in order of importance are: housing, transportation, health clinics, social activities, employment, and help in budgeting, availability of free or nominal cost services, and break in property and income tax The older citizen needs to be informed about what agencies are in existence for his use The older citizen needs more social contacts The community must lead existing agencies to expand or upgrade services, where necessary, while the agencies must keep the community informed as to their needs and services

United Fund of Mason City, Herbert B. Bowe, Executive Director, Mason City, July 24, 1970

A local senior citizens association operates a center which is open six days a week with planned programs. The center is financed by memberships and a grant of \$2,500 per year from the City Park Commission. This amount is applied to salaries for the couple that oversees the program and for the rent for the facilities. The program is composed of table games, dancing, facilities and program for ladies who sew, plus Wednesday programs which consist of planned activities by special clubs.

United Nations Association of the United States of America, Inc., Iowa Division, C. G. Douglass, Executive Director, Marion, May 16, 1970

For retired persons, association offers on an individual basis opportunity for "serving a great cause and finding

niches in our various projects, including recruitment for international assistance endeavors" The address, for older people who may wish to serve, is United Nations Association, Iowa Division, 2440 Northview Drive, Marion, Iowa 52302.

United Presbyterian Church, Reverend Richard Kiefer, Pastor, Dallas Center, August 6, 1970

Interest in recreational center and senior citizen organization Many expressed interest in pot-luck or buffet meals Many would appreciate a phone number to call in an emergency, or for help with transportation, shopping, etc. Project suggestions: "Adopt a Grandparent" program; taped sermons for shut-ins; a help-the-physically handicapped work committee

United Way, Siouxland, Sioux City, July 6, 1970

Priority needs of older Iowans in Sioux City: retirement preparation, protective services for aging. extended care, housing, Meals on Wheels There needs to be a better use of existing agencies in the community The tendency is toward setting up a separate single purpose administrative and planning structure. The result is that most of the findings support a new structure and the target population is not reached.

University Extension, Iowa State University, Marvin A. Anderson, Dean, Ames, February 2, 1971

Summary of existing programs relating to older Iowans

1. Mass Media

- A. Newsletters. Extension newsletters mailing lists include over 24,000 names, including senior citizens.
- B. Radio programs.
 - a) The "Sixty-Plus" program is a thirty-minute weekly broadcast on WOI, Ames, designed for those in or near to retirement.
 - b) Radio programs are presented by Extension Home Economists throughout the state to deal with problems and concerns of the hard-to-reach senior citizen
 - c) Non-network Extension programs on local TV stations aimed directly at the needs of the elderly are presented periodically.

2. Senior Citizen Groups.

Home Economists throughout Iowa have been actively engaged in organization of senior citizen groups In an urban area, a citizen's center was organized which provides a 50¢ meal at noon as well as a meeting place for the elderly.

3. Supportive programs are provided in all parts of the state. Examples of food and nutrition, clothing, recreation and human development program titles are: "Right Eatin' Keeps you Swingin'"

"Adventures with Eating" - general nutrition information
"Eating for Two"
"How to Use Food Stamps"
"Clothing for the Elderly"
"Creative Use of Leisure Time"
"Hobbies"
"Psychological Needs of the Elderly"

Supportive publications for the above programs are available through the Extension Service.

4. Training Programs.

Organization of an on-going training of staff in Homemaker-Home Health Aide Service and Meals on Wheels. Training for personnel in other agencies and organizations, nursing homes and retirement homes in meal planning, nutrition education, crafts, recreation, hobbies, household equipment, consumer problems. Training for recreational directors of nursing homes and retirement homes in a 14 county area.

Special Extension courses for cooks, managers, supervisors of nursing homes and retirement homes held on the University campus through the Department of Institution Management.

These existing programs and activities for older Iowans will be continued and expanded to serve increasing numbers of the elderly in the future.

Increased financial resources provided by the state would enable Extension to:

- a) Provide further study and research on how to reach the elderly, the existing services and how communities can become aware not only of the needs of the elderly, but ways to include senior citizens in the mainstream of community life.

- b) Train personnel in nursing homes, retirement homes and other professionals working with the elderly.
- c) Prepare materials to assist with the needs of the elderly ...
- d) Assist communities to implement the process and means for expanding service to the elderly in:

- Homemaker-Home Health Aide Service
- Meals on Wheels
- Transportation
- Shopping Services
- Work with volunteers for one-to-one contacts
- Senior Citizen Centers

Waterloo, Community of, Edgar A. Cupp, Coordinator of Older Citizens' Activities, July 2, 1970

There are 26 senior citizens organizations Membership 2116 All sponsored. Most groups meet twice each month, a few monthly, one meets quarterly and two meet weekly. The activities of all groups are mostly recreational All senior citizens have problems of one kind or another, the worst being loneliness Enough money to live on is the problem with some Housing is a big problem Protection of person and property is becoming vexations problem Transportation is a big problem To help solve some of these problems a North East Iowa Council on Aging was formed Iowa Commission on the Aging can help by becoming (if possible) the one state agency through which are funneled all senior citizen affairs. And by taking all the various groups 'under its Wings' to help in their activities providing guidance in all fields of senior citizen endeavor making suggestions for programs for group meetings; might even become a clearing house for movie films, or sponsor an entertainment group to visit some cities where many senior citizens could gather for the program issuing a news sheet with information about activities of local groups in the state. We get so much material about senior citizens that is not understood; is not interesting and so not read. One good news sheet would be supported financially I am sure keeping alert to the financial and housing needs of senior citizens and using its influence to help answer those needs promoting senior citizen activities in places where there are none.

Waukon Senior Citizens Club, Mrs. Irene Deeney, Secretary, Waukon,
August 5, 1970

Annual sale of crafts provides money to purchase materials to continue their work

Williams, Mrs. Tessa, Osceola, July 2, 1970

Peeved at removing tax freeze and using it to increase government officials high salaries Social Security increased benefits should be an equal amount to each person instead of on a percentage basis Interested in low-rent housing High and unreasonable costs for doctor's service and medicine

Winterset Sixty Plus Club, Mrs. George Montross, Director, June 25, 1970

Multipurpose center sponsored and paid for by government Transportation is the biggest handicap A low rent housing project of 47 units is underway

Woodward, anonymous letter, June 10, 1970

Problems of elderly: to have adequate income, taxes on homes too high, can't find anyone to help around home and yard or prices too high, no door to door mail service, need good restaurant (only sandwich places available), cheaper banking rates for seniors, no grocery delivery, need another doctor, need telephone callers, taxi service, better police attention, especially for older people, low cost housing will be too "high rent for some of our older people," need transportation to church or church brought to shut-ins, churches need ramps or shorter steps for elderly and handicapped, need more school and church relationship such as afternoon adult classes in knitting, hobbies, crafts, Bible lessons, and minister should be calling more

Zenishek, Mrs. Albert, Mechanicsville, May 12, 1970

Local churches now have a coffee hour in the morning with speaker, slides or other entertainment but "most of us would prefer afternoon" with both men and women attending to play cards or have a craft project "Want fun and not so much education" Worry that "you can't get help to care for you at home and we've seen too many go to nursing homes and die of loneliness"

PUBLIC HEARINGS ON THE AGING AND OTHER ACTIVITIES RELATING TO THE
WHITE HOUSE CONFERENCE ON AGING

September 22, 1970 to February 11, 1971

Iowans depend upon Congress and the Iowa General Assembly for major leadership in aging programs and services.

They expect workable suggestions and proposals to come from the 1971 state and national White House Conferences on Aging and to be presented effectively to state and national legislators, the Governor, and the President.

Iowans do not feel, however, that the legislative halls and administrative offices of Des Moines and Washington are the only sources for answers to the problems of older people, nor to the development of local aging programs and services.

They know and speak of their own responsibilities, the responsibilities of younger people, older people themselves, and the state's communities to the aging. This was made clear in hearings that were held and studies that were conducted in eight selected communities during 1970 and 1971 leading up to the conferences.

It was especially evident in Marshalltown where it was said, typically, in effect, "If the older people were to make a thorough follow-up of their problems and the causes of them and put into action solutions they themselves (have) suggested, if other people of the community would come in and participate in aging programs and services because state and federal government can't do it all, then Marshalltown and Marshall county would seem to be pointed toward new progress in improving life in the later years ..."

So it was in the other communities which were selected on the basis of size and location to represent similar cities and towns in the state. In addition to Marshalltown, population, 25,739, using the latest figure available at the time of the hearing, the communities were Adair, 770; Sidney, 1,064; Elkader, 1,599; Humboldt-Dakota City, 5,296 combined; Burlington, 32,029; and Waterloo, 75,994.

In Adair a respondent said the community had to answer the question "Where do we go from here?" In Sidney another respondent said, "Every club and organization should be asked to participate (in follow-up to the hearing)."

Elkader: "One of the things that could come out of this hearing would be suggestions of ways churches could help."

Humboldt-Dakota City: the mayors joined in appointing a committee to pursue ideas brought out at the hearing there; Burlington: mayor urged older people to take an active part in interpreting what they want and in initiating these services; Waterloo: mayor recommended formation of a local coordinating commission on the aging.

"We need to be sure enough is being done," the Waterloo mayor said.

It was seen that there has come to be strong awareness of the problems of aging, and although there is groping about how to proceed, there is desire to do something.

Considering that older people are first of all residents of their communities, the community should lead the way with concern for them, and state and federal agencies should go to the communities to help, with no partiality, urban or rural, problems being practically the same wherever people live.

In the selected communities, beyond what was learned in questionnaires and comments sheets distributed prior to and at the hearings, various suggestions for action were made.

It is hoped that leaders in other Iowa communities will get ideas from these and that the suggestions will also be helpful to local, state, and national leaders.

More complete details are given in the full reports of the hearings, a limited number of copies of which are available upon request.

The "action suggestions" follow.

INCOME AND MONEY PROBLEMS	SUGGESTED LOCAL ACTION	SUGGESTED STATE ACTION	SUGGESTED NATIONAL ACTION
<p><u>Causes of:</u> - No regular savings program during earning years</p> <p>* Inflation *</p> <p>* Heavy family expenditures during early years *</p> <p>Disinterest on part of legislature and others in helping raise quality of living for older citizens</p> <p>* Lack of employment, often due to poor health.</p> <p>Problems -</p> <p><u>Inflation</u> is reducing the economic status of an increasing number of elderly to close to the poverty level</p> <p>* Incomes are inadequate</p> <p>* Rising prices, difficulty of meeting needs on fixed incomes * High insurance rates, medical costs, hospital expenses</p> <p><u>Taxes</u> - too high, seems to be mismanagement of government funds * May have to give up home * Please try to make things a little easier for those who courageously continue to carry their own tax burdens *</p>	<p>Tighten credit</p> <p>Lower rents</p> <p>Build more low cost housing</p> <p>Children should assist with care of parents where possible</p> <p>Remember duties and responsibilities as citizens.</p> <p>Write congressman. Vote.</p>	<p>Force Blue Cross andMedicare to pay up</p>	<p>Freeze wages</p> <p>Evaluate monies of all retir and help lower income bracke to be subsidized enough to l in simple dignity</p>
	<p>Cut taxes by eliminating unnecessary local</p>	<p>state and federal spending</p>	

INCOME AND MONEY PROBLEMS	SUGGESTED LOCAL ACTION	SUGGESTED STATE ACTION	SUGGESTED NATIONAL ACTION
<p>Social Security - inadequate to cover basic needs *</p> <p>Social Security and Old Age Assistance "which some are getting is not enough to live on" * Elderly people can't live on Social Security but "if Social Security is raised, taxes cannot be lowered because taxes support Social Security" *</p> <p>The "over 65 should be able to continue to keep employed and not lose any Social Security" * When one retires on Social Security, have to pay it back in city taxes and state taxes on food and clothes * Now, you talk about raising Social Security 15 per cent. The fellow that's getting a little check gets a little raise. The fellow that's getting a big check gets a big raise. Does that sound right to you?</p>	<p>Find way to provide older people reassurance or security in future. They remember depression days and often refuse to spend for what is needed because of fear.</p> <p>Organize elderly into an effective political group that could help solve problems of oldsters.</p> <p>Part-time jobs to "earn a little extra"</p> <p>Such groups as at this hearing "should commence work on this to see if something can't be done."</p> <p>Have no compulsory retirement age</p>	<p>Allow tax freeze. Relieve taxes so homeowners can remain in homes rather than go to county home.</p> <p>Organize an elderly political lobby. ("Let the legislature know how important you are.")</p> <p>Legislation to stop deducting money from welfare checks of senior citizens getting Social Security</p> <p>Same</p>	<p>Raise Social Security for those in need</p> <p>Should be able to collect own Social Security plus pension, like veterans</p> <p>Earnings should belong to employee without loss of Social Security with no age differentiation between 65 and 72 * Let people earn all they can "to their ability after they are 65" * Don't deduct from extra earnings</p> <p>Same</p>

INCOME AND MONEY PROBLEMS	SUGGESTED LOCAL ACTION	SUGGESTED STATE ACTION	SUGGESTED NATIONAL ACTION
<p>* One couple said with aid of Social Security, Medicare, and Medicaid able to live with daughter and pay own way. No complaints.</p> <p><u>Guidance</u> - needed by elderly for management of money and property * Needed in obtaining special assistance in planning living on a limited income and in obtaining food stamps * Needed for assistance in business matters. E.G. - An elderly woman lives in her own home. Unable to continue living alone. Aware of this but unable to make decisions, even though she knows she needs institutional care</p>	<p>Money and property management personnel in community could become more aggressive in advising about help they have to offer</p> <p>Get help through welfare office</p> <p>Provide services of retired persons capable of giving advice and following through for services to fill a particular need. In this case volunteer might be a realtor or someone versed in business affairs.</p> <p>Start planning for "growing older" early in middle age or before</p> <p>More training for business skills</p> <p>Training in basic skills to help those who can work</p>		

HEALTH PROBLEMS	SUGGESTED LOCAL ACTION	SUGGESTED STATE ACTION	SUGGESTED NATIONAL ACTION
<p><u>Doctors</u> - need of more * won't accept new patients * Need more trained assistants and nurses</p> <p><u>Costs</u> - of medicine, office calls, private nursing, and hospital care are "beyond the means of these (older) people" * Older people can't afford to get sick and "if they do, what then?" * Failure to get needed attention because of limited income and high medical costs * Hospital costs very high; health insurance programs often misleading</p> <p>Medicines and drugs too expensive</p> <p><u>Hospitalization</u> - high cost of * (Local) hospital running under 50 per cent occupancy *</p>	<p>Chamber of Commerce working on this. Building has been purchased for a doctors' clinic</p> <p>Hospital board, town council, and all of these should be interested enough to work it out.</p> <p>Lower rates in nursing homes for those with low income.</p> <p>Assumption of responsi- bility for care of elderly by more families</p>	<p>More young students to take medical training; shorten years of training</p> <p>Train more persons in geriatrics</p> <p>Expand facilities of medical schools</p>	<p>Support measures in Congress to provide funds for medical schools that establish departments for teaching family doctors</p>
	<p>Search for ways for elderly to remain in their homes. Home is "the best possible place if you can stay there."</p> <p>Continue (local) efforts to get "another doctor or two to help the hospital."</p> <p>More house calls by doctors so that "hospitalization would not be necessary." Blue Cross and Blue Shield should pick up more of the "health tag"</p>	<p>Home is "the best possible place if you can stay there."</p> <p>Blue Cross should be made to pay up promptly</p>	

HEALTH PROBLEMS	SUGGESTED LOCAL ACTION	SUGGESTED STATE ACTION	SUGGESTED NATIONAL ACTION
<p><u>Insurance</u> - don't let insurance companies drop elderly; make them pay claims * Blue Cross and Blue Shield are not paying up</p> <p><u>Medicare</u> - claims not paid promptly * Welfare recipients get more health care and coverage in some instances than those on Social Security</p> <p><u>Medical services</u> - Community not clear about what is needed * Older people and others, too, find themselves going from place to place in an attempt to further physical and mental wellbeing. Often this involves transportation problems</p>	<p>Be sure to pay Medicare and Blue Cross and Blue Shield Comprehensive 65 premiums</p> <p>Part-time medical clinic or mobile clinic (medical, dental), instead of a resident doctor, may be one way to satisfy medical service needs</p> <p>Hold clinics where doctors consider income of elderly and charge accordingly</p> <p>More complete geriatric medical examinations with emphasis on prevention and bring at optimum health level.</p> <p>Plan ahead (yourself) "to get ready for illness."</p> <p>Acknowledge (yourself) that with age there "is no possible way of getting out of needing a little extra medical care"</p>		<p>Increase maximum Medicare coverage</p> <p>Perhaps have Medicare revised to pay for home nursing care</p>

HEALTH PROBLEMS	SUGGESTED LOCAL ACTION	SUGGESTED STATE ACTION	SUGGESTED NATIONAL ACTION
<p>Nursing homes - Worry about what will happen if and when health fails. ("Nursing homes are expensive. People can't afford to stay very long and not if on relief.) *</p> <p>Fear of having to spend "last years" (in nursing home or care center) sitting in a chair, staring at four walls, with no hope of ever getting out of there" *</p> <p>(Local) need for another nursing home; survey shows need of another 80 beds in county</p> <p>* Many of us unable to care for ourselves; every town needs a good up-to-date standard rest home supplied by a doctor, visiting nurse, social worker." * House converted into nursing home,</p>	<p>Provide a central facility - a therapeutic community - where most of such needs could be taken care of, perhaps on a monthly or more frequent basis. Staff center with various experts - physician, nutritionist, sociologist, physical therapist, psychoanalyst, nurse, pharmacist, and other specialists. Such an idea would need careful study by a well qualified task force.</p> <p>More churches should provide nursing homes</p> <p>More and better training for those who work and care for patients in nursing homes</p> <p>Give mentally capable patients in nursing homes something to do to help others</p> <p>Have a purpose room where activities can be held</p> <p>If (local) efforts to get doctor or doctors are successful, future community project should be another nursing home</p>	<p>Closer supervision of nursing home facilities so that patients get better and are not mistreated as is sometimes reported</p> <p>Subsidize nursing home care "which would lower cost ... through Iowa Commission on the Agency or other state agency"</p>	

HEALTH PROBLEMS	SUGGESTED LOCAL ACTION	SUGGESTED STATE ACTION	SUGGESTED NATIONAL ACTION
<p>often inadequate and over-crowded * Placing mentally and physically handicapped in same room is not conducive to regaining health *</p> <p><u>Extended care facilities</u> - When hospital stay ends, nursing home costs so high many cannot afford it. Need more extended care facilities.</p> <p><u>Mental health</u> - emotional concerns of elderly about conservation of money and health care particularly. "What will happen if or when I become incompetent?"</p> <p><u>Public health nurse and homemaker health aide</u> - needed to check on (older) people, especially those living alone</p> <p><u>Ambulance service</u> - should be a must</p>	<p>Anticipate and plan expansion of (local) nursing health center</p> <p>Take deeper look at feasibility of small extended care center</p> <p>Consider services of a visiting psychologist to serve the elderly in nursing homes and private homes upon recommendation of an M.D.</p> <p>Make detailed local studies of needs where these services do not exist</p> <p>Work out by local people; some towns are backed by fire department and county for ambulance service</p>	<p>Perhaps Iowa State Bar Association might develop an educational program to reduce frustration and fear; Iowa Bankers Association may be able to assist.</p> <p>Find ways to increase (services of) existing programs of regional health clinics; extend these to include visiting social workers trained to work with aging</p>	

HOUSING PROBLEMS	SUGGESTED LOCAL ACTION	SUGGESTED STATE ACTION	SUGGESTED NATIONAL ACTION
<p>Lack of local information on federal housing funds and federal housing programs for low-rent housing rental subsidy programs and for building loans to aid private senior citizens in re-designing their present buildings</p>	<p>Name someone in the community "to be a liason person, an interpreter, a public relations person, a local intermediary" to resolve the confusion about state and federal housing programs that are of benefit to the aging.</p>		
<p><u>Difficulty of elderly in maintaining their property</u> *</p> <p>Tendency to let houses become run down; inflationary maintenance costs; frustration and worry to trying to maintain too large a home *</p> <p>Scarcity of help in maintaining home. *</p> <p>But people "like to stay in own homes"</p>	<p>Mayor might appoint a senior for this.</p> <p>Organize a community project under an already organized group such as a church, the Commercial Club, or Lions Club to provide volunteers to help the elderly maintain property.</p> <p>Learn how other communities have solved housing problems of the elderly</p> <p>Organize work teams, supervised by retired contractors. Crews to be composed of retired craftsmen. Those able to do so should at least pay for materials. But seek funds for those unable to pay anything. Funding might also be arranged for craftsmen who need income.</p> <p>Eliminate maintenance worries by providing low-rent apartments in community</p>		

HOUSING PROBLEMS	SUGGESTED LOCAL ACTION	SUGGESTED STATE ACTION	SUGGESTED NATIONAL ACTION
<p>Rising cost of rent - People "really do not qualify for the governmental grant for low rent apartments because their income is above standards"</p> <p>Economic conditions and a tight housing market are forcing low-income persons, including the elderly, to seek housing outside of community.</p> <p>Need of "facility available to the elderly, a retirement home, an apartment house or something where elderly can live." * Only a few small apartments on first floor * Low income housing often away from transportation *</p> <p>Need middle income housing, such as individual houses (small) with central gathering place and dining room"</p>	<p>Establish "chore" services</p> <p>Establish "homemaker program in our county."</p> <p>Call in a teen-ager. "They love to do things for the older people, but do something for (them) in return."</p> <p>Pursue low-rent housing project which is underway</p> <p>Take initiative as a community to determine housing needs</p> <p>More low cost housing near activities (church, store, etc.)</p> <p>Practice fair housing</p> <p>More small, first floor apartments</p> <p>Lower taxes and rent for those over 65 with income of less than \$4,000</p> <p>More reasonably priced nursing homes</p>		<p>"Why can't they have some of their rent subsidized?"</p> <p>Look into possibility of help through Farmers Home Administrative loans for apartments</p>

HOUSING PROBLEMS	SUGGESTED LOCAL ACTION	SUGGESTED STATE ACTION	SUGGESTED NATIONAL ACTION
	<p>Government should build rest homes</p> <p>More self care units, more little retirement apartments where emergency help would be available</p> <p>Open more individual homes to aging citizens on a boarding basis, but the occupants of the home treating the older person as a family member rather than a boarder</p> <p>Remodel local hotel</p> <p>Consider a retirement home in medium rent bracket ... or cottages on a campus-like property with small garden plots ... or apartment house for governmental resources ... non-profit</p> <p>Secure information on ways elderly can remodel older large homes into apartments for increasing income, reducing housekeeping tasks, and, as a side effect, offsetting loneliness.</p> <p>Explore development of a zoned mobile-home court for aging persons.</p>		

HOUSING PROBLEMS	SUGGESTED LOCAL ACTION	SUGGESTED STATE ACTION	SUGGESTED NATIONAL ACTION
<p>Loneliness of people living alone yet they don't want to give up their homes</p> <p>Hard for the aging to climb stairs</p> <p>"People like to live in their home - worked for it, struggled for it, and perhaps their mate is dead and that makes home that much more precious."</p>	<p>Extend help to older people in "learning how they can remodel their older homes into apartments to help increase their incomes and reduce loneliness"</p> <p>Put "low-rent housing on ground floor"</p>		
EMPLOYMENT PROBLEMS	SUGGESTED LOCAL ACTION	SUGGESTED STATE ACTION	SUGGESTED NATIONAL ACTION
<p><u>Many seniors need income</u> in addition to Social Security, pensions, etc. * Many would like to stay employed past the retirement age *</p> <p>Need to be a contributing member of community with opportunity to do what they (older people) are able to do</p> <p>* General unhappiness about not being needed as a worker * Lack of employment or work opportunities for elderly * Feeling that older people may be more dependable than youth because of experience</p>	<p>Encourage older people needing part-time employment to apply to the Iowa State Employment Service which is doing good work with an interviewer giving special attention to the needs of the elderly. Encourage employers in need of part-time help to consult with the service.</p> <p>Could we have a committee or at least one person to take on the responsibility of seeing that work wanted and elderly persons can get together -- a registration office?</p>	<p>Retrain older workers</p>	<p>Decide between employee and employer when people have to retire; it is "not for the government to tell them."</p>

EMPLOYMENT PROBLEMS

SUGGESTED LOCAL ACTION

SUGGESTED STATE ACTION

SUGGESTED NATIONAL ACTION

Give help to employee and volunteer agencies to provide work opportunities for aging

Begin urging Iowa Development Commission and OEO to seek industry which would capitalize on the skills and limited energies of our aging.

Attract small industry where only people over 65 would work just enough to earn within limit allowed under Social Security.

No moonlighting - just one job per person

Have special retirement agency that would help those able and needing work to find it

Some form of retirement pay is needed

Plan projects to utilize skills of retired people

Provide a retirement job advisor to whom older person could go for advice about jobs

EMPLOYMENT PROBLEMS	SUGGESTED LOCAL ACTION	SUGGESTED STATE ACTION	SUGGESTED NATIONAL ACTION
<p>Personal factors</p>	<p>Think early about retirement years and learn to do other jobs</p> <p>Don't expect government to support you</p>		
CONTINUING EDUCATION PROBLEMS	SUGGESTED LOCAL ACTION	SUGGESTED STATE ACTION	SUGGESTED NATIONAL ACTION
<p>Continuing education has become "more and more crucial" in retirement years</p>	<p>Free courses for jobs or hobbies - writing, typing, printing, crafts, sewing</p> <p>Encourage local public education system to take "long look at continuing education responsibility community has to senior citizens."</p> <p>Extensive planning required if anything "is to really come about" in this field</p> <p>Make church buildings available for use of aging for continuing education opportunities. These buildings are "empty most of the hours of the week."</p> <p>Plan help for aging persons to increase their use of films, tapes and records</p>	<p>Petition University of Northern Iowa, State University of Iowa, or other state owned school to develop a training program to train students to assist with short courses for the aging in Iowa communities.</p>	<p>Include pre-retirement training programs as part of the procedures preceding personal applications for Social Security benefits.</p>

CONTINUING EDUCATION PROBLEMS	SUGGESTED LOCAL ACTION	SUGGESTED STATE ACTION	SUGGESTED NATIONAL ACTION
<p>No pre-retirement training program in community.</p>	<p>Learn if there is a way locally to take advantage of Drake University's experience with retirement programs.</p>		
SPIRITUAL WELL-BEING PROBLEMS AND CHURCH INVOLVEMENT IN LIVES OF ELDERLY	SUGGESTED LOCAL ACTION	SUGGESTED STATE ACTION	SUGGESTED NATIONAL ACTION
<p>Great need for love and companionship * Visits at holidays but "what about rest of year?" * Loneliness is "very real and very tragic" * Need for entertainment * Inability to attend church</p>	<p>Could be a "large scale (program) for church groups plus another organization"</p> <p>Start "a volunteer visiting service including telephone visiting or checking on people each day."</p> <p>Take tape recording of service to them.</p> <p>Call on shut-ins, run errands, bring gifts</p> <p>Bring communion and visit</p> <p>Send cards and telephone</p> <p>Bring Christmas gifts</p> <p>Provide circles and fellowship meetings</p> <p>Provide home jobs for the elderly</p>		

SPIRITUAL WELL-BEING PROBLEMS	SUGGESTED LOCAL ACTION	SUGGESTED STATE ACTION	SUGGESTED NATIONAL ACTION
<p>Something for older people to do in church, want to feel part of it.</p> <p>No coordinated ministry to the aging exists outside of nursing home, i.e., the health center</p> <p>Need of older people to be involved with younger citizens and be considered a part of the community - "not just a tag end."</p> <p>Idle space in church buildings</p>	<p>Think of places where they can serve - serving meals at church dinners, helping in other ways, washing dishes, etc.</p> <p>Young married couples take older persons to all entertainment and service</p> <p>Laymen and clergymen of the various communions should plan together for the religious nurture, spiritual counseling and shepherding care of all aging persons in the community.</p> <p>Need comprehensive planning in this area "of our community life, too."</p> <p>Have "programs that do not separate people from people but include people of all ages."</p> <p>Greatest amounts of available space in the community are in church buildings; week-day activities in these would make possible some programs not now provided</p>		

RETIREMENT ACTIVITY PROBLEMS	SUGGESTED LOCAL ACTION	SUGGESTED STATE ACTION	SUGGESTED NATIONAL ACTION
<p><u>Tendency of community</u> to let aging fend for themselves</p> <p>* Neglect of senior citizens as source of help in community * Need to provide creative, enlivening experiences for aging men in particular * "We (the older people) would like to have people know we are interested and that just because we are 65 and retired, that we are not wobbly old persons sitting in our rocking chair twiddling our thumbs."</p> <p>* <u>Consider</u> the older people as concerned people, especially by the younger generation; recognize that "we are all interested in national and local affairs." *</p> <p>Some are bored and lonely</p>	<p>Use what seniors have to offer - their years of experience, their church efforts, their service on boards, their many uncoun- ted ways of contributing in the past.</p> <p>Involve elderly, as well as citizens of all ages in community beautification activity.</p> <p>Help might come through a men's garden club.</p> <p>Develop a senior citizens' bowling league.</p> <p>Publicize Senior Citizen Center to get more people to take interest in it.</p> <p>Open doors of Country Club to senior citizens, giving attention especially to those who are not able to provide initial fees and perhaps some special rate for annual participation.</p> <p>Organize and conduct "at cost" trips</p> <p>Fulfill the dream of having a new community building, involving younger and older people in its maintenance and care, and providing</p>	<p>Search out resources for a comprehensive plan for community activities for the aging. Institute of Gerontology at State University of Iowa might have "clues that would help at this point."</p>	
<p><u>Lack of recreation center</u> for all ages * Elderly would like a volunteer center where their health, legal, education, and monetary problems could be</p>	<p>Fulfill the dream of having a new community building, involving younger and older people in its maintenance and care, and providing</p>		

RETIREMENT ACTIVITY PROBLEMS	SUGGESTED LOCAL ACTION	SUGGESTED STATE ACTION	SUGGESTED NATIONAL ACTION
<p>talked about and perhaps solved. * Involve older people in planning this program on local level, using local skills.</p>	<p>jobs in a place where many people could spend hours of pleasure.</p> <p>Plan space for shuffle-board, games, etc. in proposed housing project, open to all seniors</p> <p>Develop a drop-in and recreation center. (High percentage of elderly said they would use a drop-in center if transportation is provided, building on ground floor, and not set up in a dictatorial manner)</p>		
<p><u>Lack of organized</u> leisure time activities in "rest homes." Physical needs well-provided for but no plans for entertainment, hobbies or crafts.</p>	<p>Mental and physical therapy for shut-ins</p> <p>Volunteers to take craft materials and help shut-ins</p> <p>Have talking books for the blind</p> <p>Have volunteers to read to people</p> <p>Help the less fortunate</p>	<p>Further studies should be taken by some kind of task force to increase and broaden this activity. Here again retired persons could assist. UNI students are already working in this area, attracting teen-agers to assist.</p>	
<p>Hobbies are expensive. Older people want to feel useful.</p> <p><u>Retirement problems</u> will probably magnify as we (younger and middle age groups) grow older.</p>	<p>Furnish hobby materials for those who can't afford them</p> <p>Probably the best solution is earlier preparation for retirement</p>		

NUTRITION PROBLEMS	SUGGESTED LOCAL ACTION	SUGGESTED STATE ACTION	SUGGESTED NATIONAL ACTION
<p>Aging need well-prepared hot meal at least once a day *</p> <p>Have desire for hot meals</p> <p>* Unable to prepare meals</p> <p>* Widows living alone "do not have many good meals unless they are invited out."</p> <p>* Reported failure of a local "Meals-on-Wheels" program; did not work out *</p> <p>State advised that meals had to be obtained from a "licensed" place, could not be obtained from private homes, could not be cooked and sent out; forced to go to a restaurant or place of that sort for the food.</p>	<p>Organize nutrition classes. (Such a program recently completed for 81 persons, two groups being involved)</p> <p>Encourage gardening</p> <p>Would it be practical for home economics classes to cook meals "for actual people"?</p> <p>Extension service and utility companies sponsor demonstration schools in preparing meals for one or two persons</p> <p>Obtain help of a nutritionist in community to help aging balance their diets; see extension service</p> <p>Seek out, perhaps through extension service, bulletins on food preparation, preparing dishes for one or two persons, and related information.</p> <p>Check services of aids available through referral service of neighborhood service centers.</p> <p>Hospital administrator has expressed his thought that they could prepare hot meals for "for the sick, shut-ins, or those who</p>	<p>Look for other resources for help with nutrition for aging - insurance companies, medical societies, health agencies</p>	

NUTRITION PROBLEMS	SUGGESTED LOCAL ACTION	SUGGESTED STATE ACTION	SUGGESTED NATIONAL ACTION
<p><u>Need of extra help</u>, financial and otherwise, with nutrition and meals *</p> <p>Some are too proud to ask for food stamps even when they need them.</p> <p><u>Lonely meals</u> - grim, tend to curb appetite</p>	<p>express a desire to have such."</p> <p>Meals-on-Wheels</p> <p>Publicize food stamp program to bring all aging citizens in the community up-to-date on it.</p> <p>Might provide hot meal in connection with preparation of school lunches</p> <p>Food centers for elderly where at least one hot meal a day could be served at minimum cost. Food could be similar to hot lunch programs and could help use up surplus. Serving such meals would give oldsters something to look forward to, stimulate their social interest, and provide a certain amount of exercise.</p> <p>A common dining room might be a suggestion, a place where "folks could be served at a reasonable (price) and older people could feel they could come and eat."</p> <p>On a neighborhood basis families could involve themselves</p>		

NUTRITION PROBLEMS	SUGGESTED LOCAL ACTION	SUGGESTED STATE ACTION	SUGGESTED NATIONAL ACTION
	<p>in providing low-cost luncheon or supper once or twice a week for three to six aging adults ... perhaps with a community subsidy to help persons who need but cannot afford such meals.</p> <p>Good restaurant "where you could get a good dinner at a reasonable price"</p>		
TRANSPORTATION PROBLEMS	SUGGESTED LOCAL ACTION	SUGGESTED STATE ACTION	SUGGESTED NATIONAL ACTION
<p><u>Isolation of elderly from mainstream of life</u> because of lack of transportation. Difficult in getting to doctor, banks, store, church, etc. One of biggest problems of older people * Buses difficult to get in and out of when carrying groceries * * Public transportation often too far for elderly to reach, or not available * Walking difficult because of physical ailments * Unable to drive * Social Security doesn't reach problem of transportation * Bus routes inadequate and need more stops * People don't want to ask others for rides</p>	<p>Thorough study of aging citizens' transportation patterns.</p> <p>Grocers and other merchants could provide a phone-ordering service in which merchant phones elderly at same time each week to plan shopping.</p> <p>Grocers might also provide phone-sales-counseling service to help aging make balanced diet purchases that stay within their budgets.</p> <p>Reduce bus rates</p> <p>Regular bus runs</p>	<p>Maybe some of "state or federal agencies could pay half the fare for older citizens going to church"</p>	<p>Federal transportation department or other agency should be stimulated to develop "specially designed buses with low-slung chassis or with hydraulic step-lifts."</p> <p>Consult with Department of Transportation or other appropriate agency about development of a community taxi service primarily for the aging, particularly checking hidden costs which might be in a project of this sort.</p>

TRANSPORTATION PROBLEMS	SUGGESTED LOCAL ACTION	SUGGESTED STATE ACTION	SUGGESTED NATIONAL ACTION
	<p>Churches are "one place which should provide transportation"</p> <p>Provide, perhaps as a service club project, a comfortable bus with facilities for aged - lower entrance steps, strong rails, attendants to help at specified times for designated groups or individuals who need to get to the doctor, dentist, for food stamps, church, etc.</p> <p>Also have the Leo Club, Modifiers Club, and Boy and Girl Scouts. "For a reasonable amount could it be possible a couple days of the week that the older people could call in their wants (to local groups) and these young people would deliver to their homes after school or when they have time. The money might go into their (club) treasury."</p> <p>"With millions of dollars invested in school buses which sit idle hour after hour, why can't these public vehicles be utilized to solve the transportation problem?"</p> <p>A "public type" of car might be an answer</p>		

TRANSPORTATION PROBLEMS	SUGGESTED LOCAL ACTION	SUGGESTED STATE ACTION	SUGGESTED NATIONAL ACTION
<p>Need taxi service * Taxi fares high; many can't afford them</p>	<p>"Combine school & municipal buses."</p> <p>Establish a private leasing corporation so community could rent or lease buses for any purpose - school, church, other. This would also provide employment.</p> <p>Nursing homes should provide limited amount of transportation for patients</p> <p>Encourage all workers to cooperate and use public transportation so transportation companies can stay in business</p> <p>Taxi service would be all right "if it's economically feasible, but if it isn't let's find some alternative so that I don't have to belittle myself to get (transportation). If I have to beg to get it, I don't want it."</p> <p>Support of town council and other organizations for a jitney service to be run by an elderly man or woman who is still capable of driving.</p>		

TRANSPORTATION PROBLEMS	SUGGESTED LOCAL ACTION	SUGGESTED STATE ACTION	SUGGESTED NATIONAL ACTION
<p>Cannot get into community by rail or decently by bus and cannot get in by air</p> <p>* Unless you have a car or friends and relatives to take you, it is impossible to get out of town."</p>	<p>Taxi service - can be handled by two or three 55 to 60 year old people working out of same building</p> <p>Lower taxi and bus fares during certain hours for elderly.</p>		
OTHER PROBLEMS	SUGGESTED LOCAL ACTION	SUGGESTED STATE ACTION	SUGGESTED NATIONAL ACTION
<p>Difficulty of reaching people with information on what is available in aging programs and services</p> <p>"Older people can't run up and down the streets with banners saying we need this and that. They have to have someone who will listen and take their advice."</p>	<p>Originate news stories with local people, even "canned" releases from state and federal offices. "Get better readership this way." Also emphasize local references in releases.</p> <p>Perhaps have one person in community appointed on a volunteer basis by the mayor to handle information which applies to older people.</p>	<p>Commission on the Aging and other state and federal agencies in Iowa should listen, serve as a voice for older people, provide information, and offer guidance about programs which would be really needed for the elderly in the state's counties and communities</p>	

OTHER PROBLEMS	SUGGESTED LOCAL ACTION	SUGGESTED STATE ACTION	SUGGESTED NATIONAL ACTION
<p>In our community we sometimes feel like we are the forgotten people</p> <p>Need for an awareness and acceptance of older people as a part of the community</p> <p>"Mail delivery would be nice. Have to go to post-office to get mail now unless someone picks it up for us." *</p> <p>Need closer mail boxes</p> <p>How to reach all ages, with their problems of transportation, meals-on-wheels, employment, housing, minority group, loneliness, etc.</p>	<p>Citizens of all ages should become more aware of and interested in the aging. This awareness should and must be shared by older people themselves. Those growing older need to organize themselves into a dynamic group for the purpose of helping not only each other but the general public as well.</p> <p>Means by which mail can be delivered should be worked out between community and post office.</p> <p>Senior citizens might be quite capable of delivering mail; might be worth red-tape cutting to try to get this done.</p> <p>Start by trying to get sidewalks and have a town carrier.</p> <p>Petition post office</p> <p>Form a local Social Action Group "as broad as the community -- reaching all ages -- where there is a need."</p>	<p>Would help a great deal "if people (from state and federal agencies) who talk about the Welfare Department who have never been there and never see what we are trying to do would get together and talk these things over"</p>	

TITLE III PROJECTS, statements received from directors or former directors -

Appanoose County Homemaker's Health Service, Inc., Board of Directors by Mrs. Lorraine V. Ramos, R.N., Centerville

Des Moines Area Council on Aging, Inc., Project P.A.C.E., C. E. Morris, Executive Director, Des Moines

Linn County Council on Aging, Harold Hensel, Director, Cedar Rapids

Northeast Iowa Council on Aging, Wilbur D. Thomas, Project Director, Waterloo

Scott County Commission on Aging, Clayton L. Moore, Director, Davenport

Siouxland Council on Aging, Inc., Joe I. Goldstein, Director, Sioux City

Southwest Iowa Area Council on Aging, Inc., Mrs. Gwendolyn R. Speer, Executive Director, Council Bluffs

Wapello County Senior Citizens Civic Center, Paul S. Tinsley, Director, Ottumwa

Washington Senior Citizens Council, Mrs. George Kerr, Director, Washington

June 3, 1970 - March 3, 1971

Note - First word of each name listed appears below to indicate the sources from which the statements were received.

INCOME (Appanoose) - Majority of senior citizens can subsist with amount of money they are receiving provided they suffer no health problems, have no repairs to make, and everything else is all right * Just to say people need increase in income is not enough and we don't feel qualified to provide an answer about how to get that increase.

(Des Moines) - Work (of project) is mainly with low income group * Many elderly are capable of working, could earn income far greater than \$1,680 social security allows * Hundreds on welfare would like to work, are afraid, however, to do anything that might interfere with their monthly checks * If they took a job and went off welfare, afraid would have difficulty returning * Recommend removing social security earning clause; all persons reaching 65 would then be permitted to work and have their social security * For those unable to work, cannot find jobs, or do not wish to work, standard income would be same as recommended for ADC or welfare cases.

(Linn) - Recommend minimum monthly income of \$150 per month each for social security and old age assistance *

Raise social security limits on income to at least \$5000 before recipients are ineligible to receive benefits *
Build escalator clause into social security to match living cost increases * Social security payments should be excluded as taxable income for county, city, state, and (federal) taxes; payments should also be excluded as a base for property tax in county, city, and state governments.

(Northeast) - See housing following.

(Scott) - Social security increases should be significant and not delayed.

(Siouxland) - No one ever seems to have enough income * Those with most income are worst complainers and want more done for them in way of services, tax reductions, and additional income. * Consideration should be given to reduced fares on transportation, meals, movies, athletic events, and other activities * The retired are spending the goodly portion of their income which helps economy of communities.

(Southwest) - 300 interviews (of older people) revealed: incomes of 81% under \$3500 * Was generally felt that social security should be \$150 per month and ceiling for earnings be raised from \$1,680 to \$2,500 or \$3,000 * Self-employed persons over 65 on social security should not have to pay self-employment tax if earned income is not in higher bracket than that on which social security is figured * Majority of seniors interviewed live on income between \$100 and \$199 per month * Old age assistance should be increased * Family assistance should include older people.

(Wapello) - Inadequate income consistently at top of problems of older people * Amazing how well elderly have adjusted to meager income but nothing is left over for sickness, medicine, sometimes replacement of clothing, and pleasantries * Inadequate income causes fear of illness *
~~Welfare: not the answer, many too proud to accept it; in three years operation of Title III project not one request for welfare~~
* Raising earning limit under social security also not necessarily the answer * Comparatively few seniors are able to work for any length of time * Recommend increasing social security as fast as sound fiscal policy permits *
Make constant effort to acquaint legislators, state and national, with problems of elderly to the end that adequate legislation may be enacted to meet their needs * Publicize needs of seniors locally to win community support for adequate aging programs, urging suppliers to consider discounts to help older people stretch the dollar.

(Washington) - Have held pre-retirement classes in which budgets for low income retired people have been discussed * Encourage working closely with social security rep-

representative.

HEALTH (Appanoose) - Older people on fixed incomes other than welfare do not have means of paying medical expenses *
Under Medicare many cannot afford the first \$50 and the 20% deductible *

Extended delays in rejecting claims often leave individuals with a bill of many hundreds of dollars because it has taken the fiscal intermediary so long to decide if claims should or should not be allowed * Drugs are problem to those not on welfare * Those not on welfare are the hardest hit, sometimes live on less than that of the welfare allowance but have added burden of paying taxes, all drugs and medications, and balance of their insurance program * Homemaking program exists in county but has become practically bankrupt due to administrative policies of Medicare * County is seriously thinking of abandoning health insurance program * Some sound health programs must come soon either in form of over-all grants to individual agencies to provide health care in home or a program for medically indigent only, one which will handle medical bills without danger of liens on property *

Also, many times when programs are passed from the White House level they have such a broad base and so many stipulations which cannot be met within a rural area that we feel somewhat isolated from the rest of Iowa * Hope it will be remembered in aging programs that rural areas are just as important as urban areas.

(Des Moines) - Special attention should be given to alcoholics, drug addicts, and non-educated elderly in our slums * Both urban and rural elderly have transportation difficulty reaching clinics and county hospitals, then are often forced to remain as much as six to eight hours to see doctor * Wait often without lunch, then get prescriptions for which they don't have money to pay * Hundreds of elderly are ill, need medical services, and it is impossible to get them to take advantage of services offered * Many unable to go to a medical facility because they must remain home and take care of another person * They plod along until condition becomes so severe it costs Medicare, welfare, and veterans facilities thousands upon thousands of extra dollars that might have been avoided by early treatment * Recommend neighborhood clinics, more public health nurses, lower drug costs, assistance in purchasing glasses, hearing aids, and dental care.

(Linn) - Medical only benefits should be re-established so people receiving minimum social security would qualify for Medicaid and thus have doctor and drug bills paid also * Medicaid should also include eye glasses, hearing aids, dental services, physical therapy, chiropractors, podiatrists * Preventative approach should be established to provide regular physical checkups and other preventative services * Old Age Assistance should provide mileage for volunteers and elderly people who drive to doctor, to get food stamps and groceries.

Medicare should cover all costs of health services to elderly, including dental, eye, hearing, and foot care * Nursing and custodial homes should be subsidized by an appropriate government agency * Federal government should encourage overcoming county lines and put health programs on an area-wide basis * Medicare should also cover public health nursing, homemaker services, mobile meals, handyman, and housekeeping services to keep elderly living in own home as long as possible * Rehabilitation units for elderly need to be established and developed in hospitals * Also well oldster clinics need to be established * O.E.O. health services need to be expanded and brought to elderly * Federal government should make larger grants for aging research * More emphasis needs to be made by federal government in training research personnel and doctors * Bottle neck of limiting enrollment to medical schools because of medical profession's limited capacity to train doctors should be eliminated * Health education curricula should include the field of aging.

(Northeast) - See housing following.

(Scott) - Recommend provisions for home-health services with federal and state assistance; county and city governments shun commitments in this field * Continued efforts to improve housing, nutrition, and lower prescription and drug costs will be rewarding.

(Siouxland) - Older people who stay active, keep busy and assist those in worse physical or mental condition than they, are well * Illness in rural area is problem because of necessity to be transported to an urban area for care * Almost impossible to get a doctor to make a house call * Would be very nice if doctors could be on call for emergencies in a given area for specified periods of time * If doctors who have just completed internship would practice for a few years where at present there are no medical facilities, they would receive a very good additional education they would never receive in school and might find it worthwhile to continue practicing there * On the whole, health of aging in our area cannot be considered bad, even though a number are house confined.

(Southwest) - Health facilities in southwest Iowa seem fairly adequate * Most elderly state health care available when needed, including dentists, physicians and hospitals * 67% of 300 interviewed rate health service average * Perhaps medical assistants to doctors or first aid stations with qualified persons in charge could be available * People feel care is there when needed but complain of high cost * Need approach on the preventive side * Many feel prepaid group health insurance would be good, relieve anxiety and encourage regular checkups * Should be a distinct difference between nursing and retirement homes * Activity aide should be on hand at nursing homes * Fear of rest homes is rampant and dread of nursing homes is heard as result of publicity and use of tranquilizers; solution is more pressure to improve standards * Prevention could be practiced by having homemaker service in each county to serve elderly; Boards of Supervisors

must okay, but say there are no funds * Council Bluffs
visiting nurses have a home health aide program, most helpful
* Medicare: should be extended; chronically ill are cut
off; reimburses for cooking and serving but not shopping, clean-
ing or laundry for acutely or chronically ill; should be extended
for home care * Need a real educational approach to
health * More attention should be given to reaching out
to find the elderly ill and refer them to appropriate agencies
* Would be ideal to have all towns organized with volunteers
and block workers with centers as a focal point.

(Wapello) - Maintaining health is one of greatest
worries of elderly; if in good health, fear becoming sick; if
sick, fear not having enough money to cover costs * Sick-
ness that lasts beyond Medicare needs intensive study *
Many have not applied for Part B. coverage because they felt they
had to have the money for food * Consequently, postponed
going to doctor until illness had magnified * Should work
toward minimizing concern of older people regarding health *
Recommend establishing through cooperation of county medical
society and registered nurses association, periodic clinics where
older people may receive examinations for blood pressure, heart,
and other health indicators with referral to personal physician
for additional care if needed.

(Washington) - Community has a meals-on-wheels program
for which doctors can recommend local elderly * Also
have a home health aid program under C.A.P.

HOUSING (Appanoose) - Highly recommend federal housing program;
no private agency or private individual can in today's world
provide inexpensive adequate housing for family or for senior
citizens * People of area are working on a federal housing
program.

(Des Moines) - Older people often dislike and refuse to
be moved from home even though house may be badly in need of
rehabilitation; would be far cheaper to burn house down and build
them another on the same property * Older people prefer
to live in their neighborhood among friends; with new ordinances
being put into effect in all of our cities, thousands of senior
citizens are required to move into cheap hotels, rooming houses
or apartments when present neighborhood is torn down *
Thousands of elderly poor now need welfare assistance to survive;
lien placed on their property takes away last feeling of security
and independence they have; literally thousands of hungry and
needy older people refuse welfare because of the lien law *
Recommend that states with lien law abolish it and give elderly
the right to live in their own home and dispose of it as they
wish * Recommend rehabilitation of those homes that can be
rehabilitated * Also recommend to city governments that
when ordinances and zoning laws recommended by special interests
are considered that equal consideration be given as to the effect
on elderly in the area considered.

(Linn) - Housing in U.S. is moving from a crisis to a disaster, failing by half to meet 1968 national goal of 26 million houses and apartments in the next 10 years * After taxes, housing takes biggest bite out of average family's income; often reduces living of elderly and poor to mere existence; some elderly spend almost all of income just for shelter * In Cedar Rapids 30% of elderly live in substandard housing * 489 units are needed immediately * Presbyterian Church planning 191 unit complex, leaving immediate need of 298 housing units, saying nothing of projected need for future * Architectural barriers in housing are a difficulty of one in eight * Many need assistance with maintenance of house and grounds, cleaning, painting, repairs, etc. * Housekeeping and handyman program of Council on Aging needs expansion * Attitudes in Cedar Rapids are part of housing problem because public housing referendum was turned down by voters * Rural areas are not informed of housing programs through Farmers Home Administration or Federal Housing Administration * Council on Aging is attempting to accomplish this through an area council that does not have funding by federal Administration on Aging and local county projects need similar funding; otherwise there will be no agency to be concerned primarily with problems of elderly, including housing.

(Northeast) - Six of the needs areas of older people can be largely met by low cost public housing: (income) - monthly rentals are \$75+ in Waterloo, would be \$28-35 with public housing; added to this savings would be gain of no upkeep costs, no taxes, and paid utilities; on yearly \$1600 income savings can be approximately one-fourth * (health) - facilities can be included in public housing for a dispensary for drugs at low cost, nursing care, community dining, and a total therapeutic community; advantage of daily social contact with one's peers cannot be calculated in aiding mental health * (housing) - great advantage in removal of architectural barriers and in having a climate not adversely affected by sudden atmospheric changes * (retirement activities) - built in via game and activity rooms, courts, enclosed porches, etc; main advantage would be ready access to peers of like interest * (nutrition) - community dining facilities with added benefit of quick movement of hot meals from community kitchen to apartments; grocery outlet also in housing area * (transportation) - can be provided in public housing for elderly if justified in application for housing loan * (employment, education, and spiritual well-being) - can be enhanced by public housing but not to same degree as other factors

(Scott) - Efforts to establish low cost federal housing for aged in Davenport have been resisted for 20 years * All interested persons should be enlisted to overcome this problem.

(Siouxland) - People find small housing units to their liking, but all prefer housing on ground level, not too far from present homes, expect to pay minimum rent but feel property itself should be on tax rolls * Low rent housing attached to proper nursing care facilities would be a good answer for a considerable number of older people * Hard in some communities

to get an organization to promote housing for elderly and those that wish to do so are stymied by regulations, controls, and red tape.

(Southwest) - Need more low rent housing in all six counties of area, including Pottawattomie, Cass, Mills, Montgomery, Fremont, and Page * Smaller towns are building units and are becoming more actively interested as elderly are more vocal * Leadership is needed, someone to provide step-by-step attention to procedure * Units on one floor, cottage type units, seem most desirable * Complaint in rural areas is: business people own the apartments and evade issue of low rent housing * Most of older people like living in their own home or apartment and live in present locality because of friends and relatives.

(Wapello) - Dwindling savings, diminishing value of the dollar, and inadequate income have forced many into sub-standard housing * Low cost housing in Ottumwa has improved the circumstances of living * Recommend apartments identical to the low rent senior housing units to accommodate senior citizens who can afford to pay the normal price for such housing * Frequent inspections and enforcement of building and health codes.

(Washington) - Three nursing homes and two church related retirement homes provide help for senior citizens who cannot live alone.

EMPLOYMENT (Appanoose) - Good share of unemployed in community are younger people; since this group must become primary bearers of the tax burden, it has not been apparent that there is much need for employment of average senior citizen * Areas of senior center should be reserved for older people with particular talents and skills.

(Des Moines) - Thousands would like to work, providing transportation and meals did not use up most of daily earnings * Industries will not in most cases employ anyone 65 and over because of social security earnings clause which requires them to stop when they reach \$1,680, thus causing employer to train another person for that position * Employment offices throughout nation could do better job if counselors were especially trained to handle applications from elderly.

(Linn) - Discrimination by employers and federal government against elderly needs to be eliminated * Age discrimination in employment act of 1967 is not being enforced * Not enough staff in Iowa to enforce it * Unemployment rate makes it difficult for unemployed elderly to find employment * Need to - expand Operation Mainstream, emphasize retraining of older workers by M.D.T.A., fund R.S.V.P., expand foster grandparents program, implement employment referral programs, increase staff and volunteers in employment service for older and retired people, need to develop volunteers programs under Title III to assist with job finding, counseling, retraining, etc.

(Scott) - Pensioner should be able to earn at least 30% above federal poverty income level before there is a social security cut back.

(Siouxland) - Change social security law so those at age 65 who wish to work can draw their social security and not be penalized after they earn \$1,680.00. This should be changed to at least \$10,000 annual earnings before losing social security benefits * Educational process is needed for employers to find out what aged persons can do.

(Southwest) - Iowa Employment Service is cooperating in a senior citizen opportunity program with 17 volunteers involved, 11 of whom are seniors. In three weeks 28 opportunities were called in by employers, 29 seniors applied, and to date five have found employment in a community of 60,000 * Many seniors talk about employment but back away when opportunity comes * Approximately 79 are employed in foster grandparents program in area * Green Thumb project in Fremont county * Suggest more group employment programs * Possibly a grant to start a business strictly for senior citizen employees.

(Wapello) - Employment needs are high on list of senior's problems, but vast majority are seeking something to occupy time, give them association with others, and feel useful * Fact that most of them do not accept employment when found for them bears this out * These people find satisfaction in volunteer work * Some who truly want employment need additional training * Recommend mobilizing community resources to secure employment, provide volunteer opportunities, and organize training programs.

(Washington) - A handyman service is available for seniors. These are house cleaning tasks, yard work, etc. The workers are primarily senior citizens who receive a minimal wage from the person having the work done.

EDUCATION (Des Moines) - Many colleges are offering fine courses for elderly; thousands of low income elderly would like to attend; transportation problems prevent * Colleges, boards of education should set up special classes in poverty area to teach consumer purchasing, health, veterans affairs, nutrition, and other subjects which might be requested by welfare, public health nurses, or senior citizen groups * Recommend compulsory pre-retirement course in junior and senior year in every American high school, to be taught by specially-trained retired teachers.

(Linn) - Courses in the aging field and problems of elderly need to be included in curricula of elementary schools through graduate schools of social work * Pre-retirement counseling courses need to be introduced at community college level and other educational institutions through adult education programs * General public education needs to be accomplished through the media and public seminars informing people of the problems of the elderly * If not done, ageism, a prejudice similar to racism, will become more prevalent * New ways

must be found to define the roles of the elderly and to integrate this growing sub-culture into the mainstream of society

* Educational leaders have responsibility to research this area of concern and offer leadership in helping solve the problems

* Federal government needs to make money available for this type of research, with more planners in HEW

* Also, increased emphasis upon communicating to the elderly, services that are available that would enhance their expendable income, such as food stamps, leased housing, low income housing projects, consumer protection, information on items as drugs, etc., home care services such as public health nursing, homemaking services, mobile meals, handyman and housekeeping services, volunteer transportation and services, volunteer conservatorship programs, legal aid for low income elderly services, out patient mental health services, day care centers for elderly, foster home programs for elderly, companionship matching services in order to share to rent by living together, delivery services of grocery stores, pharmacies, etc., nutritional services for developing knowledge about low cost, high nutritional meal preparation.

(Scott) - Pre-retirement training and development of continued education for elderly should be greatly expanded; churches make good facilities.

(Siouxland) - Great number of elderly cannot read or write, are willing to learn but don't want to show their ignorance and don't avail themselves of education *
Transportation also a problem * Perhaps retired teachers associations might make a project of starting educational classes * Perhaps correspondence courses from various schools could be obtained.

(Southwest) - Need more pre-retirement sessions to help those facing retirement, especially to teach positive thinking * Classes on social security, swindling, first aid, genealogy, antiques, and nutrition have been well-received * Education courses should be given on money management and planning financial security * Homebound should be given the advantages of a bookmobile * Existing programs should be given priority and expanded in preference to new research and demonstration programs * Annual festival stimulates elderly.

(Wapello) - Utilize community educational facilities to include low cost senior citizen studies in the adult education courses * Apprise school heads of the interests of senior citizens so that suitable courses may be included in the adult education programs.

(Washington) - Week day activities include a weekly discussion, a movie, and a craft program.

SPIRITUAL (Appanoose) - There seems to be a tendency to forget
WELL- problems of the senior citizens * Church
BEING circles can assist not only with spiritual well-being
but also with social, health, nutrition and every
other phase of life of the elderly through monthly programs,
suppers, recreation, education, transportation service, etc.
* Lack of transportation is a particular weakness.

(Des Moines) - Thousands upon thousands of elderly
would like to attend church but are prevented by lack of trans-
portation * If all churches would open facilities to
elderly, we would not need senior citizen centers which are
costly to build and, as a rule, do not cater to low-income
groups.

(Linn) - Great deal could be done for spiritual
well-being of elderly through accomplishment in programs of
continuing education, retirement activities, nutrition, and
transportation * Churches need to develop and expand
recreation, fellowship, service, and transportation programs
* Also volunteer visitation programs need to be de-
veloped, kitchen and meeting hall could be used for a meals
program, and churches can commit themselves to providing
regular volunteers to Title III programs, nursing homes, and
conservatorship, transportation, handyman, housekeeping, tele-
phone reassurance, telephone listening, and other programs
* Also religions have responsibility to provide the
moral force for solving the spiritual and social problems of
the elderly.

(Northeast) - See housing preceding.

(Scott) - Involve church administrators in non-
denominational education program.

(Siouxland) - Surprising number of (older) people
will not inform pastor of their desire to attend church be-
cause of lack of transportation, money for collection plate,
and clothes to wear * Pastors will do utmost to help
them, if informed.

(Southwest) - Area churches are attempting to reach
out through social concerns * Block volunteers from
each church could keep in touch and make referrals *
Church volunteers could provide transportation to church *
Local religious programs are provided for homebound.

(Wapello) - Lack of transportation hinders elderly
participation in church activities * Some local churches
have senior citizens groups limited to member participation;
one or two churches open their activity to any senior citizen.
The latter are well attended. Recommend that churches be en-
couraged to open their senior citizen activities to all seniors,
that churches be urged to provide transportation to church
activities for those needing it, that church services be pro-
vided to the home bound, that churches be urged to offer special

services to the elderly, giving particular consideration to holding such services when public transportation is available.

(Washington) - Holy week morning services are conducted at the center * Prayer precedes monthly dinner.
*

RETIREMENT (Appanoose) - Among programs is a senior citizens' ACTIVITIES club; most participants are men, but the club has been misunderstood by public * People believe any club assisted by government sponsorship is for low income area, so a weakness is that club is not used as much as it should be * However, within the club there are consultant services from mental health institute for patients and families, new acquaintanceships, observation of people whose health is failing, employment referrals, etc., but more people should be going that are not.

(Linn) - If elderly themselves are going to participate in solving their problems, they must organize themselves to have enough power to be of influence * National organizations of retired people need to coordinate efforts and give leadership to local organizations * Elderly that see their roles as concern for others make better adjustments than those that perceive their roles as control of others * Those that expand roles of friendship, citizenship and family do better than those who continue to be aggressive in money making endeavors * Promoting the service concept may be one of the more important things in aging field.

(Northeast) - See housing preceding.

(Scott) - Involves "Education," "Spiritual," and "Employment." * Clubs and centers plus wide range of hobbies and interests will augment retirement activities.

(Siouxland) - Encourage elderly to keep busy after retirement to remain young.

(Southwest) - The self-sustained senior center, operated by seniors themselves, provides a solution to problem of lack of retirement activities * Emphasis on recreation, education, and service, such as manning volunteer employment program * Other activities: Senior Citizen Festival, crafts and talent, and various social service activities - friendly visiting, telephone reassurance, Meals on Wheels, volunteers in hospitals, V.A. hospitals, Red Cross volunteers, assist in Girl Scouts and Boy Scouts, and bird watchers, Big Brothers, Score, Observers, Politics, City Boards, Chamber of Commerce volunteers, Legal Aid, Aides in Public School system or just plain part-time work and travel.

(Wapello) - Recommend effort to educate the community to the importance of recreational activity for the aging, to enlist the interest, effort, and financial aid of local organizations and groups in organizing and maintaining an adequate senior citizen program.

(Washington) - Encourage many activities at center
* An evening was devoted to a pre-retirement series
at center.

NUTRITION (Appanoose) - Meals on Wheels program is available
to county residents; cost is only 55¢ for a noon meal, but vol-
unteers deliver the meals and it is not practical to deliver
too far a distance. Greatest weakness is public's lack of
acceptance of program * Program has had educational
value, however, for volunteers who deliver meals.

(Des Moines) - Thousands of older Americans are not
getting food stamps because they don't understand how to get
them * They are required to stand for hours to get
stamps * Thousands are embarrassed because they feel
(food stamps) are charity and they don't want neighbors to
know their need * Special courses should be set up
for elderly to learn how to use surplus foods and prepare low
cost meals.

(Linn) - Nutrition program through Iowa State Univer-
sity Extension Service should be expanded to bring information
to elderly about low cost, high nutritional meals *
Mobile Meals should be expanded and developed to provide meals
seven days a week, rather than five, and make deliveries
faster * Pot lucks, meals programs and other means of
bringing people together to eat and socialize should be encour-
aged to deal with the problem of malnutrition.

Northeast) - See housing preceding.

(Scott) - Intensify reliance on extension services
and Departments of Economics of the various universities *
Expand meals on wheels programs * Publicity and
education of elderly about federal food stamp programs will
be helpful.

(Siouxland) - Cafes, grocery stores should reduce
food portions to elderly; this would help them prepare better
meals and lower portions to elderly; this would help them pre-
pare better meals and lower expenditures * As a whole,
aging do not seem to be in need of food; those that need it
would be better off eating with others; they feel it is too time
consuming and costly to cook for one person; would eat better
if could arrange to eat at someone's home.

(Southwest) - Meals on Wheels program, geared to
definite needs, can shorten hospital stay, keep an older person
in his own home, and fill in when short term illness occurs *
Classes on meals, for serving one or two, given by ex-
tension specialists * Nutrition suggestions brought to
seniors through newsletters * Food stamps to apply
on Meals on Wheels, very good * Would like to try a
community dinner location * Extension Nutrition Aides
are performing very beneficial service.

(Wapello) - Two factors contribute primarily to poor nutrition: (1) Lack of income (2) Lack of incentive of those living alone to prepare properly balanced meals *
Recommend enlistment of experts to assist in education and training of senior citizens in consumer buying and in adequate meal preparation * Encourage senior citizen publications to print recipes appropriate for one or two people.

(Washington) - A pre-retirement training session stressed proper nutrition.

TRANSPOR- (Des Moines) - Transportation is necessary to do away
TATION with loneliness, which is number one problem of 90 percent of the elderly * In most cities bus fares are so high that even if elderly take a part-time job, by the time they pay bus fare and lunch, it is not worthwhile to work * Many cities have low cost bus fares where city council has received federal transportation aid * In cities where city government refuses cooperation, it's almost impossible for private agencies to obtain federal funds, due to the in-kind matching clause * Oftentimes suitable housing could be found removed from downtown area, if there were transportation.

(Linn) - Transportation: one of largest problems elderly have, especially in rural areas * Volunteers are being used for transportation * But better method needs to be worked out, perhaps a free taxi service subsidized by city or county for those who need the service * An insurance program for transportation volunteers needs to be developed by state or federal government * No private insurance company will insure a large number of volunteers driving their own cars.

(Northeast) - See housing preceding.

(Scott) - It is necessary to continuously encourage city and county transit authorities to develop better and less costly transportation * Support and development of volunteer agencies, e.g., FISH, would be helpful.

(Siouxland) - In rural areas people have trouble getting to grocery store, find it costly having to pay for delivery, and so buy more than they need and food spoils, or they purchase very little * In rural areas if transportation is needed for emergency, it is almost always provided more so than in urban areas * Recommend communities join together and get a mini-bus for inter-city transportation * Consideration should be given to reduced fares on all forms of transportation for elderly * Volunteers are reluctant to provide transportation because of worry over possibility of accident and concern with liability.

(Southwest) - Reduce bus rates * Use school buses * Rides always available for senior center activities, people contribute toward gas * Lack of transportation for church; community affairs committees should follow through; pastors should make families aware of responsibilities * Dial-a-Bu

with reduced senior rates may be answer; older person could operate vehicle.

(Wapello) - Taxi service has been eliminated during night and Sundays and cost out of reach for many elderly *
Bus service not available during evening, Sundays, and holidays and threatened with total discontinuance * In some cases people can afford bus but cannot walk for groceries the four or five blocks necessary after leaving bus * Recommend working out arrangements with existing transportation facilities to provide maximum service to accomodate elderly, and develop volunteer service to provide once or twice weekly transportation in neighborhoods for grocery shopping, visits to doctor, church, etc.

(Washington) - Transportation is provided individually or privately.

OTHER (Appanoose) - Hope federal grant will not be cut off by the state if Title III project is unable to become self-supporting at the indicated time * If unable to meet goal of becoming self-sufficient, would project be abandoned? * Increased amount of supervision, guidance, counseling, etc. from Commission on the Aging perhaps would be beneficial * Older Iowans in area feel they need low cost housing, more health services, some relief from high cost of living, more home care, more transportation facilities, and more medical attention * When the 22-23% of people over 65 in this locality begin to speak up, majority of other residents will listen and support.

(Des Moines) - Each mayor of each city in the United States should be required by law to have a non-political commission on aging * Very few programs and services for elderly in Polk and Warren counties, except P.A.C.E., welfare, Salvation Army, and Model Cities * Weakness of these programs is financial aid to employ trained personnel to set up health clinics and recreation, employment, transportation and home visitation programs * Homemaker service, meals on wheels and other services are available but not for the poor.

Services for elderly should be brought under one umbrella * A committee on aging should be appointed as part of every health council * Separate committee on aging should be established in federal government, to be operated independently of other agencies with special attention given to the low-income group which makes up about 75 percent of the thirty million older Americans.

The committee on aging and other state agencies could be of more assistance if they had professionally trained staff who understood problems of aging, especially in metropolitan area and to whom we could turn for advice and help * Committee on Aging could best serve if half of Commission was made up of professional people (non-political) and the other half by the elderly themselves in low, medium and high income bracket.

(Linn) - Approximately 2,000 people attend 21 retired clubs in area * Aging programs include recreation center, Mobile Meals, Homemakers Service, Public Health Nursing, Rehabilitation and extended care units in St. Lukes Hospital, Old Age Assistance, Leased Housing, youth services to elderly, telephone reassurance and telephone listening programs under Junior League sponsorship.

People feel need for a low cost, seven days a week, transportation service that offers personal service * Also need for low cost housing and greater distribution of food stamps, Medicare, Medicaid, etc. * Feedback from elderly is that they will support a professional worker in the aging field that will be an advocate for their causes * Older people do not feel adequate with involvement with the power structure and very seldom will get involved in competitive effort to place the elderly in the proper prospective with their fair share of the benefits of this country * Elderly look to the Council on Aging as a source of help. Home care survival type services are desperately needed.

Elderly are somewhat shy of taking responsibility in developing an organization that would function as a powerful influence in the community; many seem to accept the second-class citizenship society seems to extend to them.

Iowa Commission on the Aging, and other state agencies, can better serve locally by providing the type of quality leadership needed to facilitate solutions of the problems of the elderly * They should have had some experience in community organization, how to go about setting up and starting an agency with some depth of understanding, know something about Social Security, Old Age Assistance, Medicare, Medicaid, Public Health Nursing, Homemaker's Services, Mobile Meals, physical rehabilitation, mental health counseling, housing, employment, education, spiritual well-being retirement activity, nutrition, transportation, etc., and have models and demonstration projects available with some experience in order to be able to teach others how to start and operate these programs.

(Northeast) - Individual Title III projects, state agencies for the aging, and HEW must come to a full realization that total program of stop-gap measures as presently practiced, ie. - recreation and senior citizens centers, inadequate meal delivery or transportation, must give way to a program which will reach fruition in 10 - 15 years. While those programs previously mentioned may meet some needs at present, with increased numbers of persons aged 65+, more leisure time, and loss of federal funds, they will eventually prove to be even more inadequate.

A program of low cost public housing, already a reality and fundable, is a plan into and for the future of the Older American.

(Scott) - Seventeen senior citizen clubs in Davenport, eight of these are church connected. No senior center in Davenport; one is made available in Bettendorf.

Commission on Aging for Scott County has been involved in programs principally to benefit low-income elderly; Telephone reassurance program known as Dial-a-Listener project *
 Gained national acclaim * Now serving 700 persons a month
 * Meals-on-Wheels program * Delivered over 20,000 nutritionally balanced meals since inception (December 1968). Volunteer drivers and donors - most of whom are elderly have made outstanding success possible * Limited but rewarding friendly visiting; offers exceptional expansion possibilities
 * Operation of a referral and counseling service that reaches wide and deep into lives of elderly * Problems range from boredom to dental care to consumer information, relating knowledge about homestead tax relief * Warning about swindlers, advice on how to save money on drugs - medicines
 * The people will follow proper federal and state leadership to improve existing and inaugurate new programs * Leadership and time - greatest needs * Making headway in Scott county will require dedicated competent leadership and time.

(Siouxland) - Greatest cry of aging in area is for lower taxes and to provide transportation * Senior groups are encouraged to work together, formulate a plan, present it to elected officials * Surprising number feel all exempt property should be taxed * People have little interest in financing own programs, never give too much thought to finding money in their own area * Commission on Aging and other state agencies could compose a book, stating purposes and functions of all organizations and eliminating duplication * All concerned should also be informed exactly what State Commission on Aging wishes to accomplish and how * Area council concept should be completely revised.

(Southwest) - National plan for reaching elderly should be fairly uniform with local adjustments * Each state could be divided into sections with each having a similar plan, rather than spot programs * Establish senior centers, involving service clubs, churches, city officials under a director to organize, plan, and carry out ideas and a volunteer director to initiate and supervise volunteer programs * Establish adequate recreational and educational programs, utilizing community groups; at center develop social service activities, such as rest home visitations, telephone reassurance, friendly visitor; conduct meals-on-wheels and homemaker programs, employment, transportation, and referral services.

(Wapello) - Recommend that Commission on the Aging and other agencies conduct state-wide public information program, bringing story of Iowa's senior citizens to the people, have closer contact with heads of sponsoring groups, rather than just the directors, and recognize with a suitable certificate individuals, firms and organizations that support aging programs *
 With reference to Title III projects, recommend that future grants recognize cash in-kind contributions only * When only other types of in-kind are used for matching, local budgeting agencies are not prepared for the shock the fourth year when funds run out * The decision has been that they could not afford them * Strongly believe that from the beginning

cities and counties should match grant funds with funds of their own; this would condition them from the start to include money in budget for senior citizens programs * Believe we (Wapello County Senior Citizens Civic Center) did a great deal for senior citizen during life of project, but we might actually have done elderly a disservice * For a time someone cared; then suddenly it was over; the older people didn't feel important any more; doctors have told us of the serious psychological impact it has had on some of their patients * It is important to determine whether the sponsor is truly interested in establishing a service of vital importance to a segment of their community, or whether the prime interest is to bring as much federal money as possible into the community as long as it lasts.

(Washington) - We feel that things we offer in center and in services to homebound are things people have asked for because they need them, want them, and are willing to support them locally * These include shuffleboard, cards, pool, dinners with program, summer trips, discussion groups, movies, crafts, party * Also meals-on-wheels, handiman service, visitation service * Need funds to carry on program as it is now * Believe most churches need to use elderly more often in teaching and leadership and town councils should name elderly to advisory committees.

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