

# USEFULNESS OF THE MODEL CITIES PROGRAM TO THE ELDERLY

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HEARINGS  
BEFORE THE  
SPECIAL COMMITTEE ON AGING  
UNITED STATES SENATE  
NINETIETH CONGRESS  
SECOND SESSION

PART 5—ATLANTA, GA.

DECEMBER 11, 1968



Printed for the use of the Special Committee on Aging

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WEDNESDAY, DECEMBER 11, 1968

U.S. SENATE,  
SPECIAL COMMITTEE ON AGING,  
*Atlanta, Ga.*

The committee met, pursuant to notice, at 1 p.m., in the Community Auditorium of the McDaniel Glenn Apartments, 531 McDaniel Street SW., Atlanta, Ga., Senator Frank E. Moss presiding.

Present: Senator Moss.

Also present: William E. Oriol, staff director; John Guy Miller, minority staff director; and Margaret Brady, clerk.

### OPENING STATEMENT BY SENATOR FRANK E. MOSS, PRESIDING

Senator Moss. The hearing will come to order.

This is a hearing conducted by the Senate Special Committee on Problems of the Aging, and we are delighted to be here today in Atlanta. A very fine turnout. I welcome all of you who have come to this hearing.

Hopefully, we will be able to get information today which will enable our committee in its study of the problems in planning for model cities as it affects problems of our older citizens before us, so that we will know what, if anything, we need to do to emphasize, to correct, in the planning that is going on in various sections of our country, and is going forward here in Atlanta.

This is the fifth hearing that this committee has conducted on the usefulness of the model cities program for the elderly. We began our hearings in Washington, D.C., last July; and then this fall we have been in Seattle, Wash., to learn of the hopes and plans underway out on the west coast; to Ogden, Utah, where we heard from representatives of a smaller community with real pressing problems and very limited means for meeting those problems. Earlier this week we were in Syracuse, N.Y., where we listened to witnesses who described the problems in that area, and came forward with different proposals to deal with these problems.

The remarks that I make today will be very brief because we have a heavy agenda; a very distinguished group of witnesses will be heard today.

The major point I wish to make before the testimony begins is that our hearings have already made it clear to me that the model cities program has caused much soul-searching and hard work among officials and everyday citizens in communities of all sizes in all parts of the Nation.

We all realize, I think, that the time has come for consolidating the gains that the urban programs of the last decade or so have brought, even while we discard or reshape ideas and techniques that haven't proved as successful as we may want them to be.

The model cities program is providing a context for experiments and for fresh thinking. It is a bold program, and it is an essential one. It has already mobilized many talented and earnest people at the Federal level and at the grassroots level. As yet, it has more promise than fulfillment, but the promise is real and it must be fulfilled.

I make these statements at a time when a new administration in Washington is on the horizon, but I make my observations with confidence because I believe that the model cities program is a good idea whose time has come. Good ideas draw support from all shades of opinion, and I am sure that the model cities program will not only survive, but will flourish.

I have with me today members of the staff of the committee from the Senate, and they will participate in the questions, if questions arise or are needed to clarify the testimony that is given before us today.

Everything that is said here today will be transcribed and published in a document of the hearing, along with all the others that we have had. Any of you who may wish to have a copy of the hearings could leave your name with one of the members of the staff, and we would see that you are furnished with a printed copy when it is printed up.

Those who are witnesses will automatically receive a copy of the hearing.

The important thing here today is to get on the record all of the information that we can, related to the subject, and that is the purpose we have.

Those who testify, most of them at least, have prepared written statements, and those will be placed in the record in full, so that we may, if need be, summarize, in order to get through with the hearing in the time that we have allotted to us.

So I am very happy to be here today to conduct these hearings for the Committee on Aging.

I want also, while I was talking about the record, to announce that the record will remain open for 30 days after the hearing is concluded, so that if there are additional comments that should go in, they may be forwarded to us in writing and placed in the record.

We are going to proceed by calling various groups of witnesses, really, to come before us; that is, two or three at a time; three or four at a time; and be seated at the opposite table. This will enable us to proceed more rapidly.

First of all we will have three witnesses that are going to appear before us; Mr. Dan E. Sweat, Jr., director of governmental liaison, office of the mayor of Atlanta; Mr. Cecil Alexander, chairman of the mayor's committee on housing resources; and Mr. John Johnson, executive director, model neighborhood program of Atlanta. If those gentlemen will please come up and be seated at the table, here. We are very pleased to welcome all of you gentlemen, and will ask Mr. Sweat if he will proceed first, representing the mayor of the city of Atlanta.

**STATEMENT OF DAN E. SWEAT, JR., DIRECTOR OF GOVERNMENTAL  
LIAISON, OFFICE OF THE MAYOR OF ATLANTA**

Mr. SWEAT. Thank you, Senator Moss, members of your committee staff. I am of course delighted to extend the welcome of Mayor Ivan Allen and the city of Atlanta to you and your committee today. Mayor Allen asked that I express his regrets at not being able to personally appear before you at this time. He also asked that I thank the committee and the Senators for their concern for the problems of the elderly in America.

The city of Atlanta is certainly not unaware of the special needs of our senior citizens; particularly those who are numbered among the less affluent members of our community.

A part of the city's community improvement program, sometimes called community action program, released last year indicated that between 1965 and 1983, the city of Atlanta would experience an increase of 41.4 percent in its population of 65 and over citizens. The increase in the Atlanta metropolitan area during this same period would be almost 103 percent.

The necessity for increases and improvements in all levels of services aimed at the elderly population is recognized as important and crucial. There have been several very important steps taken in the last few years in this city to insure development of programs in this area.

Senior Citizen Services, Inc. was established in the fall of 1965 to act as a focal point for the development and operation of services to the elderly.

The foster grandparents program was established at the same time, along with a highly successful program funded through the Community Action Agency, Economic Opportunity of Atlanta, Inc., to provide special projects in the high-rise public housing facilities of the Atlanta Housing Authority.

More recently another program has been worked out between senior citizens services and EOA to recruit and train older persons for operation of child day care facilities.

The Senior Citizen Services played a significant role in the development of the John F. Kennedy Multi-Service Center, which will soon be under construction, as it will relate to the elderly. It also provides the basis for the services to the elderly component in the model cities program.

I won't attempt to provide any detail on these programs, since Johnny Johnson, model cities director, and Al Horvath, executive director of Senior Citizen Services, are here today and will certainly provide whatever documentation this committee wishes.

**HOUSING FOR ELDERLY**

I would also like to point out the development in the past few years of the Atlanta Housing Authority facilities for the elderly which contain 952 units in the four high-rise buildings, and two other facilities. These include the 154 units in the McDaniel Street facility, just across the street from this location.

At present the Atlanta Housing Authority has 130 applications from the elderly completed and ready to be offered an apartment as space is available. A large portion of this waiting list will be taken care of as soon as this project across the street is complete.

The Housing Authority has between 200 and 300 additional applications from the elderly which will be processed in the near future to be housed as future vacancies become available.

The turnover rate in the units of the elderly is almost nil. Vacancies are usually only available due to deaths. One example of the very low turnover rate is in the Palmer House, where in 1967 there were only 12 vacancies to occur out of 250 units.

The Mayor's Housing Resources Committee has been a uniquely effective force in helping the city to meet its critical needs in the area of housing for low-income families. A primary concern of this committee has been the provision of standard housing for the elderly poor.

Mr. Cecil Alexander, who is chairman of the Housing Resources Committee, is present and will provide whatever information the committee desires on this function.

Thank you.

Senator Moss. Thank you very much, Mr. Sweat, for that fine report. It is an indication that the city of Atlanta is endeavoring to meet its commitments to its elderly citizens, and for housing. Are these high-rise apartments that you were referring to within the target area for model cities planning?

Mr. SWEAT. This location here, the one across the street, is within the boundaries of the model cities program. I don't believe any of the others I have mentioned are located in or around the area. Mr. Johnson might have the information.

Mr. ALEXANDER. Capitol Homes is—

Mr. SWEAT. Right on the fringe. It does service the area.

Senator Moss. Thank you very much. Your statement will be printed in full in the hearing record.

(The prepared statement of Dan Sweat, Jr., follows:)

PREPARED STATEMENT OF DAN SWEAT IN BEHALF OF MAYOR IVAN ALLEN AND  
THE CITY OF ATLANTA

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I would also like to point out the development in the past few years of the Atlanta Housing Authority facilities for the elderly which contain 952 units in the four high rise buildings and two other facilities. These include the 154 units in the McDaniel Street facility where we are now located.

At present the Atlanta Housing Authority has 130 applications from the elderly completed and ready to be offered an apartment as space is available. A large portion of this waiting list will be taken care of as soon as this project at McDaniel Street is completed.

The housing authority has between 200 and 300 additional applications from the elderly which will be processed in the near future to be housed as future vacancies become available.

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*Atlanta Housing Authority facilities for the elderly*

Project:	<i>Units</i>
John O. Childes Homes .....	250
Palmer House .....	250
Graves Homes .....	210
Bowen Homes .....	48
Capitol Homes .....	40
McDaniel Street .....	154
Total .....	952

Senator Moss. We will go on and hear from Mr. Alexander, then, who is chairman of the mayor's Committee on Housing Resources.

**STATEMENT OF CECIL ALEXANDER, CHAIRMAN OF THE MAYOR'S  
COMMITTEE ON HOUSING RESOURCES**

Mr. ALEXANDER. Senator, I think that this hearing is very much to the point. There are so many of these programs to help the aged sometimes working at cross purposes and I think ours is not excepted. The drive goes on to build and supply these units, and sometimes I think the human beings involved get overlooked.

We have had the job, 2 years ago, to build 16,800 housing units in the City of Atlanta, or at least serve as the catalyst would be a more appropriate word for it, for low-income people. We are having our second yearly meeting tomorrow, and we will announce at that

point that we have now either under construction, or definitely in the pipeline, about 16,830, and somewhere around 10,000 have been rehabilitated, to be brought up to code requirements.

I think one thing that this program has shown is that both the turnkey housing program, and the 221 programs, have been most effective in Atlanta.

I see one serious problem for the elderly. This would not occur in the model cities program, but I can't overlook this opportunity to say something about it. The elderly are told by the code enforcement people that they have to fix up their homes themselves, but they often have no resources to do it. Now the funds are available if they happen to be in model cities; or the funds are available if they are in urban renewal, or areas of code concentration. But we have several hundred cases just sitting in the files here in Atlanta of houses belonging to the poor that are in very bad shape, but there is no way to enforce the code. Of course this has a bad effect on the neighbor, or the absentee owner, who has complied, although this unrehabilitated house is sitting there for very good reasons. I can't overlook this opportunity to speak to the Senator. I think this is a very important thing that I think needs to be looked into by the Federal Government.

#### "INSTITUTIONALIZING" THE ELDERLY

It seems to me that one of the problems we fall into—and I hope that model cities can use some of its resources and experimentation to do something about it, is the institutionalizing of the poor. I think one of our problems right now with the public housing program is this institutionalizing. I think at one time it was everybody's theory the elderly ought to be put with other ages; that they would like this better. It would give them something to look forward to during their days and nights. And then opinion swung around to the idea that, "No; they should be isolated where their specific needs can be cared for."

I suspect that each elderly person is a different case, and it seems to me that there ought to be some specific analysis of the offices of the programs to try to determine that this is the case, and whether they are active elderly, or inactive elderly, and whether the real resources of the active elderly can be put to use in the community, not only while in a project but actually living in among other families, and other groups. Here they might find means to sustain one another.

I think one of the terrible problems of the elderly, and particularly the poor elderly, is the matter of loneliness. There is one of the centers that has been built here that I think is very significant, in this way: It is built around an inner court. There are two of them done this way. But I saw this going on at the John O. Childes Center, where the people came out of their rooms, and were leaning over the rails, watching activity and calling to one another. This was a symptom, to me, of a real need for feeling contact with a fellow human being.

I think that this whole idea needs a real thorough investigation.

I am also wondering if some of this new—this gets far beyond housing, I guess—if some of the new experiments that are going on in the arrest of diseases of the elderly—and I read with great interest of the experiments that a fellow Senator underwent—do not present an opportunity—I am not talking about turning anybody into guinea

pigs, but to set up programs where those who want to can avail themselves, in these model cities, of some of the most recent thoughts and studies in medical care, and preventive medicine for the elderly.

### THE NEED FOR PROVIDING WORK

The last thing that I would—next to the last, I guess—that I would like to comment on, is the need for providing work. I think, again, that we talk about making the elderly feel useful, and I think this is wrong. I think the elderly can be useful, and then they will feel useful. It is not a matter of making work. I think the imagination of this country ought to be put to work again in—the model cities is a great place to do it—involving the elderly at all levels; in the planning; in the various committees that are going to be set up throughout. The functioning of these model cities; hopefully, the industries; the medical centers; in any way that can be done to actively bring them in and not say, “Here are the elderly over here. We have to provide programs for them.” Let’s look at them as part and parcel of the model cities.

In the matter of the design of housing itself: I think, again, we have to be very careful. I am an architect by profession. I am very excited about some of these new techniques, and I think that we have to be careful in the experimental housing that we don’t get so absorbed in the designing of the buildings that we forget that there are going to be human beings living in them. There should be a review panel, if you will, of the people who are going to occupy them; the elderly; and the others who are going to be in them; and the architects and designers who are working with these should regard these people as just as much their clients as they do the Housing Authority; or the developer who happens to be building in the area.

Again I want to thank you for what you are doing. You have made me think about an area that I really had not thought too much about, and I hope this process is going on all over the country. Thank you.

Senator Moss. Thank you, Mr. Alexander, for your thoughts and observations. You are correct: That this thinking about the problem is going on all over the country. One of the useful functions we think the hearings have served and—is sort of focusing—compelling people in various communities to get right down to business and think about this carefully, and thoroughly, as their own problem exists, and to try to find the answers.

Now I particularly like your expression that the elderly had, indeed, many talents and abilities. It wasn’t to make work for them so that they would feel wanted; it would simply enable them to go ahead and do what they can do, and it would be useful, and would contribute to the community, and of course they would feel wanted when they could make the contribution to the community. So it would be useful on both sides of the ledger.

### EARNINGS LIMITATION “SELF-DEFEATING”

I am a great believer in that, and in some places where in our planning we have encouraged the elderly to do those things for which they had a particular skill or ability to do. It has worked out wonderfully well, and after all, these people have a great background of experience, and some of them had unusual talents and ability. All of them had

some degree of ability to contribute, and I think of some of the limiting factors we have put on it: One of the things that has always bothered me is if the person is drawing social security, then he is limited in the amount of money he may earn outside, or he will be penalized on what he will draw on his social security. I think that's a self-defeating thing. I think he ought to be entitled to whatever it is, and he ought to be encouraged and do whatever he can to contribute to the community, and to draw an income himself, without a worry as to whether he goes beyond the line of \$1,200 a year, or \$1,650 a year, or something like that, and putting a penalty on it.

One thing that seems quite clear in these hearings—and of course my thinking on it is we should not set our older people aside in a watertight compartment of some kind, as though they were different from other people.

It is as if when they cross the line, between 64 and 65, they change some way. Actually they don't. We are all in a series of progressing toward age; every one of us is getting older; and there ought to be just a continual adjustment to the physical changes that come upon us; limited changes perhaps that come upon us; but there isn't any sudden, watertight compartment, when a person stops being younger; a middle-aged person; and starts being an older person. This is just a day-to-day thing.

And so in our planning it would seem to me we ought to plan ahead, thinking of what the needs of the people would be as they get older, but it isn't any abrupt or watertight compartmentalized thing. It is an evolutionary thing.

Mr. ALEXANDER. One thing that is particularly interesting in that respect is the predictions of the lengthening lifespan. By the year 2000 I believe they are predicting 150 years, and I saw that an Englishman said 200 years. The problems that are raised with this are such that 33 years isn't all that far off. The business of isolating the old—Who are they? You don't know when they are getting old, any more.

The Englishman points out some of the problems of a man and his wife staying married for 150-some-odd years, which is a very interesting point.

One thing I would like to get on the record is that a number of these units that are shown in our report here were finished actually before the mayor's program got under way. They are not part of the 16,800 Childes, Palmer, Graves, Bowen, Capitol. This one was already in progress when the committee was formed.

Senator Moss. Well, I do thank you, Mr. Alexander. Perhaps one thing I would like to ask you is in the planning, model cities planning, how can we involve the elderly people themselves in taking part in making their contribution to the planning? One thing that worries me about it is having everything planned for them, and I think they ought to be making that contribution themselves; at least to be heard, and have their ideas examined, and put into process.

Mr. ALEXANDER. I think, of course, from the overall planning—Mr. Johnson is going to speak to this—I think this has been done—I think in specific buildings, as the architects are made aware that part of their client is the elderly. Also those who are employing the architects must be led to feel and know that it is expected that the program is going to include the thoughts and ideas of the elderly. Architects

are trained to do this sort of thing, once they know who their clients are.

I think one of the biggest problems an architect faces in working for organizations, corporation organizations, governmental organizations, is to know who his client is, and I think if it is spelled out, at least part of his client, are the people, that we will get this.

Senator Moss. Thank you very much, Mr. Alexander. We appreciate your testimony.

Now we will be glad to hear from Mr. Johnson, who is executive director, model neighborhood program of Atlanta. Glad to have you, Mr. Johnson.

#### **STATEMENT OF JOHN JOHNSON, EXECUTIVE DIRECTOR, MODEL NEIGHBORHOOD PROGRAM OF ATLANTA**

Mr. JOHNSON. Thank you, Senator Moss, and other members of the Special Committee on Aging.

I appreciate the opportunity to appear before you today to discuss the Atlanta model cities program and its relevance in meeting the needs of the elderly.

Here in Atlanta we are concluding our initial year of comprehensive planning and submitted a draft copy of the proposal on Monday, December 9, to the Department of Housing and Urban Development. The proposal reflects the combined efforts of residents and professionals, and it is the first step toward significantly improving the quality of life in the model neighborhood area.

The first phase in our planning process consisted of a comprehensive study and analysis of the problems affecting the model neighborhood area.

#### **45,000 PEOPLE IN MODEL NEIGHBORHOOD**

The Atlanta model neighborhood is comprised of 45,000 people in an area of 3,000 acres which is located only a few blocks from the central business district.

The study revealed some glaring indicators of severe deterioration in the model neighborhood area. Picture, if you will, a city of 45,000 people with the following characteristics:

1. There are no private physicians or dentists located in the area.
2. There are no large chain grocery stores in the area.
3. There are no banks in the area.
4. Seventy percent of the housing was found to be substandard.
5. There are only three small pharmacies in the area and all located in the western section.
6. Transportation within the area is grossly inadequate.
7. Twenty-five percent of the families receive welfare grants.

These are but a few of the blatant deficiencies which challenge the daily existence of residents of the model neighborhood. If one finds these conditions harsh and devastating, he has only to magnify them to understand their incapacitating effects on the elderly living in the area.

The elderly, probably one of the most invisible segments in our society, will receive a special share of the fruits of the Atlanta model cities program.

## MODEL CITIES GOALS

Some of Atlanta's model cities goals and plans include the following:

1. In the area of health we plan to bring private practitioners into the area. This will provide the residents with comprehensive and personalized health service. The care will include a major outreach and followup component which will be of special service to the elderly.

2. In the area of social services it is planned to establish two multi-purpose service centers in the area. These centers will provide a multitude of services to residents of all ages. Each center will contain a senior citizens section which will provide sheltered workshop activities as well as other services. Also, an income maintenance program which would especially benefit the elderly will be studied during our second year of planning.

3. The Atlanta plan calls for the establishment of small shopping centers to be located eventually in each neighborhood within the model neighborhood area. These centers would include services such as a foodstore, pharmacy, and other basic consumer services.

4. A comprehensive transportation plan which would provide three levels of transportation to the residents is proposed.

(a) The first level will be within each neighborhood and will consist of a passenger van which will serve the personal needs within the neighborhood. These would include day care transportation, surplus food delivery to the elderly, and service to those with special needs.

(b) The second level of transportation will be the establishment of a beltline bus service around the MNA. This will provide accessibility to all of the residents to the major service centers in the area.

(c) The third level of transportation will be the connection of the beltline to the main bus routes to the rest of the metropolitan area. This service will enhance the mobility of the residents thereby broadening their capacity to participate in the offerings of the greater metropolitan area. Also, the transportation plan calls for the establishment of bus-stop shelters which will encourage the use of the bus service and will be of special service to the elderly.

5. Improving the quality range, and availability of standard housing is a major goal in the model cities program. Negotiations are in process which would enable the Atlanta model cities program to participate in a HUD demonstration project designed to provide standard housing for those elderly individuals receiving welfare grants. This project will involve the cooperative local efforts of the Fulton County Department of Family and Children Services, the Atlanta Housing Authority, and the model cities program.

6. Built into the overall goal for better employment is the provision for offering new employment opportunities for the elderly. The utilization of the potential of the elderly in new, productive employment opportunities is a task to which the model cities program is committed. In practically all of the planning components there are provisions for the employment of the elderly in such positions as teacher aides, day care assistants, and outreach workers.

7. In the overall goal of improving educational services, the plan calls for establishing one community school in each of the six neighborhoods. The services offered by these schools will provide special social, educational, and recreational opportunities for all of the residents including the elderly.

8. Improved recreational and cultural services are also planned for the model neighborhood area. There will be special provisions for program activity for the elderly.

The improved transportation system should enhance the utilization of these services.

As you can see, the Atlanta plan calls for a comprehensive coordinated effort to upgrade and improve every facet of life in the model neighborhood area thereby serving all of its residents.

During the past year we have come to know the personal despair and hopelessness of the elderly poor; but at the same time we have seen signs of their capacity to respond to opportunities with a youthful vitality. Thus, the model cities program is not only useful to the elderly, but the elderly are useful to the development of the program.

At this time, I would like to present Mr. Albert Horvath, the executive director of the Senior Citizen Services which conducted the specific planning for the elderly in the model neighborhood area.

Mr. Horvath, and several members of his group, would like to address this committee.

Senator Moss. That's fine. We will be real happy for Mr. Horvath to come forward, with others, to testify. We are looking forward to that very much.

Let me thank you, Mr. Johnson, for a very fine statement, and a good outline of the provisions of the plan that you have already submitted—I think you said on the 9th of December.

Mr. JOHNSON. That's right.

#### ATTRACTING SMALL BUSINESS

Senator Moss. On the model cities plan here for Atlanta. It sounds as though you have done your work well, and certainly you have pointed out many of the great needs in this area. There are no private physicians or dentists located in the area. No large chain grocery stores. No banks. All this underlines the great problem we have in the model cities area. These are low-income people, generally, and it contains a portion of the large number of elderly people who are mostly low-income people as well. And the further limitation of not having access there to stores and banks, and physicians, and these things, makes it even more difficult for these people.

I wonder, in your plan, about trying to get shopping centers, and things of that sort, in the neighborhood: Do you propose to coordinate that in any way with the Small Business Administration, or how do you hope to get them in there?

Mr. JOHNSON. Yes. Through our economic development provision of the program we have given a great deal of attention to this matter of trying to upgrade some of the existing businesses that are serving the community now. This is the corner drugstore, and the like. We felt that rather than trying to establish giant shopping centers, owned by outside interests, or interests outside of the community, that the Small Business Administration, and the Economic Development Administration, would be able to aid these existing businesses in expanding their services, so that it is comprehensive and useful enough to serve the needs of the poor. Those two agencies are particularly interested in it, and have worked very closely with us in developing this type—the idea of this type of commercial services.

Senator Moss. You are going to try to encourage that within the people that are already located there; those who are in business or others who might establish a business, by helping them get some capital to get started?

Mr. JOHNSON. Correct.

Senator Moss. And then it would be a self-sustaining business, like any other business. They have to make a profit in order to stay there.

Well, that certainly would be a great boon to the elderly, and to the low-income group.

I liked also your outline of the transportation plan that you have, to meet the problem of lack of transportation in the area. It seems to me that one of the handicaps that our elderly people have is that they move into neighborhoods where there is very little transportation available, and that therefore it keeps them from getting out and moving to places where they would, perhaps, find employment, or attend cultural activities; go to visit friends, or whatever else. Certainly the transportation ought to be available to them, and it ought to be adapted so that the elderly can use it, and your suggestion here in your plan sounds to me like a very practical thing to do.

I am glad that this has been worked out, and you have been able to lay it out for us so well.

In working out your plan, have you been conferring with the other Federal agencies like SBA and HEW, and those who have a degree of cooperation, or do you think that the thing is wound up too much in red tape?

Mr. JOHNSON. No; I think that the cooperation that we have received from, oh, I would imagine every Federal agency during the planning has been tremendous. I am concerned, though, about the degree of cooperation, and the magnitude of cooperation we will get from all of these agencies in our efforts to implement the program. The model cities program is a vast effort. It is going to take and require a vast amount of money. In order to do this, where the cooperation has been excellent, I hope it will continue when it gets to the magnitude of putting up the money that's required, that it will be there. The real implementation or solution of the planning isn't worth a nickel unless we can implement it.

Senator Moss. True enough. If we can get the planning done, we must be prepared then to go on and execute the plan, and as you point out, that involves an expenditure of funds, which is something that we will have to face up to in the very near future.

Thank you, Mr. Johnson. Are there any questions? (No response.) We thank all three of you gentlemen for coming; Mr. Sweat, Mr. Alexander, and Mr. Johnson. I think you have presented very fine testimony, which will be helpful in the record which we are trying to make.

#### A 102-YEAR-OLD VISITOR

I am going to ask now, Mr. Albert Horvath, Mr. T. M. Alexander, Sr., chairman, trustee board, and residents from the model city area, Miss Dorothy Swisshelm, Mrs. William Agnew, Mr. Earl Weems, Mrs. Alberta Wellborn, and Mr. Benjamin Martin, all to come forward, and while they are coming to take their place, I wanted to introduce a charming lady that I met briefly before we started, Mrs. Lou Isa Gates, who is 102 years old, who has come to this hearing here today.



Is Mrs. Gates in the audience now? This young lady is 102 years old. She tells me she has never been really sick. She hasn't had need for a doctor, and she has come here today because she was interested in hearing what we were talking about on the planning of model cities as it would affect the elderly. I am not sure she qualifies as elderly. She is so spry. But I am delighted you came today—and I know all of you folks are. We are very proud of you, and we are so happy that you are well, and that you are with us. [Applause.]

Thank you, ladies and gentlemen, for coming forward. Mr. Horvath is the executive director of the Senior Citizen Services of Metropolitan Atlanta. Mr. Alexander is chairman, trustee board. We are very happy to have you and other residents from the model city area as our witnesses. Now we will ask Mr. Horvath if he will proceed.

**STATEMENT OF ALBERT HORVATH, EXECUTIVE DIRECTOR, SENIOR CITIZEN SERVICES OF METROPOLITAN ATLANTA, INC.**

Mr. HORVATH. Thank you, Senator Moss. Ladies and gentlemen, Senior Citizen Services welcomes this opportunity to be represented here this afternoon, and to relate to you our interest, our concern, progress, our plans and our priorities, especially as they relate to Atlanta's model neighborhood. My statement will be brief. Documents\* supporting and expanding upon my testimony are attached to the summary that is presented to the committee. These were brief, to begin with. I took out a felt pen this morning and struck through considerably more of the material, so it will be summary in nature.

Senator Moss. The entire statement, however, will be printed in the record. We are delighted to have a good, full statement. We will be very happy to have you summarize and highlight it as you see fit.

Mr. HORVATH. Thank you, sir. Senior Citizen Services is attempting to determine if, and how, a central agency can best meet the diverse needs of the elderly in a large metropolitan area. This is a rather unique and new venture. As far as we know, there is no other agency quite like this in the country, and it is experimental and developmental in nature.

Since beginning operations, about 2½ years ago, we have had as our central and dominant theme the development of comprehensive coordinated services to the elderly in this community. Community Chest of Metropolitan Atlanta funding gives us the local, secure financial base, and this enables us to provide a variety of social work community organization and consultation services to the metropolitan area, and also permits us to develop new programs, new services, and to operate several special projects on a contract basis, so we are not, in a sense, a planning "coordinating" organization, but we also have the privilege to actually operate the service, so the planning does not end with recommendations. We actually continue beyond that to implementation. Helping other groups to get programs going, or doing this ourselves.

A community, in our opinion, should develop comprehensive services for all people, and not necessarily for a particular subgroup within a community, and this is what Mr. Johnson referred to when he mentioned that the model neighborhood project here was planning for the

\*See appendix 1, p. 500 for additional material.

entire community, taking into consideration the needs and welfare of all the people, as well as all other age groups in the community. This is our philosophy, and we feel it should be done.

Of course we also feel that no subgroup should be overlooked, and that one subgroup may require more community assistance to assure full participation in a comprehensive service arrangement than would a subgroup having built-in support and empathy and its own strong spokesmen.

#### NEIGHBORHOOD CONCEPT FOR SERVICES

In today's complex metropolitan area delivery of service mechanisms, in our opinion, should be built upon the neighborhood concept. There is a major question that is raised at conferences nationally regarding economy and efficiency associated with decentralized neighborhood base services, but these factors must be studied in the light of effective utilization of services, and the overall objectives in mind.

A key unit in a neighborhood service delivery plan is the public school and a combination public school and neighborhood service facility, such as the John F. Kennedy Center that Dan Sweat referred to is not only feasible in our opinion, but it is a real practicable and desirable way to deliver services to people.

I would like to move on very quickly to a statistical characterization of the aged living in Atlanta's model neighborhood. The total population—we have this broken down by what we call social planning areas, but we will merely dwell in brief with these total model neighborhoods. The total population 1966 figure was a little over 54,000 persons; 4,292 of those persons, which represents a little over 8 percent and a little below the national average, were age 65 and over. Almost 1,200, or almost 28 percent, of the age 65 population were receiving old-age assistance.

Of those recipients almost 900, or 72 percent, are nonwhite and almost 700, or almost 60 percent, are widows or widowers.

About a thousand of these persons migrated to Atlanta from rural Georgia, with a larger number arriving during 1966-67 than during the prior 5-year period.

Almost a thousand have reached the eighth grade of formal schooling.

In order to determine more—to pinpoint and determine more specifically the needs of the older persons in the model neighborhood, a questionnaire was developed by Senior Citizen Services, and a survey conducted by the staff in each of the six neighborhoods within the model cities area. The sample was selected by approaching every fifth household in the areas surveyed. The information was compiled and summarized by our staff, and I have just several brief conclusions and others are part of the testimony attached to the summary.

#### \$1,000 INCOME FOR 50 PERCENT

The severe poverty of the elderly people living in the model cities area is indicated by the fact that almost one-half have an income of less than \$1,000 per year; one-half of the over 4,000 people; 94 percent have under \$3,000 per year as compared with a national average of 30 percent. The national average is 30 percent. The model neighborhood area has 94 percent.

In spite of the medicare and medicaid programs over half of those persons usually go to our public, big-city hospital, Grady Hospital, for medical care; 10 percent were in a hospital during the year preceding the survey. This is the same as the rate for the total population in Atlanta, the general population, all age groups. But nationally we find that persons over 65, that the rate is much higher; almost 20 percent; and we ask the question why the rate of hospitalization is almost 20 percent for persons 65 and over in the country generally, and it's down to 10 percent here in Atlanta? Does this mean people are awfully well? We think not.

This probably gives us some indication, we feel, of a need for additional general hospital beds in the area or more liberal admission practices in hospitals serving the indigent. There are people that should be in the hospital, but they are not in the hospital, because there is no place to give them.

Fourteen percent of all persons interviewed had been to Grady in the past 2 weeks preceding the interview. If this rate of utilization of the Grady clinics was projected for a year for persons over 65 in the model neighborhood area, it would amount to 14,600 visits by persons age 65 and over in the model neighborhood area.

Experience shows many elderly go daily to the clinics with chronic conditions. The cost of this type of clinic utilization to the medicare and medicaid programs is sizable. It also probably accounts for much overcrowding of clinics, necessitating long waits for service. Many services received by the chronically ill could probably—that's incorrect; eliminate "probably"—could be provided in the neighborhood by nursing or paramedical personnel.

In order to round out our impressions and to gather additional data, several meetings were held in the neighborhoods with small groups of older residents. Typical of the problems and concerns expressed to us and to our staff at those meetings are the following:

Need for a type of food service, including delivery of meals to persons confined to their own home.

#### LACK OF FOOD STORES

Lack of food stores in the area. And this has been brought up before, that there are no chainstores and the neighborhood markets that are there have inadequate stock, inferior food, the prices are high, and they just are not convenient to people.

The need for assistance in homes when a person is sick or generally unable to carry out the functions which are required—just taking care of the house and preparing meals.

The need for transportation to medical facilities, as well as grocery stores and shopping centers.

The need for opportunities to work to earn additional income.

The need for someone to accompany them to the hospital, if they must go there, and stand in line for them until their turn comes to be waited on.

Our proposed plan of service to meet the needs as we see them is slowly taking shape. It is not a formal or highly sophisticated, final, detailed plan at the moment. We know that it must complement and supplement, not duplicate, the overall plan of services for the total

model neighborhood population. We are trying to mesh it in with the total plan that's being developed, and have it meet the needs that are not being met under the total plan.

Mr. Johnson has referred to the transportation problems that are being dealt with. The health services problems. We are attempting to direct our attention and our energy to those areas that would not be covered by the basic plan of services being developed by the model cities people.

We also know that the older residents must be actively involved in its development and implementation. That's why we haven't gone any further than what we have, because we have gone as far as we can go without real direct involvement beyond what we have already received from the older people. We believe that the plan should have, though, certain basic components. There is a need to establish a corps of volunteer advocates to assist the aging in reaching community services and helping to arrange for delivery of services in the home. We find many people, it seems that the situation is whereby there is an adequate supply—not a real good supply—for many of our community services, but yet the people who really need it don't seem to be getting it, for one reason or another, and you have to ask the question, "Why?" And one of the answers that seems to be coming forward is that older people are confused by a lot of this. They have been rejected by many of our traditional community ways of doing things; our public agencies and private agencies alike. They feel as though it is too much effort. The energy that they have to expend to avail themselves of services is just too much for them to put forth, and we feel that the development of a strong corps of advocates; people who would take on a one-to-one basis an older person and help them to reach the services that they need, or help get the services to them. Open doors. There are many doors that are kind of slightly ajar, but they need to be pushed wide open by someone who could speak for and in behalf of older people.

#### DAYTIME CARE CENTERS

There is a need to operate a daytime care center for older persons who need care in the daytime, nursing care, medical supervision, companionship, nutritional meals, and yet can stay home in the evenings. But they need this—this would eliminate or obviate the necessity for them to do a lot of shopping, preparation of meals, and things they were not able to do, but if they had some place to meet these basic needs in the daytime they could remain at home in the evening and stay out of an institution for an indefinite period of time. There is a need to deliver meals to persons at low cost, to older persons who are unable to prepare, or afford, foods necessary for meeting minimum standards for nutrition and health. There is a need for part-time employment. Again this fits in with a master plan and opportunities to be involved in satisfying community service. There is a great need to have the generations interact meaningfully, in a variety of ways.

You will be learning about a child day care center later this afternoon. It is our hope that our experience with the West End Child Development Center will enable Senior Citizen Service to contribute significantly to the child day care programs being proposed for the model neighborhood. The dimension added in child care settings by

using older persons as senior child care workers makes sense—economically and educationally—and contributes to an improved quality of life for all of those involved; the children, the parents, the workers, and, in fact, the entire neighborhood.

You will also be learning about a school-volunteer project, emphasizing the use of older volunteers.

#### “SENIOR OPPORTUNITY PROGRAM”

It is projects such as these which we are encouraging and helping to develop through what we call our “Senior Opportunity Campaign” in Metropolitan Atlanta. We strongly urge the Senate Special Committee on Aging to continue its efforts in behalf of an older American community service program, and pledge our full support—in the next session of Congress—and pledge our full support in behalf of such a measure. Improvements in social security benefit levels are vital. And we need to raise the levels. We need to tie it to a cost-of-living arrangement. An expanded medicare program is badly needed to include prescription of drugs, for example. A variety of housing needs must be met.

Social and rehabilitation services need our attention, but all of this will be for naught if we haven’t provided useful roles and useful things to do in the community for our senior citizens.

Thank you very much, Senator.

Senator Moss. Thank you, Mr. Horvath, for a very inclusive and well-documented summary of the program that you are carrying out here in Atlanta, with the Senior Citizen Services organization. I am very much impressed with the degree of planning that you have conducted. How long ago was this survey held that you made reference to?

Mr. HORVATH. This was about 2½ months ago.

Senator Moss. And so it is very recent. And these conditions that you found we can expect are existing right today, because it is such a recent survey that was made; and it has certainly turned up some very arresting figures, some that will bear considerable analysis and thought. And I do congratulate you on the paper that you have put together here for us in our record. We may want to perhaps come back with some questions, but I think we will go on, now, and hear from Mr. Alexander, who is chairman of the trustee board, and then later hear from some of the people who live in this area; residents of the area.

(The prepared statement of Mr. Horvath follows:)

#### PREPARED STATEMENT OF ALBERT E. HORVATH, EXECUTIVE DIRECTOR, SENIOR CITIZEN SERVICES OF METROPOLITAN ATLANTA, INC.

Mr. Chairman and members of the Special Committee on Aging, Senior Citizens Services welcomes this opportunity to be represented here this afternoon, and to relate to you our interest, our concern, progress, plans and our priorities, especially as they relate to Atlanta’s Model Neighborhood. My statement will be brief. Documents supporting and expanding upon this testimony are attached to this summary.

Senior Citizen Services is attempting to determine if, and how, a central agency can best meet the diverse needs of the elderly in a large metropolitan area. Since beginning operations, approximately two and one half years ago, we have had as our central and dominant theme—the development of comprehensive coordinated services to the aged. Community Chest funding gives us the local, secure financial base, which enables us to provide a variety of social work community organization

and consultation services to the metropolitan area, and also permits us to develop new community services (John F. Kenndey Center—Clayton County rural program—etc.) and to operate several special projects on a contract basis (Foster Grandparent—Multi-service Centers—West End Child Development Center—School Volunteer Program). Our emphasis is upon implementation, or action, and the development of a broad range of comprehensive services.

Atlanta's application for funding in the Model Cities Program states that "the most important characteristic of existing services in the Model Neighborhood area is the absence of a coordinated and comprehensive attack upon the multiple problems of the residents."

As a central planning and coordinating agency, we subscribe to Commissioner Bechill's concise description of planning. "Planning begins with articulation of our aspirations into meaningful objectives, and these objectives must then be broken down into specific elements which lends themselves to specific action which is capable of being accomplished."

The ultimate objective of social planners is to provide the right service, for the right person, at the right place, at the right time and at the right cost. This is a most formidable assignment and the "problem solvers" have approached the problem from many directions. There is no single way, and no "super" structure that is going to assure to an individual in a community a choice of services, when they are needed and at a cost he can afford. An important premise proposed at this point is that a community should attempt to develop comprehensive services for all people, and not necessarily for a particular sub-group within the community. Of course no sub-group should be overlooked, and one sub-group might require more "community assistance" to assure full participation in a comprehensive service arrangement, than would a sub-group having "built-in" support and empathy.

A second major premise is that in today's complex metropolitan areas, delivery of service mechanisms should be built upon the neighborhood concept. There is a major question regarding economy and efficiency associated with decentralized services, but these factors must be studied in light of effective utilization, history and overall objectives.

Another premise is that a key unit in a neighborhood service delivery plan is the public school and that a combination public school and neighborhood service facility is not only feasible but practical and desirable.

I would like to move on quickly to a statistical characterization of the aged living in Atlanta's Model neighborhood—broken down by social planning area.

Area XIV—Mechanicsville—Summerhill—Peoples Town (Census Tracts F-44, 45, 46, 47, 48, 55-A, 56)

The total population (1966) was 29,249. 1,755 of this total was persons 65 years of age or over, (6%). 590 individuals were recipients of old age assistance (1967) which represents 33.6% of those age 65 and over.

Area XV, Grant Park—(Census Tracts F-49, 50, 53)

The total population (1966) was 14,423. 1,587 of this total was persons 65 years of age or over (11%). 305 individuals were recipients of old age assistance (1967) which represents 19.2% of those age 65 and over.

Area XX—Pittsburgh—Adair Park—(Census Tracts F-57, 58, 64).

The total population (1966) was 10,559. 950 persons were age 65 or over (9%). 300 individuals were recipients of old age assistance (1967) which represents 31.6% of the population age 65 and over.

The total population in the three social planning areas (1966) was 54,231. 4,292 (8.2%) were age 65 and over. 1,195 (27.8%) of the age 65 and population were receiving old age assistance.

Of the old age assistance recipients in the three social planning areas, 867 (72.5%) are non-white and 697 (58.3%) are widowers or widows.

910 (76%) migrated to Atlanta from rural Georgia, with a larger number arriving during 1966-67 than during the prior five year period.

925 (77.4%) have reached the eighth grade of formal schooling.

In order to determine more specifically the needs of the older persons in the model neighborhood, a questionnaire was developed by Senior Citizen Services and a survey conducted by the Model Cities staff in each of the six neighborhoods. The sample was selected by approaching every fifth household in the areas surveyed. The information was compiled and summarized by the staff of Senior Citizen Services. Several conclusions follow. Others are recorded in attachments to this testimony.

The severe poverty of the elderly people living in the Model Cities area is indicated by the fact that almost one half (48%) have an income of less than

\$1,000 per year. Ninety-four percent have under \$3,000 per year as compared with a national average of 30%. Many live on Old Age Assistance only or on meager Social Security, not wanting to be "on welfare."

As in similar poverty areas most of the elderly are women living alone, unable physically or financially to keep up property in which they live. Seventy-five percent of their homes need painting. Sixty-nine percent need repairs.

Where property is rented, rent is frequently high, especially considering the space and condition of the property. (53% report high rent).

In spite of the Medicare and Medicaid programs over half (56%) of those interviewed usually go to Grady Hospital for medical care. Thirty-five percent usually go to doctors' offices.

Ten percent were in-patients in a hospital during the last year. This is the same as the rate for the total population in Atlanta. Persons over 65 have a national average of 18.6% per year.

This probably gives some indication of need for additional general hospital beds in the area or more liberal admission practices in hospitals serving the indigent.

A shocking 37% of those interviewed had been sick in the previous two weeks. Fifteen percent had been to a private physician and 39% had been to Grady Memorial Hospital out-patient clinics.

Fourteen percent of all persons interviewed had been to Grady in the past two weeks. If this rate of utilization of the Grady clinics was projected for a year for persons over 65 in the Model Cities alone it would amount to 14,600 visits. Experience shows many elderly go daily to the clinics with chronic conditions. The cost of this type of clinic utilization to the Medicare and Medicaid programs is sizable. It also probably accounts for much overcrowding of clinics, necessitating long waits for service. Many services received by the chronically ill could probably be provided in the neighborhood by nursing or paramedical personnel.

Need for neighborhood facilities is pointed out by the fact that 43% report no drug store available.

Although most elderly people manage to get along there is always a group who, because of deteriorating mental and physical condition, cannot cope with day-to-day living conditions. When such persons live alone, their situation becomes critical. Need for home health services, homemaker services, day care and protective services or institutional care come into play.

In order to round out our impressions and to gather additional data, several meetings were held in the neighborhoods with small groups of older residents. Typical of the problems and concerns expressed are the following:

Need for a type of food service, including delivery of meals to persons confined to their own home.

Lack of food stores in the area. There are no chain stores and the neighborhood markets have inadequate stock, inferior food, high prices and are not conveniently located.

Concern for the neighborhood. There was a question raised as to whether the homes of persons in the neighborhood would be torn down.

The need for assistance in homes when a person is sick or generally unable to carry out the functions which are required—such as cooking and cleaning.

The need for transportation to medical facilities as well as grocery stores and shopping centers.

The need for opportunities to work to earn additional income.

The need for assistance for persons who have visual handicaps. People often have problems, but will not admit it and seek help.

The need for someone to accompany older persons to Grady and stand in line for them.

Our proposed plan of service to meet the needs as we see them is slowly taking shape. We know that it must complement and supplement, not duplicate the overall plan of services for the total model neighborhood population. We also know that the older residents must be actively involved in its development and implementation. The plan should have certain basic components. There is a need to establish a corps of volunteer advocates to assist the aging in reaching community services and/or helping to arrange for delivery of services in the home. There is a need to operate a day time care center for persons who need day time supervision and care. There is a need to deliver meals at low cost to older persons who are unable to prepare, or afford, foods necessary for meeting minimum standards for nutrition and health. There is a need for part-time employment and opportunities to be involved in satisfying community service. There is a great need to have the generations interact meaningfully.

You will be learning about a child day care center later this afternoon. It is our hope that our experience with the West End Child Development Center will enable Senior Citizen Services to contribute significantly to the child day care programs being proposed for the model neighborhood. The dimension added in child care settings by using older persons as senior child care workers makes sense—economically and educationally—and contributes to an improved quality of life for all of those involved—the children, the parents, the workers, and, in fact, the entire neighborhood. You will also be learning about a school—volunteer project emphasizing the use of older volunteers to provide motivational encouragement, enrichment experiences, and large doses of love to youngsters in our public schools. It is projects such as these which we are encouraging and helping to develop through our "Senior Opportunity Campaign" in metropolitan Atlanta. We strongly urge the Senate Special Committee on Aging to continue its efforts in behalf of an Older American Community Service Program and pledge our full support in behalf of such a measure. Improvements in Social Security benefit levels are vital. An expanded Medicare program is badly needed. A variety of housing needs must be met.

Social, and rehabilitation services need our attention. But all of this will be for naught if we haven't provided useful roles in the community for our senior citizens. Thank you.

Senator Moss. Mr. Alexander.

**STATEMENT OF T. M. ALEXANDER, SR., CHAIRMAN, TRUSTEE BOARD, SENIOR CITIZEN SERVICES OF METROPOLITAN ATLANTA, INC.**

Mr. ALEXANDER. Senator Moss, other members of the staff, ladies and gentlemen, if there is some degree of repetition in these hearings, why it simply underscores the significance and our awareness of the problems.

When you consider the fact that out of the 193 applications submitted for this model cities program in 1967, 4 percent had targets for the elderly. When you consider in the model neighborhood the high percentage of persons over 65 left; also that of 6,048,000 Americans past 65, 27 percent are in the poverty status; 33 percent of all Americans past 65 live in the central city. When you consider these facts, then this hearing takes on added significance.

The model cities program, to really be effective in accomplishing what I consider to be its full intent, must take into consideration not only the physical rehabilitation of the community, but more significantly, the human rehabilitation.

This is particularly important for the elderly who live in the prescribed area of the model city and who will doubtless wish to remain.

There is a greater number of elderly people probably in the area of the model city than we may now suppose. These persons could contribute greatly, given the opportunity and resources to make this program meaningful, not only by enhancing their own lives, but in aid to young children who need the care, love, and attention of which they are so often deprived.

I strongly believe that day care centers should be a part of the model city, where parents who have to work might leave their youngsters in the care of persons of age and experience, who could be as mothers and fathers in the absence of their real parents.

**FOSTER GRANDPARENTS**

I also strongly suggest that there should be a place in the program for the expansion of the foster-grandparents program, to not only further their present roles, but to include the care of the mentally



retarded and emotionally disturbed child. Certainly the environment we seek through this program to eradicate should also include an attempt to correct the ills created by the environment itself.

These programs must necessarily be adequately funded, and training programs should be set up with a staff of well-qualified persons, with a sense of dedication and commitment.

There are elderly persons in this and other communities willing and able to learn and to earn, who are not afforded the opportunity to improve themselves or to contribute their skills and experience to improve or give assistance to others. Somehow those who need help and those who are willing to give help must be brought together.

Finally, I feel some consideration should be given to elderly citizens who live on limited resources, such as welfare checks, small pensions, old age assistance; they should not have their rents raised in public housing and relief checks reduced when they earn a few extra dollars to supplement the all-too-inadequate funds received through social security, welfare, or other such funds.

I would like to cite, here, a concrete example: Mrs. L. H., 69, and her husband, age 71, live in a home, John O. Childes Home. She came to the foster-grandparents project in 1966, and was advised by the housing authority office that her rent would be increased from \$47 to \$65 per month. At that time she made about \$21 for 20 hours work a week. In March 1968 she received a notice to move, and her rent was increased to \$79. She resigned in April, as she felt she could not afford to move. She has a fair education, fair intelligence; has kept all of her receipts, which show that her rent has varied, without satisfactory explanation, from \$47, \$49, \$47, \$51, \$55, \$65, and \$79. Mrs. L. was an outstanding grandparent, and her work with children who needed her was very important. This is a most regrettable, if not a revolting, situation.

I would like to give some other figures. A number of foster grandparents at age 68—total number of foster grandparents authorized is 4,000. Number of States in which projects are located are 40 States, and Puerto Rico. The number of participating institutions are 191. Categories of participating institutions: Mentally retarded, 78; day care, 12; emotionally disturbed, 21; correctional, 4; physically handicapped, 12; hospital, general and TB, 21; other mental institutions of special classes; public school, Headstart programs, 25; making a total of 191. I would like to give some special statistics on foster grandparents: Male, 19 percent of these reporting; female, 81 percent; nonwhite, 32 percent; age 60 to 64, 23 percent; age 65 to 69, 38 percent; 70 and over, 38 percent.

Now direct and related benefits to foster grandparents, including salary, social security, transportation, and meals exceed 80 percent of the total Federal cost. Three projects are not reported for this period, since they are new, and have nothing to report.

Finally, I feel some consideration, as I said, should be given to the elderly, so that they will not have their income reduced.

If we mean what we say, then we must temper the rigidity and formality of the laws and technical procedures with a degree of mercy and understanding. The problems we seek to solve are the results of years of neglect and deprivation to the communities and the people. Therefore, it is within the best tradition of our country to turn more of its resources toward the solving of domestic problems.

None to me is more important than programs of depth, meaning and opportunity for development directed to welfare of senior citizens in the model cities program and throughout this city and the Nation.

Thank you. [Applause.]

Senator Moss. A very fine statement, Mr. Alexander. I appreciate it very much. I agree with you most heartily. I think I said earlier, when we were discussing this matter, that I thought that this limitation of income was self-defeating. It not only deprives the community of the contribution that the older person could make, but it discouraged him from making any effort to make that contribution, because of a limitation, then, on his income; his social security, or his old-age grant; because he had earned some outside income beyond the accepted norm that has been laid down.

Was this variation of rent that you pointed out, of this case of Mrs. L., was that because the money she was earning outside in the foster-grandparents program?

Mr. ALEXANDER. It's the policy of the housing authority. Any increase in income must be reported to the management and when it is reported to the management, there seems to be no clear-cut formula by which the rent is changed.

I can give other examples where there was a woman who had five children. She was getting \$28—paying \$28 a month. She was successful, during the Christmas holidays, in getting a temporary job at Sears, Roebuck to make \$72 a week; just enough to take care of her five children for the Christmas holidays; and her rent was immediately raised to \$85 a month.

Senator Moss. Well, those are both very extreme examples of what we are confronted with, and I am very glad to have them in the record, because they substantiate the very problems that we have been pointing to, and one that I think is certainly all wrong. The whole theory of limiting people on their outside income, I think is self-defeating and wrong, and I am sure that many, many others agree with me, and perhaps this will help us get some legislative changes that would eliminate this unfairness that has crept into the system.

I think that the work you are doing in this senior citizen services here certainly is fine and I congratulate you on it, Mr. Alexander.

I would now like to hear from some of the residents of the model city area. Miss Swisshelm, could we hear from you next?

#### **STATEMENT OF DOROTHY SWISSHELM, MODEL CITIES AREA RESIDENT**

Miss SWISSHELM. I will have to correct that impression. I live near the model cities area, in a low-income area of textile mill workers, with problems very similar to those in the model cities. Through my neighborly contacts I am often asked to help people with the procedures and transportation; to get surplus food, medical care, public assistance, and legal aid. I have found many elderly people living on social security and/or old-age assistance much below their minimum essential necessary to maintain health. If ill, or chronically disabled, they have no one to care for them. There is no maid service nor Meals on Wheels available in Atlanta for the poor.

I have found a sick woman lying in bed—I just happened to go past her door—and was able to give her some service, that she had no one available to do.

These services would help to keep these elderly more comfortable, and in their own home, at much less cost than nursing homes; and also provide a better diet.

A neighborhood service center, making use of middle-aged and elderly men and women, to do home jobs for the elderly handicapped, would accomplish a multipurpose for both age groups.

Elderly people of limited education and means especially need someone close at hand to help them secure the material things and the services to make their lives more on a par with the affluence around them, and above all, would let them know someone cared about them.

Senator Moss. Thank you very much. What you say, of course, is so true. The elderly people very often are isolated, lonely. They just don't have the contacts that they ought to have. Not only for their well-being—I mean their physical well-being—but their whole outlook on life; their whole personality and contact with other people.

Thank you, Miss Swisshelm.

Mrs. Agnew, can we hear from you?

#### **STATEMENT OF MRS. WILLIAM J. AGNEW, RESIDENT, ADAIR PARK**

Mrs. AGNEW. Senator Moss, and other members of the staff, I would like to preface my remarks with a statement that it is my personal opinion each member of all—the local committees—should find it possible to think of others, and how the program will affect them, rather than trying to get the most out of it for themselves. So far, in meetings I have attended, there always seems to be the question: "What will this mean to me?" And I think it should be, "How can we work together for the good of all?"

But concerning the elderly, or the incapacitated, I feel that a plan, not only for the health, and comfort, and welfare, sanitary benefits, should be provided, but a program for personal interest and concern in such a way that they themselves would feel that they are still part of our society, and could still make a contribution to it, if only by expressing to some interested person their past experience of joy, discovery, happiness, and sadness in life; and also how they met and dealt with these problems. To me a personal interest in all humanity is a greatly needed tonic for our disturbed world today.

Senator Moss. Well, thank you, Mrs. Agnew, and how true that is. We get self-centered, thinking of our own problems, and we don't look out and see the broad picture; and yet we are a part of the community, and what benefits the whole community is going to be to our own benefit, if we can only see that far; isn't that right?

Mrs. AGNEW. Yes.

Senator Moss. Thank you for your comments.

Mr. Weems, would you make a comment for us, please?

#### **STATEMENT OF E. G. WEEMS, RESIDENT, PEOPLESTOWN**

Mr. WEEMS. Senator Moss, our distinguished guests, and all of our visitors here this afternoon, one of our greatest needs we have in the neighborhood is the emergency clinic. We have all kinds of hospitals

citywide, but only a few really adequate facilities of Grady Memorial Hospital. My question is, Can this type of service be operated from our area, named the "Model Neighborhood Program"? With a city of a million people, no undue delay should be anticipated. Many lives are saved or lost on this particular phase of hospitalization. But why have a clinic if they can't serve everybody?

The answer would be to have a pay scale and charge accordingly. If they are above the minimum or maximum standards, each area should have emergency clinics, whereby a person could get treatment within 15 minutes of reaching a hospital or clinic. A city with over a million people should have these facilities.

Thank you. [Applause.]

Senator Moss. Thank you, Mr. Weems; and I must agree with that, too. In fact, one of the shocking things we learned from one of the previous witnesses was that in this model city area there were no resident physicians living in the area now, and as you suggest, there ought not only to be a resident physician, but there ought to be a clinic available.

Mr. WEEMS. That's right.

Senator Moss. Generally available to all the people in the area. And that is becoming so—it has always been critical, but we now have the medical facilities, that if people can be reached in time, there are so many of them can be saved who otherwise would lose their lives. Oh, in a coronary case, but in many other kinds, too. It is very dramatic, I know, in a case of a coronary disturbance, if they can get care within that first few minutes' time.

Mr. WEEMS. That's right.

Senator Moss. Then the number that can be returned to health, and go on and live a good, full life, is great; but if they don't get care within those first few minutes, why, many, many of them die. I thank you for that suggestion. It is very good.

Mrs. Wellborn, could we hear from you?

**STATEMENT OF MRS. ALBERTA WELLBORN, CHAIRMAN, HOUSING COMMITTEE, MODEL CITIES PROGRAM; RESIDENT, GRANT PARK AREA**

Mrs. WELLBORN. Senator Moss and members of the faculty, and the congregation, I am just happy to be here today. I just wanted to say this, before I read what I have written. I could have written two or three pages, but they said to condense it, so that I did. But nevertheless I am so glad that so many people—this Mr. Alexander said he had wakened up, and this gentleman here, he has woke up, and I am glad, and I hope that thousands of people in this area here would wake up before all this is over, because we need people to wake up and start doing something, and getting involved. That's what we need.

VOICES. Amen. [Applause.]

Mrs. WELLBORN. I am 71 years old, and I haven't yet quit. I'm going to keep fighting. [Applause.] And I have been a citizen of this town for this full 71 years, but I have lived here all my life in the Grant Park area, and I certainly know the needs, and this gentleman here has certainly hit the nail on the head, and so have many

others, and I hope that every phase of our activities here that is coming on will be brought out today and people will be enlightened as to what we need.

Now elderly pensioned people are caught in the squeeze of the tide of high prices clamped down.

VOICES. Amen.

Mrs. WELLBORN. And that makes our pensions—I say “our pensions”—more insufficient for us to live on, and to meet our needs. And elderly people need to live in those low apartments, and not in these high-rise apartments.

VOICES. Amen. [Applause.]

#### HIGH-RISE DWELLINGS QUESTIONED

Mrs. WELLBORN. These high apartments will aggravate the people, and give the—in other words, they will be walled in, and they need to be on the ground, where they can have associates, and people to accompany them, and be companions to one another, and all of them be in the same category, and everybody have something in common.

The agencies: Now these local agencies should come in with the low-priced nursing homes. These nursing homes, and doctors, and hospitals have all got in a clique to rob people.

VOICES. Amen. [Applause.]

Mrs. WELLBORN. These doctors and hospitals have gotten in together to rob the Government on this medicare business.

VOICES. That's right. Amen. [Applause.]

Mrs. WELLBORN. We need some agencies to come in and build some new nursing homes that will take care of disabled people at a low price. That's exactly what we need. And people don't have others to come in and wait on them, so we need someone to build these agencies with a Government subsidy to help out with low prices.

VOICES. Amen. [Applause.]

Mrs. WELLBORN. And Mr. Senator, would you answer to the best of your ability: What do you think are the chances of this model cities continuing during our administration that's coming on? [Laughter and applause.]

Senator Moss. I don't mind answering, Mrs. Wellborn. Let me say first, I am very pleased that you are all following this so closely, and that you are listening so well. Let's keep a little bit of order, though; and not let the meeting get out of hand.

Now, I was asked a question. That's a little unusual. That's the reason I smiled. I am here to ask questions. But I don't mind answering that. The press asked me that question before we started the meeting. I think the model cities program will continue under the new administration. I think, as I tried to say in my opening statement, it's an idea whose time has come, and I don't think we can turn back. I think we have to go on developing this. And certainly that is the belief of our committee in the Senate. We intend to go on, and that's the reason we are holding these hearings, and developing this record. We expect to go forward.

Thank you, Mrs. Wellborn, for that very fine statement. The things that you said obviously received approval from those who were listening. I know the problems you point to are very real. The increased cost

of living has not been reflected in commensurate changes in pensions and income, and therefore many people are feeling a very severe hardship. Our system of social security and old-age assistance was all too limited any time, and it has become more inadequate as there has been an inflation in prices, unfortunately. And that's one of the things that we need to address ourselves to in the Congress; is trying to remedy this situation. But I appreciate your comments, and I am glad to have in the record your feelings about the use of high-rise apartment buildings. Now that's a little different from what we have heard any other place; or at least it hasn't come forward. It is something we want to examine, and what you say we want to consider very carefully. So thank you very much.

Now Mr. Benjamin Martin; we will hear from you, sir.

**STATEMENT OF B. FRANK MARTIN, RESIDENT, MODEL CITIES AREA**

MR. MARTIN. Senator Moss, members of the panel, ladies and gentlemen, meaningful involvement is as important as food, almost, to the elderly. It benefits everybody. The older person benefits. The community benefits. And the Government benefits through taxes.

If we can get a job for \$140 a month—that's what we are allowed to make now—we will pay approximately \$20 to \$25 a month in taxes. That's what I pay. And instead of me being a worker—I mean, instead of me living off the Government, I will be helping the Government to live off of me. [Applause.] The people that are involved in the actual administration of the program, their entire attitude toward that program changes. I can best illustrate that by my own self. Six months ago I was in a rural community. I came to Atlanta and got involved in this housing—I mean, this child care program. I am always getting involved in things. Some of them are not too good, but some of them are real good. And my attitude toward it had been, "Well, it's just something—it's just a political football. Let's kick it around." I got involved in it, and I began to get interested in it, and I began to see the need for involvement, and I am involved in it now. I am involved in the senior child care program. To me this has been going from nothing to something. Just like taking a man—me for instance—I have been on social security for about 8 years. I was disabled. I was put on social security, and I received enough, just barely enough, to live off of it. Many times medicine that I needed, I didn't have the money to buy it. I would have to wait until the next social security check came.

Well, the doctor had told me to take this medicine every day. Well, I knew if I went and bought it on credit, then I would have to pay for it, and the medicine would give out possibly before I got my next check. I said, "Well, I will die one time, just like another," so it didn't make a great deal of difference.

Now I would like to see the elderly get interested and employed in other programs. There are 21,000 psychiatrists in the United States. Mental health is one of the greatest issues before the people right now.

There is a program in Philadelphia, the Temple University Mental Health League, that employs people of very limited education. In fact the director of the program is a person who has never held a job higher than a clerk in a Government warehouse, and they are doing wonders up there.

There is a similar program in Albuquerque, N. Mex. They fly a team of workers to Arizona twice a month, and these workers utilize the medicine man with the Indian tribe. They are working with the Navajo Indians.

So this term is probably overworked, but it is what I would call a grassroots approach to the problem; our various problems.

Now in addition to the 21,000 psychiatrists—no, including the 21,000 psychiatrists, there are 80,000 people involved in psychiatric work, including social, psychiatric social workers, psychiatric nurses, and so forth. Now it is estimated that one-tenth of the population of the United States will be mentally ill some time between now and 1970, and this clinic in Philadelphia is turning out 30 a day, and most of the problems of the elderly people on social security are caused in the cities by bill collectors, rent collectors, people who probably have a legitimate claim against them, but no moral claim.

Now the Government has a moral obligation to provide public care for the aged. It was the aged who made it possible for America to become the affluent nation it is today. [Applause.] Thank you.

Senator Moss. Thank you, Mr. Martin, for your very fine observations. You are pointing out that many of our problems, many of the problems of the older people, are in the field of mental health, and that is certainly a good contribution, and it is true that many of our problems are not limited to physical well-being, but to mental upsets that can be treated very adequately now—at least some of them can—and this kind of service should be available to help the elderly people—in fact, help all of our people, but particularly the elderly, that we are talking about today, and I certainly congratulate you for becoming involved, as you said. You have taken an interest in this matter, and you have given your time and attention to it, and your contribution is a great one, and I am sure more and more people will become involved, as you say, as we get this program moving forward, as we hope to do.

I think we have had a very excellent discussion, here, by this fine panel, and I appreciate all of your contribution to it. I think the things you have brought to our attention are of greatest importance, and will help us very much in our consideration of the matter. Thank you all, very much. [Applause.]

We will now have the panel that will discuss the West End Child Development Center, Mr. James Parham, executive administrator of Economic Opportunity of Atlanta; Mrs. Lou Anna Wright, executive director of West End Child Development Center, and Mrs. Lois Hancock, child development instructor for senior citizens project, and Mrs. Jackqueline Cook, coordinator of training and job development. Would those ladies and gentlemen please come forward? We are pleased to welcome all of you here, and we will ask Mr. Parham, the executive administrator of Economic Opportunity, if he would begin.

#### **STATEMENT OF JAMES PARHAM, EXECUTIVE ADMINISTRATOR OF ECONOMIC OPPORTUNITY OF ATLANTA**

Mr. PARHAM. Thank you, Mr. Chairman. It's a pleasure to be here to represent both Economic Opportunity of Atlanta, and the Office of Economic Opportunity. I think that you will note that several of the

programs that have been discussed already have been funded by moneys appropriated under the Economic Opportunity Act; foster-grandparents and senior citizens. I might add, I don't think it's going to be represented on the program here today, but there is funded in part of the model cities community, a comprehensive health center that will offer additional health services to members of the community.

Economic Opportunity Atlanta, the local community action program, is serving the poor from the very young to the very old in 14 target areas with a population of 515,000 in three counties. Through 14 NSC's and components delegated to other community agencies, I think I can safely say that we have programs that serve persons from birth to 102 years of age.

In one of our NSC's a woman 102 years old has had an active interest in EOA for the last 2 years. Just recently, she was recruited for membership in a newly organized Golden Age Club. She is enthusiastic about the group, and transportation is provided so that she can attend the meetings. This elderly woman—still spirited despite her years—even yet performs duties within her own family group such as babysitting with her 5-year-old great-great-granddaughter.

In that same area we have a 64-year-old man, recently retired, who patiently walks a mile to the neighborhood center twice each week where he meets a volunteer who is teaching him to read. For this man a tragic upbringing prevented his receiving any formal schooling, but it failed to snuff out a burning desire to learn. He says simply, "Everybody ought to know how to read and write."

In our work with the poor, we very often find that the most desperate hardship cases are those involving the elderly.

#### NO HEAT, LIGHTS, WATER

Just last week, our EOA staff workers in Sum-Mec—one of our three centers within the model cities area—discovered a woman in her 80's living in a house which was hardly fit for human habitation. She had no heat, no lights, no water, no bathroom facilities. She had no food except what neighbors brought her from time to time. Her chief desire was to stay in her own house. Our EOA staff workers got her into Grady Hospital and finally convinced her that she needed to go into a nursing home.

In another recent case from Sum-Mec, we found a 70-year-old man whose wife had died several years ago, leaving him with a stepson, now 10 years old. The child was not even in school.

The man had a sometime common-law arrangement with a woman—an alcoholic—whose main interest was the man's welfare check which she managed to get every time it arrived.

The man, who had a stroke in October, was too disabled to care for his son, and the child was too young to care for his father. Yet the man was insistent: He wanted to be with the boy.

EOA staff workers worked out an emergency plan for their immediate needs, and then contacted the man's relatives who were spread over two or three States. A sister who lives in Atlanta agreed to make a home for the man and a foster family was found for the boy. Frequent visits are arranged between the two.

Our workers constantly find elderly folks who are not only without the basic needs of life, but who are also confused and ignorant of



the way to seek assistance through social security or welfare benefits. When we find them, we first give attention to their immediate needs, and then give them help in applying for and documenting their claims.

Sometimes the elderly ask us to help with problems that we can't handle. Recently a 73-year-old man with a \$138 a month railroad pension asked us to help him find a wife—one between 16 and 20 years. We had to turn him down.

Approximately 10 percent of the persons coming to our NSC's are over 50 years of age. We serve them in many ways: Job placements (our employment service counselors have had 1,134 applications from persons 45 and over during the first 11 months of this year), social services, transportation, tutoring, Golden Age Clubs, sewing circles, home management classes, and so forth. Those who need legal help are referred to our imaginative and ambitious legal aid program. Many of the elderly poor are very active in our community organization efforts, and are seen chairing meetings or going with groups to ask for better garbage pickup, additional recreational facilities, new traffic signals, changed transit lines, better store prices, or a host of other things needed by their communities.

### 211 DISABLED SENIOR CITIZENS

Not all of the elderly can come into a center, of course, and we must find them. One of our NSC's has begun Project FIND to seek out the friendless, the isolated, the needy and the disabled among the elderly. Working with statistical information furnished by the welfare department, the center has found 211 disabled senior citizens. Sixty-nine of these are currently being matched with volunteers who will work out a program of individual help.

The Senior Citizen Services of Metropolitan Atlanta, Inc., is our special delegate agency for the elderly. It began operation early in 1966, and administers programs for the aged in Atlanta's three high-rise apartments and also in other low-income neighborhoods. In addition it administers our foster grandparent program.

Mr. Albert Horvath, director of senior citizen services has done special planning for the elderly with model cities. He will tell you of this.

EOA planning staff has also been working with model cities to develop an extensive family service "outreach" program as part of the model cities package. Even though not specifically aimed at senior citizens, the programs projected will bring needed services to the elderly poor.

One of the requirements in the model cities program is intensive resident involvement, and many of the residents now participating in the model cities program had already gained valuable experience in community action through EOA. This experience made the task of resident involvement a much easier one.

Today in the model cities area there are 384 resident members on what are called operating committees. One of my staff workers checked with a model cities official to see how many senior citizens were involved. She was told that 101 of the 384 are over 65.

At age 55, an individual could possibly have almost another half century to live. It is easy to see that planning programs for senior citizens is not quite the same as planning for, let's say, children in

Headstart, where we have a short age span for which we can reasonably expect much uniformity in needs. Programs for the elderly, on the other hand, must span a wide range of individual differences in age, health, and mental outlook.

When opportunities are provided, older citizens can take the ball and run with it. Ten percent of our staff are over 55 and they work at every level in our program. We are convinced that the age group over 55 has a sizable amount of talent, energy, and willingness that can be utilized to the benefit of the community.

#### CHILD DEVELOPMENT CENTER

Toward that end, we in EOA are excited about one of our newest ventures—the West End Child Development Center. This program was designed to make special use of older people as childcare workers. It brings together three of the Nation's most important problems: (1) The need for child care, (2) the need for young mothers to secure work and training, and (3) the need for constructive, useful work opportunities for older people.

We have been speculating for years that the talents of the aged might be used in this way and we are out to prove it. At West End we have 13 out of 21 staff members who are over the age of 60. They were in the first graduating class of a special program arranged by the Senior Citizens Service of Atlanta, with classes conducted by the child development program of the Atlanta public schools.

A second class of senior citizens have already begun their training program. They will be available for employment in January. We would like to see this program emulated in the model cities community.

Thank you very much.

Senator Moss. Thank you, Mr. Parham, for a very good summary of the work you are doing in Economic Opportunity Atlanta. We certainly feel you certainly are conducting a very effective program, reaching out and finding older citizens and helping them in various ways, and this work of yours is indeed part and parcel of model cities, and in our planning for the model cities we must take into account the work that you do, and that it must be coordinated with the other programs that are planned, and then are implemented by Model City.

Mrs. Lou Anna Wright is the executive director of West End Child Development Center.

#### STATEMENT OF MRS. LOU ANNA WRIGHT, EXECUTIVE DIRECTOR OF WEST END CHILD DEVELOPMENT CENTER

Mrs. WRIGHT. Senator Moss, and members of the subcommittee, it is a pleasure to have the opportunity to share with you some aspects of the West End Child Development Center.

I shall address myself to three points:

The number of persons served in the center and what the center means in terms of job opportunities for the parents; a brief description of the daily activities with the youngsters; and hopes for similar centers in model cities neighborhoods.

The West End Child Development Center provides day care for 50 children between the ages of 3 and 8, freeing low-income mothers of

the West End for employment. This service also makes it possible for mothers to take advantage of training programs which lead to employment and upgrading in employment.

The center employs a total of 23 persons. Thirteen are senior workers, seven are professionals, and three are subprofessionals. Fifteen of the 23 persons are residents of the West End Community.

The West End project has drawn together many of the community resources which has contributed to the rapid, yet sound, development of the center.

The center is a demonstration site for the senior child care program. The value of utilizing the talents and wisdom of older persons is being effectively demonstrated.

Activities in the child development center are many and varied, but care and service to the "whole child" is our major concern. The child is growing physically, mentally and emotionally.

Among the program components are—

Adequate space inside and outside.

A well balanced meal.

Adequate sleep during the day.

Knowledgeable teachers.

A program day of activities appropriate to the child's capabilities and limitations.

Equipment necessary for physically, mentally, and emotionally stimulating experiences of which there is almost a total lack in the homes from which these children come.

Experiences in relating to other children and adults and to a group, which is so vital in establishing school readiness.

General cultural enrichment and broadening of the child's frame of reference through field trips.

Medical and dental care.

An environment in which mental and physical handicaps can be detected and dealt with early.

It is hoped that the West End project will be a helpful example and contributing factor in the development of day care centers in the model cities program, aimed at supplying the growing need for day care for young children, employing the elderly, and helping alleviate the shortage of trained day care workers.

#### SENIOR WORKERS EMPLOYED

Employment of senior workers has enriched our program, broadened their contacts, utilized their special skills and talents in a creative and socially useful manner while supplementing inadequate incomes.

Senator Moss. Thank you, Mrs. Wright. I had the opportunity of dropping by the day care center for a brief visit, coming over here, and I find that it is going forward in a very commendable manner. As you point out, its purpose is to serve the children that are there, but in so doing, free the parents for employment; or training for better employment; and in operating the center you have need of the services of many older people, and they are well adapted for that kind of work. So they are making a needed contribution that they can do, perhaps better than anyone else.

It is not a make-work project, in that sense; it is utilizing the talents that these older people have. And in that sense, the planning

of this center in the whole development of the model cities concept, is a useful thing for the older people as well as the younger people. Whatever we plan, ought to be useful, and then, as a secondary matter, see whether it is adapted to older and younger people.

So I thank you for your testimony, and congratulate you on the fine work you are doing over there at the center.

Now Mrs. Hancock, can we hear from Mrs. Hancock, instructor of child development.

#### **STATEMENT OF MRS. LOIS HANCOCK, CHILD DEVELOPMENT INSTRUCTOR FOR SENIOR CITIZENS PROJECT**

Mrs. HANCOCK. Senator Moss, and other members of the committee, the questions asked are: Is elaborate training needed to equip elderly individuals for effective action in day-care situations? What special methods do you employ? What are the rewards of participation to the elderly?

As a teacher of two groups of older citizens, I find that an 80-hour course in child day care is proving to be most satisfactory. These courses were requested by Senior Citizen Services of Metropolitan Atlanta for the senior child care program. They are sponsored jointly by the vocational educational division of the Atlanta public schools and the adult vocational home economics division of the Georgia State Department of Education. The courses are given over a period of 4 weeks with 4-hour sessions held daily from 8:30 to 12:30 p.m., on the third floor of a remodeled school building at the adult education center, 170 10th Street NE, Atlanta, Ga.

Thus far, their attendance has shown a 99-percent record. This low absentee rate deserves notice since most of the participants must rely on public bus transportation, including at least one transfer. Also, it should be noted that these students were not only on time but usually arrived 30 to 45 minutes before class time.

Upon completion of the 80-hour classroom program, the students are placed on a field assignment. During this period their training takes on a different form as they are now learning by doing in an actual situation.

Field supervision is necessary for evaluation and is most beneficial to the program, as it provides emotional support to the student during the transition from classroom to employment in child care.

Provision should be made for extended contact with these older persons on the job in proportion to their individual need. Such contact be in the form of intern seminars, continued short-term classes at intervals to enhance understanding of children's behavior and employees effectiveness. A newsletter will be used to enable students to share experiences with one another.

#### **METHODS USED IN TRAINING**

In answer to your second question in regard to methods used in this training. I find that a combination of lectures, discussions, and use of audiovisual materials with much involvement in music, dramatization, storytelling, science exploration, and art experiences for the young child are most effective. Also, units concerning the health needs of children, care of a sick or injured child, and special needs of the

"disadvantaged" child are included. Professional resource persons are brought in to enrich the classes.

These methods promoted the challenge needed, and the older citizen responded with much enthusiasm, interest, and growing self-confidence. As they grew in relationship, respect, and responsibility, their attitudes toward children, toward work, and toward themselves changed.

The rewards for the elderly participating in the program have been numerous. Some of their own comments are as follows:

This is the greatest thing I've ever had happen to me.

I feel like a real person now instead of something just taking up space.

The program gave me a new incentive to live again.

I'm so grateful for employment.

I'm liking my work and they like me.

Not a dull day yet.

We have such a good time.

You sure did give us many ways to help us on our job.

I don't have to sit in my room and just look out the window all day.

I never dreamed such good things like this could come to me.

The very fact of knowing that I am accepted and useful again offers happiness—and a supplement to my income which was greatly needed.

When I visit them on their field assignment, and job placements, I am finding much joy and gratitude for their work. This radiates to the children and other members of the staff wherever they are working.

Senator Moss. Thank you, Mrs. Hancock. [Applause.] It's a very fine report. It speaks for itself of the good work that is going on. The training of these senior citizens, so that they can function in the child care program, and I suppose you have need of the services that you have trained, have you not?

Mrs. HANCOCK. Indeed.

Senator Moss. So we can look forward to providing more and more of these workers to do what we need to do for those children. I am glad to have this for our record. I appreciate it.

Now, Mrs. Cook, coordinator of training and job development; can we hear from you?

#### STATEMENT OF MRS. JACKQUELINE COOK,\* COORDINATOR OF TRAINING AND JOB DEVELOPMENT

Mrs. Cook. Senator Moss and the committee, thank you for this opportunity to discuss briefly the ways in which the West End Child Development Center could be extended elsewhere in the community. The West End Child Development Center operates in demonstration of the fact that older persons can work effectively in day care programs. At the West End Center there are 14 older persons employed: eight senior child care workers (teacher aides), three special child care workers (aides to care for a homebound sick child), one housekeeper, one janitor, one cook.

These persons are bringing skills and experiences to the program which benefit the children served. At the same time, these older persons' needs for meaningful involvement and financial assistance are being met.

The success of this program indicates that similar programs could function elsewhere in the community—particularly in model cities areas where there is a high concentration of older persons.

\* See appendix p. 496 for additional material.

The career training unit, called the senior child care program, is designated to assist other centers in securing and utilizing older persons.

This portion of the program is not confined to benefiting the West End Center alone, but reaches out into the community enabling day care programs and trained older persons to get together for mutual benefit. Day care centers under any sponsorship can gain assistance in securing senior child care workers or special care workers through this program as it now exists. Also, Senior Citizen Services of Metropolitan Atlanta is well equipped to administer additional programs under new sponsorships such as model cities. Drawing on the experience gained in the development of the West End Center proposal and the initiating of that program, senior citizen services is prepared to administer similar day care centers.

The senior child care program could be expanded to secure and train the older persons to be employed in model cities day care. There are 12 day care centers included in model cities planning. Two of these are scheduled for operation as soon as possible and are to service the 3-year-olds and under (while the public schools in those same two areas service the children over 3). In these two centers there will be staff positions for approximately 24 persons to perform supplementary roles in assistance to the professional or primary staff of 15 persons.

The duties of these 24 supplementary staff persons are those that can be successfully handled by older persons. These include teacher aids, assistance maintenance supervisors, and cook helpers. These roles could be designed as part-time positions to accommodate the needs and abilities of older persons. This would create 48 part-time positions. There will also be similar aide positions created in the public school day care for the older children.

### THREE COMPONENT QUESTIONS

In addition, model cities plans for three component programs to operate supportative to the day care. These are: Block mother, family day care homes, and parent involvement in child care center. Within these programs there are some employment opportunities that would be suitable also for older persons, particularly those positions designed to aid in the care in sick children in their own home.

The senior child care program now includes in its training an emphasis on the care of sick children. The effectiveness of older persons in this aspect of child care has been amply exhibited in the foster grandparent program.

The West End Development Center employs three part-time special child care workers, aides who are to go when needed into the home of a sick child under the direction and supervision of the social worker.

The project descriptions of model cities day care lends itself well to an effective utilization of older persons in supplementary staff positions on a part-time basis. Senior Citizen Services of Metropolitan Atlanta could administer these programs initially with a board composed of residents and professionals assuming the eventual on-going operation. This pattern would be similar to the one used in the initial implementation of the West End Child Development Center.

Senator Moss. We are pleased to have the attachment, and that will be printed in the record in full, as further documentation of the state-

ment you have made, then, Mrs. Cook. Thank you very much for giving us this information on the staffing of the child development center. Certainly there is a demand and need for these services, and the elderly people who have been employed have filled the positions very well, I take it. There is no reason to say that they are not doing it as well, or perhaps better than many others that you get; is that right?

Mrs. Cook. Some of them bring to the program special abilities and backgrounds and skills that very much enrich the program. What the senior child care workers are doing depends on what their individual past experience and abilities are, and this covers a very broad range. We have people in this program with educational backgrounds ranging from third grade to graduates from college.

Mr. PARHAM. Senator Moss, I might add our ability to use the older citizens as employees in day care centers depends somewhat on our ability to finance day care centers. Two-thirds of all the available day care in Atlanta under public auspices (United Appeal and tax funds) are financed by OEO through my agency. In the model cities area we do anticipate additional money for day care; but we are at a standstill, and perhaps going slightly backward, in funds for additional day care centers in the remainder of the community, because available funds have decreased. In fact, in annualizing our costs, we are going to be short of funds to keep the present level. The prospects have somewhat diminished for increasing available jobs in day care for senior citizens unless we get additional funds to maintain present-day care centers and start badly needed new ones.

Senator Moss. I understand. Thank you very much, Mr. Parham, and ladies, for your very interesting and helpful contribution to our record.

We now have a group come to tell us about the school-volunteer project: Dr. Lucille Jordan, Instructional Service Center; Mr. James W. Mercer, personnel programs manager, Lockheed-Georgia Co.; Mr. Ed S. Cook, Sr., president, Atlanta Board of Education. We are very pleased to have you come to appear before us today. We look forward to your testimony.

May we have order, so we can go on with our hearing? We will hear first from Mrs. Jordan, the Instructional Services Center. You may proceed, Mrs. Jordan.

#### **STATEMENT OF DR. LUCILLE JORDAN, INSTRUCTIONAL SERVICES CENTER**

Mrs. JORDAN. We are appreciative of the opportunity, Senator Moss and members of the committee, and those present today, to come before you to discuss what to us is an exciting new venture called Educational Motivation—Atlanta. This program idea was recently conceived to utilize the wisdom, talents, and maturity of adult volunteers to assist the learning process by providing motivational encouragement, enrichment experiences, and a warm, friendly relationship with individual children.

The classroom teacher is continuously attempting to establish the rapport of a one-to-one relationship with each of the 35 to 40 pupils in his class. The kindergarten child who urges his teacher to listen with the opening remark, "You know what \* \* \*" to the intelligent

teenager who's almost failing the course because of economic worries and ends up dropping out to work for a year—but unfortunately never comes back. These are heart-breaking experiences for teachers, and they are always striving to do something about them, but no one person can be all things to this many children at one time.

And so because of this idea coming to us from teachers, from classrooms, from the youngsters themselves, we were excited when we had the opportunity to meet together with the Senior Citizens Committee and the members of the Atlanta community who wanted to help us explore some way we could get this one-to-one relationship with youngsters in school.

Today I think we all realize that education is everybody's business, and all education does not occur within the four walls of a classroom. That it is an ongoing 24-hour-a-day experience, and therefore it takes all of us to accomplish the full and complete education that we want for every child in America today.

And so we have come up with what we call a very tentative pilot plan that we are considering, and we would like your reactions to it. That we identify two elementary schools in the model cities community, one school within a similar community, but outside the model cities area, and then one in a typical middle-class community in Atlanta. We are looking to the future years of senior citizens with all levels of instruction and experience, and we hope that by having this bare placement of volunteers within typical school situations that we will have the opportunity to observe very closely the kind of activity which we can develop; the kind of relationships we can formulate between volunteers and teachers and pupils and parents in different kinds of community settings, because we find many youngsters who are deprived of the amount of parental attention, and of teacher attention, within the city.

Presently we have two federally funded projects with coordinators who can give segments of their time to explain the philosophy of the project to teachers who want an "extra head and pair of hands" to help them with identified children who have need of motivational help. At the same time the Senior Citizens Committee has offered to work with agencies within the community to identify for us a volunteer pool of persons and to familiarize these persons with the philosophy and possibilities of such a plan of action.

Then the coordinators will work with all of us as we review findings in these groups; find where there is an overlapping of talent and need for motivation, and to bring these groups together informally, just to get acquainted, and to discuss the objectives and resources in such a way that we might collaborate to do something about this concern that we all have.

As far as the preservice experiences for these senior citizens that we have identified is concerned, certainly there would be some common information on school procedures and schedules that we would all need, but just as we work in the Atlanta system in teacher education in-service experiences, if we expect teachers to work with youngsters as individuals in the classroom, we must work with teachers on individual needs they have to produce better learning experience within the classroom. We would operate in the same way with these volunteers. We would first identify ourselves to their backgrounds; the kinds of abili-



ties that they have, and the kind of interests, and then we would help them through an individualized sort of inservice type program to be able to relate the needs of these youngsters who have been identified as needing their help. So we would hope that the principals of the schools, the teachers themselves, the parents of the individuals who would be receiving this help, the volunteers, and the pupils themselves, would have an ongoing, informal sort of seminar where they would discuss in special groups at times; in large groups at times; in small groups at times; "How are things going? What are some of the needs that are not being met on the part of any of us? How can we work together to reinforce the program, make it mutually helpful and satisfying to all of us?"

And so we feel, too, that by bringing the volunteers from various areas of the Atlanta community together, we can learn a great deal from each other, and that many friendships and relationships would develop in this way, and it would unify the thinking of the whole city on the process of education.

So far as the range and variety of responsibilities that could be handled by Educational Motivation, Atlanta volunteers, I think none of us can visualize just what it may realistically grow into, because I think they would multiply with each passing week and month. We talk about skills and understandings that children must get in the school, and they are very, very important as we all know, but we must give attention to what we in education call the affective learning area, and that is the attitude and values that youngsters develop along the way, because these emotional things are what make people decide to continue with education. Not only must we support the projection of skills and understandings, but we must know how a youngster feels about what he learns, and what he expects to accomplish in his future years, and by having an adult figure who would identify with him on a one-to-one basis, just by his presence there in the school to work with him, especially with him; this individual, without ever saying it; is nonverbally communicating, "I care about you. I want to help you learn." And so because somebody is interested in him as an individual, this gives new hope and a new purpose to this youngster's attitude about education.

#### VOLUNTEERS HAVE MANY TASKS

Some of the activities that we see these volunteers performing with proficiency are, helping with study trips where we take youngsters out of the school into the community; frequent walking tours; sometimes on bus trips; to become familiar with the workaday world, so that we can make education relevant to the life that is going on around them. We need people to help us supervise these trips. We know that as these persons would work within the school, they could supervise the lunchroom activities; they could work on the playgrounds and supervise certain play activities, according to their interests. They could, in individually talking with youngsters, identify interests that children have that sometimes teachers don't get to, as I mentioned earlier, and could help the teachers plan suitable activities that would involve that youngster and the older person working together. They would learn many things together.

Also, too often, in the model-cities-type community, we have missing in the home the male figure; the male image; and this could be supplied by the retired men that would be in the program.

Under the teacher's direction we see that volunteers can supply many of the reinforced learning experiences—what we used to refer to as the drill-type experience—for certain children to get certain skills and understanding. Today we do this through certain mechanical and electronic aids, many times, and these could be handled and operated by a senior citizen.

But I think one of the most important things of all that would come out of this kind of proposed plan of action would be the meaningful relationship here that would develop between a mature adult and a growing youngster. We talk about the generation gap. It is just because we have not had the one-to-one relationship that we would all desire, and the attitude that youngsters would have about the older person. But this mature adult, who had no school, or family authority over the young person perhaps, could communicate with him with no threat. He could provide a communication link sometimes between the parent and the child, and certainly between the school and the child, and could perhaps bridge some of the imbalance between the value system that differs between the home and the school; thus he would relieve some of the personal anxiety that teachers have, and the parents have, and that young people have about each other. Through this kind of conversation with this adult, who would have this one-to-one relationship with the youngster, might be the one who could impress him with the importance of attending school and having a good attendance record. To stay on in school when he was very much anxious to get out and make a few dollars. But in the long run, he had better complete his education. Then, too, this person could possibly influence him to establish habits that are necessary to hold a job, once he is able to take a job and that he would hold it responsibly, performing well.

Now teachers are reaching out for this kind of thing. More so these days, I think, than ever before. As I said, because we are realizing that education is everybody's business, and because of the concern that you as the public have shown toward education. Congress in 1965 passed a bill which gave us the greatest amount of money in the history of education to do something about taking research off the library shelves, and putting it into practice in the classroom, and psychology has taught us that learning is a personalized process.

And for this reason I believe, when the news gets out, that Educational Motivation Atlanta has this kind of service to offer to teachers, that we, in the central office, are going to have our phones ringing off the hook, because teachers are going to be asking for this kind of help for children.

I see many possibilities for the project, and I am sure it will succeed if everyone involved in the project keeps in mind that he must have a sincere commitment—and I mean a sincere commitment—to relate to the needs and the feelings and concerns of everybody that's involved in the project. That we not have a hierarchial setup. That we are a team working together to improve the education that our children are getting in our schools today.

## FREEDOM FOR DISCUSSION

Now none of us are miracle workers. We don't have the answers. We are all searching for them. And I think to make this project a success, and one in which we will all mutually benefit and one which can produce the kind of people coming out of school that we hope for, that we will need endless patience; we will need real, prudent judgment, ingenuity, a lot of creative thinking. We must keep the way open in such a way that the pupils, that the volunteers, parents, and teachers will feel free to talk about their concerns to each other and will verbalize this freely as they meet together. I am sure that all of us will grow more aware as we discover our own latent potential within ourselves, as we see the potential developing in other people that are associated in the project, and as we continuously evaluate; and I would hope that there would be a continuous evaluation. As we would move into the implementation of this kind of approach, there will be three things that we must keep in mind: That the volunteer must see himself as a very important key person in this whole process. That his own image of himself would be raised, and I am sure it will be if he is getting the response that I know he will get from the children. And that we impress upon each child that the volunteer is doing this because he wants to help; and he likes you, and he is here because he is interested in you. We believe that this realization will make each child receive this kind of help gratefully; and we need to make young people grateful and appreciative of the contribution that all of us are giving to him.

And certainly in such a way that each learner will realize that learning is really fun. It is not a matter of work; it is a fulfilling and joyful experience to learn something new, and if this older person is learning along with him, it will be a team experience.

We must make youngsters realize this; the fact that they can learn; that they can do it; that they can accomplish this, and there is always somebody there who cares. If he doesn't get it today, there will be someone there next week and next month to help him all along the way. That we all want him to be successful, and that we are very anxious to help him succeed.

Senator Moss. Thank you, Mrs. Jordan, for that very fine explanation of the proposal to have elderly people work with the children in the school. You used this term "one-to-one relationship." Would it really be one to one? Would the volunteer just have one student that he would be interested in, or would he have more than one?

Dr. JORDAN. If there would be two or three, or half a dozen youngsters, who have the same interests, and the volunteer is a person who has been indentified to work with this particular interest, we would have them working as a small group, but we would hope to constantly strive to keep this group as small as possible. I believe we will have enough volunteers that we can. And there is something about the interaction that you can have with the smaller group that I think would preserve the program.

Senator Moss. Would the volunteer just come on certain days, or during certain hours, or how extensive would be the volunteer's service?

Dr. JORDAN. I think that would depend on the amount of time that a volunteer could give. I am sure that this would be something that the teacher and the volunteer would work out in relationship to the need of the individual child; the possible amount of time that the volunteer could offer.

Senator Moss. Thank you. That's a very interesting and imaginative program, and certainly something that offers a great deal to the learning process and to our students, and also is an area where we can utilize many of these great background experience reservoirs that we have in our older people who would be adapted to do this work.

I appreciate having your testimony on that, Dr. Jordan.

We would like now to hear from Mr. Mercer, personnel programs manager, for Lockheed-Georgia Co., one of our large companies.

**STATEMENT OF JAMES W. MERCER,\* PERSONNEL PROGRAMS  
MANAGER, LOCKHEED-GEORGIA CO.**

Mr. MERCER. Thank you. As you can see, we are excited about the project. Dr. Jordan's enthusiasm certainly shows this, for that.

Mr. Chairman, members of the subcommittee, distinguished guests, thank you for the opportunity to share, an idea, an idea which we believe has potential benefits for senior citizens within the model cities and elsewhere within our community.

**AN IDEA FOR USE OF VOLUNTEERS**

This idea is simple in concept, exciting in contemplation, challenging in development and implementation, promising for the future—benefiting as it surely will the old and the young.

This idea involves the natural use of older volunteers as a major community resource for providing children with educational motivation and enrichment. This is not an idea unique to Atlanta. It clearly is not a new idea. But it is an idea which deserves sound development and expansive use in schools—first within the model cities and then throughout this community.

We know the idea will work. Nine years ago in Winnetka, Ill., four retired businessmen under the watchful eye of a retired schoolteacher worked with children for 40 minutes each week. Today in nine communities more than 500 men and women serve as volunteers in the Project for Academic Motivation. Exciting news travels fast. This past May the administration on aging sponsored a Winnetka school volunteer seminar which was attended by participants from seven States. In the July issue of "Aging" you may read on page 7 where these seminar participants were impressed by help afforded children by volunteers with experience, knowledge, and time to share. Older workers were seen in learning labs as authorities on special subjects, friendly listeners, storytellers, equipment operators, teaching assistants, and warm friends.

It wasn't necessary to take you all the way to Winnetka to demonstrate that our idea is exciting. Here in Atlanta, under the auspices of senior citizen services of Metropolitan Atlanta, we have seen the mutually satisfactory benefits of the old working with the young in a project called "foster grandparents." In this project, institutionalized

\* See appendix 1, p. 507 for additional material.

youths enjoy enrichment of their confined lives by having a special relationship with interested and mature adults. In another project called the senior child care, older persons are employed in child day care centers serving as aides to head teachers, health aides, housekeepers, janitors, cooks, and kitchen aides.

The experiences arising out of these Atlanta projects have proven time and again that older persons profit from their participation and that youngsters benefit significantly from their contact with older persons.

#### EDUCATIONAL MOTIVATION ATLANTA

Following the excitement of an idea we are now in the challenging stage of development and implementation of this idea—we call ourselves Educational Motivation Atlanta, EMA for short.

It shall be my purpose to speak to the potential usefulness of EMA in the model cities target area and to particularly speak to the human resources within Atlanta for educational motivation and to the ways in which participation of the elderly could be especially helpful to young persons in the target areas.

Dr. Jordan of the Atlanta school system spoke to the training innovations that will make it possible for the elderly to serve in this project, the likely roles for elderly participants, and their academic usefulness.

Dr. Cook will wrap up our presentations by discussing with you the board of education's support of this project and its evaluation of the project's potential, not only in model cities area, but in other neighborhoods.

EMA is a project jointly conceived by senior citizen services and the Atlanta school system with the objective to utilize the wisdom, talents, and time of older volunteers to achieve specific educational objectives for designated student(s). Two elementary schools within the model cities target area, two title III elementary schools outside the model cities area, and one additional school have been tentatively designated as schools in which EMA will conduct approximately 30 pilot projects using older volunteers. The community resources coordinators for these schools are in the process of preparing an initial presentation to affected principals and teachers. Elderly persons will assist in this preparation and presentation. In addition to defining the pilot projects the school system is in process of designing a preservice workshop for the volunteers and the school staff with whom they will jointly work in the 1969 pilot projects. Concurrently, senior citizen services is in the process of screening and selecting a group of volunteers for the pilot projects.

We stand at this developmental juncture. We intend to complete our pilot projects in 1969 and have ongoing programs in 1970.

#### TALENT AVAILABILITY

Within the target area 8.2 percent of the citizens are over age 65. Amongst these 4,000-plus citizens, 40 percent desire employment. Only 27.8 percent receive assistance. EMA is now an unfunded idea, a proposed pilot project. However, we believe that the older citizens of the target area are capable and are needed to fulfill a role in the school systems of this area. If my memory serves me, the dropout

ratio is 40 percent for the area. There is no question as to need. There is no question as to the availability of elderly citizens' manpower resources.

For our pilot project we do not intend to limit our view of resources to the school area. I am the personnel programs manager for Lockheed-Georgia Co. with responsibility for employee programs, including retirement, equal employment opportunity, and affirmative action.

I know that Lockheed has some 5,000 employees who will reach retirement age during the next 17 years. These persons represent a tremendous resource which we intend to tap for our pilot projects and our ongoing programs.

Additionally, through my company's participation in the Atlanta Employer's Voluntary Merit Employment Association, I know that there are a minimum of 90 sizable and influential associated businesses whose experience, capability, and interest in youth motivation is potentially available to support "our idea." These businesses can identify reserves of retired citizens with the talent, affluence, and mobility to support our proposed pilot and ongoing community projects on a voluntary basis.

Finally, as to resources, most progressive companies are in some phase of development of preretirement and postretirement counseling programs and, therefore, would look with favor to programing their retirees into useful community activities. Such companies stand as a potential resource of support for "our idea."

#### HOW ELDERLY CAN HELP YOUNG PERSONS

I was impressed recently by a local community council publication. The cover was a rectangle in solid black with a top band of white. At the bottom of the black in small white letters were the words, "I can't find my way out of here." In short, someone needed to help "turn on the light."

If we can accept the fact that our youth are in need of educational motivation, and if we can consider the school as the "light," the elderly literally can help a child find his way out of darkness by turning on that "light" of beneficial educational experience.

Borrowing a term used in another industry-sponsored educational motivation project, the elderly can serve as "living witnesses" of life's continuity and provide a child with the opportunity to grasp the movement of life and to experience the warmth of a relationship beyond his own sphere.

Senator Moss. Thank you, Mr. Mercer, for your very fine statement. We are glad to have the testimony, and we are glad for the great interest you are taking in this particular project being developed.

As you pointed out, and as Dr. Jordan has told us, there is a wealth of talent available in our elderly people, if we can just utilize it in this manner. Thank you.

We would like to hear, now, from Mr. Ed Cook, who is president of the Atlanta Board of Education. Glad to have you, Mr. Cook.

## STATEMENT OF ED S. COOK, SR., PRESIDENT, ATLANTA BOARD OF EDUCATION

Mr. Cook. Senator Moss, ladies, and gentlemen, I want to thank the members of this special subcommittee for the opportunity to express my views as a member of the Atlanta Board of Education on the potential usefulness of the Educational Motivation Atlanta project which Dr. Jordan has described. Before addressing myself to this topic, however, I would like to comment briefly on some of the model cities activities which Mr. Johnny Johnson referred to earlier.

The community school program which is to be part of the model cities educational effort was undertaken by the Atlanta Board of Education in 12 schools some 3 years ago. By keeping the school doors open to the community for adult evening courses and other neighborhood activities many of the artificial obstacles that have traditionally separated the local educational institution from the people have been eliminated. In addition to providing opportunities for all citizens to gain salable skills, the community schools have been a boon to the elderly through their classes in ceramics, art, square dancing, and sewing. The fact that the school library is also available provides opportunities for reading books and periodicals not otherwise easily accessible to this group. In essence, the community school is an excellent place for our senior citizens to gather for profitable experiences; and I understand that on more than one occasion it has fostered romance among certain participants in attendance. We welcome the opportunity which the model cities program provides to expand this highly successful project to a much larger segment of our population.

Mr. Johnson also discussed the two school-community multiservice centers with facilities for senior citizens which we hope can be established in the model cities area. The Atlanta Board has already demonstrated its interest in this concept through playing an instrumental role in the development of a \$4 million multiservice center with senior citizens' facilities located in the Vine City neighborhood outside the model cities area. Construction on this project has begun and completion is expected within 18 to 24 months. The potentiality of these centers for providing quality services at the neighborhood level is enormous.

Returning to the "Educational Motivation Atlanta" proposal elaborated on by Dr. Jordan, I would like to say that the Atlanta public schools have always endorsed the fullest possible use of human resources in our communities to enrich the instructional program. The elderly are often repositories of information and skill, and the classroom relationships these people could establish with children of varying socioeconomic background would be of almost infinite worth. Implementation of this program in all schools in Atlanta would be limited only by the constraints of time and imagination placed upon the personnel responsible for its development.

Senator Moss. Thank you Mr. Cook, for that very fine statement, and as the president of the Atlanta Board of Education I am delighted

to have you come and tell us of your views concerning this educational motivation project, and indicating you think it has real possibilities, in fact, almost unlimited possibilities can be developed.

I think all three of you have given us something of great interest, and something that we can study in connection with the rest of the record here that gives us an insight of where we can go. This is very helpful. It is very fine testimony. We appreciate it.

Mr. MILLER. Mr. Chairman, if I may have your indulgence, I would like to make a special comment. You have complimented the Atlanta witnesses, and of course the record speaks for itself as to the enthusiasm and the thoughtfulness that they have given to this whole problem, but I would like to add one personal comment. I have had the privilege of attending more than 100 hearings of the Senate Special Committee on Aging and never have I seen the evidence and the testimony presented with such brevity and completeness as I have so far from you people in Atlanta. This is a demonstration of incisiveness of thinking and disciplined leadership which I am sure will produce the kind of results that the committee is hoping for from Atlanta.

Senator Moss. Thank you, John Guy, for those well-deserved comments. I echo this statement. We appreciate it very much. Thank you.

I think maybe we will take about a 3- or 4-minute stretch. Everybody who would like to, stand up for a minute or two.

(Short recess.)

Senator Moss. Our next witnesses represent the State of Georgia; Mr. Hugh W. Gaston and Mrs. Elsie C. Alvis. Will those two witnesses come forward, please?

I want to say how much I have appreciated the very fine attendance and the good order we have had with the hearing today. I compliment you all. We must go on, now, and we will hear first from Mr. Hugh W. Gaston, who is chairman of the Georgia Commission on Aging. Mr. Gaston.

#### **STATEMENT OF HUGH W. GASTON, CHAIRMAN, GEORGIA COMMISSION ON AGING**

Mr. GASTON. Mr. Chairman, in the interest of time I would like to present the testimony and request you attach the addendum\* I have submitted to you.

Senator Moss. That will be done. The entire document, in both parts, will be printed in full. You may summarize, or highlight, or do as you care in presenting it to us.

Mr. GASTON. Thank you, Mr. Chairman.

Mr. Chairman and members of the committee, first, I would like to express my appreciation and that of the Georgia Commission on Aging for the privilege of appearing here today to present our thoughts on the usefulness of the model cities program to the elderly. We believe that the potential for developing a pattern of delivery of services is great and that the model cities program can and must offer a major demonstration of ways in which a multifaceted attack upon the problems, inherent in these neighborhoods, can be implemented.

\* See appendix 1, p. 499.



I would like to speak to three points, if I may: (1) the role of State agencies on aging in model cities planning; (2) model cities planning for the elderly, as it is proceeding in Georgia, and; (3) ways in which we see each of the task force areas relating to special needs of the elderly.

As you know there was some difficulty at the outset of model cities planning in finding an effective means for the State agency on aging to influence model cities planning for the elderly, due to the lack of framework through which a State agency could readily relate to local model city planning units. However, recent emphasis on inclusion of the State level of planning has brought about increased participation which we believe will lead to a broader recognition of the needs of older citizens as plans are developed.

We believe the State agency on aging can and should play a substantial role in model cities planning, and we will continue to aggressively seek out ways in which our voice and expertise can be channeled to enhance the "Usefulness of the model cities program to the elderly" for certain clearly definable reasons:

#### LOW VISIBILITY OF THE ELDERLY

1. The problems of the elderly have very little visibility in the communities at this time. In Georgia, four of the five funded model cities neighborhoods are in cities where local agencies receive Federal funds under title III of the Older Americans Act, administered by the State commission on aging—funds which assist them in developing special service for older persons. All five cities have agencies putting intensive effort into giving visibility to the particular problems which confront older persons—and all report that visibility of the needs has to be attained before the services so desperately needed can be developed adequately; and, further, sustained. We are in a position to assist in pointing up those special problems which the community may overlook until such visibility is acquired.

2. The elderly have traditionally suffered in silence—they have not militantly expressed the problems which confront them, resulting in the "squeaker wheels getting the oil."

3. We further believe in the value of full involvement of the State agency on aging if the communities are to have programs of an on-going nature evolving from their planning efforts. A staff member of the Advisory Commission on Intergovernmental Relations put it very aptly when he illustrated the need for tripartite involvement thusly: "It has been said that the Federal Government has the money, the State level has the authority, and the local level has the problems." If Federal and local programs, such as those envisioned in the task force areas, are to be of a continuing and on-going nature, it is essential for the State agencies to "buy in" and be a part of the foundation stages of model cities planning.

#### STATE INVOLVEMENT IN PLANNING

Through local stimulation and direct consultation, the Georgia Commission on Aging has been, and is, involved in model cities planning in each of the neighborhoods approved to date. The fact that each of the cities approved has a local group dedicated to finding ways to

meet common problems of older people makes us hopeful that the older person will not be left out of the plans. Still, we know that the final test will come when the receptiveness, which we have sensed, materializes in actual programming in the neighborhoods. We feel, however, that there is much we could do to augment the effectiveness of planning for the elderly if certain additional procedures were built into the planning process. At present, draft copies of model cities applications are dispersed among the regional offices of Federal agencies who are most likely to be involved. Routine distribution to the State agency on aging could assist us in early identification of gaps in planning and would put us in a knowledgeable position to lend the supports to planning for this special segment of need. Joint conferences with other State agencies involved, called by the model cities planners or special ad hoc committees, could provide a means of assuring that all bases are touched in the early stages of planning.

We believe that model cities planning should be directed so as to spread beyond the boundaries of the ghetto and that such planning should ultimately serve to enrich the lives of all citizens. States have both the interest and responsibility to work in this direction, and the State commission on aging is particularly anxious to do this for Georgia's older citizens.

We hope to use this opportunity, here in Georgia, to help the model cities programs within the State spread its benefits and value beyond the confines of the neighborhood boundaries. Georgia's older citizens need to serve and be served. We do not think this is unique to our citizenry, however.

#### THE SITUATION IN ALMA

To illustrate, one of our model cities, Alma, Ga., is located at a point of outmigration with a balmy climate near the seashore, Jekyll Island, and the rivers and lakes for fishing, near a park of national interest in the Okefenokee Swamp, and still is near enough to the cities to take advantage of major league sports and cultural events. Alma has just been approved for model city planning funds; and already, the planners are beginning to incorporate ideas to draw in the services of older citizens from the community and outside the community to help "rebuild" the town into a model community. They are planning to seek out the interests of retired and retiring persons in areas of the country with less favorable climates to come to Alma and bring with them the wisdom and Yankee ingenuity, to join hands with the community in sharing the skills and ability to serve which they have developed over a lifetime. This positive and bold determination to capture the hearts and minds of mature individuals nearing retirement age fits well into Congressman W. S. Stuckey's rural opportunities package which adds to the civic, religious, and social involvement—the all-important opportunity for earning money.

We hold that older persons who reside in the model cities neighborhoods could benefit from exposure to other older persons who have had broader opportunities to develop leadership skills. We would offer a plea that thought be given to the need for a cross section of income levels within the planning body, if such does not exist, as the older person who has gone through life in desperate straits and who has had little or no opportunity to develop leadership skills while struggling for bread and existence, may find it difficult to learn leadership from

elderly persons in his immediate environment who likely bring a somewhat similar life experience.

The concept of providing opportunities for older persons to render service, as well as to receive services, deserves immediate attention. What we are asking for is a greater sensitivity to the compassion which is so abundant in the older person—the ability, as well as the need to give of themselves and render services to those around them. Older people have genuine concern for others and have the time, if not the means, to provide the neighborly helps that are so vital to survival in this age group. We offer a plea that in this manner, leadership be developed among the elderly and that they be given status for the roles they play—and rewarded monetarily and with recognition.

Looking next at the needs for services, we see that each of the task force areas touch on needs inherent to all segments of the population, but are intensified in the latter stage of life.

In the interest of time, we would like to file our thoughts on needed services in each of the task force areas. In so doing, we are aware that the problems facing senior citizens cannot be isolated into neat and separate categories, such as income and employment, health, or social functioning, as all the facets of man's life style are interdependent. We are working with each neighborhood to build its plan on its own very special needs. We do believe basics must be explored in each location. We are totally committed to finding ways to assure that the basics are provided and model cities offers a hope in this direction.

Mr. Chairman, thank you.

[Attachment]

SUPPLEMENTARY MATERIAL SUPPLIED FOR THE RECORD BY HUGH W. GASTON

1. *Health*.—If there were one service which we would wish to be available for all older persons, it would be the homemaker service. When the well-trained, well-rounded homemaker/home health aide is called into an older persons home, basic health needs as well as social needs can be met, reducing the likelihood that the senior citizen will have to be removed from familiar surroundings and placed into a dependent situation, depriving him of one of the few remaining sources of satisfaction he may have at this stage of life.

2. *Education*.—Here again, the older person's educational needs are strongly marked as they attempt to keep up with developments of a world in rapid change. To overlook the educational needs of the elderly is to fall victim to the outmoded, disproven, and dangerously misleading preconception that "you can't teach an old dog new tricks." It has been demonstrated that the older person's ability to learn never leaves him as long as the educational content is geared for use, and he is able to relate the content to his own needs.

3. *Transportation*.—A desperate need exists for planning for transportation adapted to the special needs of the elderly. This does not necessarily require great expenditures of monies, either. Volunteer services are mobilized in a number of our communities to supplement a well-planned system of transportation, but it cannot meet the transportation needs exclusively. Again, we would ask for more sensitivity to the special problems a lack of feasible transportation may inflict on the older citizen. In two of the Georgia Model Cities areas, aged residents now have to travel cross-town from their low-rent housing projects to pay rent and utility bills. Taxi fare is a major expenditure for the old-timer who has a meager income and who may be too feeble or in such health that even a two block walk is out of the question.

Alternatives to this cross-town travel decidedly exist and should be explored, but while paying utility bills at the housing project office may help solve this problem, getting the cross-town supermarket's produce into the older person's pantry will require some special planning.

4. *Housing*.—It is hardly debatable that a frequent lack of adequate income and specialized needs of the aging have heightened the problem of housing for older

residents of Model Cities neighborhoods everywhere. The older person needs a choice of housing assistances from which he may select, in dignity, that which meets his own specialized and highly personalized needs. Whether he requires some form of rent supplement, apartment-house living, assistance in repairing his own home, or congregate living facility, effort must be made to keep him in the mainstream of living and to prevent his being totally isolated from the community.

5. *Income maintenance.*—Of all the special problems of the older person, it can be agreed that maintenance of sufficient income is the most pressing. Denied the pursuit of full-time employment, through arbitrary retirement policies and through increasing physical inability to meet the demands of full-time employment, the senior citizen's income is far below the national average. Mr. Nicholson will be developing statistical data, I believe, later today which will point out the high percentage of O.A.A. recipients among Model Cities neighborhood's "sixty-five and over" residents.

We are going to have to find ways to help these O.A.A. recipients spread their subsistence checks throughout the full month, assuring that the food allowance upon which their life depends, will not be eroded by other necessities which are presently omitted from the budget, such as telephone, transportation, eye glasses, dentures, church dues, and an unending list of incidentals vital to their comfort and wellbeing.

6. *Social Services.*—All too frequently, we overlook the very particular social needs of the senior citizen. In this day of a mobilized economy, the older person is frequently separated by great distances from his family which traditionally has offered emotional support in times of stress. The examples here are endless—the older citizen who loses his or her spouse and who must be worked with intensively to prevent social isolation in the face of such adversity is high on the list.

These people need a way to find the helps they seek—and sometimes they need someone to find them when they are in need. A well-functioning Information and Referral Service, incorporating a method of "outreach" would be invaluable, in its ability to discover problems before they become unmanageable as well as to help the puzzled older person through the maze of getting to the place or person who can meet his very special need.

7. *Employment.*—We would offer that Model Cities neighborhoods need to consider the special employment needs of its older citizens as they relate to all aspects of his life—the social, physical, emotional, and perhaps even spiritual components of his being. Sheltered workshops, in which the older person can work at his own pace, earning a sufficient amount to supplement his income in retirement while providing him with a piece of the stuff by which man's worth is frequently measured—his ability to work at gainful employment—would be one means of meeting a number of needs. The development of "home industries" by which a senior citizen may work at this own pace, beneath his own roof, is another. In our highly computerized society, I am certain that there are thousands of chores and useful services which could be profitably performed by aging workers in sheltered shops and in their own homes.

8. *Crime and delinquency.*—This area does not readily suggest the applicability of the needs of older persons—but with a closer look, we find here, too, the older citizen is particularly vulnerable. Flim-flamming, extortion, vandalism, and robbery strike the older person more readily than anyone else in the population. The lonely elderly are particularly susceptible to confidence schemes in their eagerness to engage someone in conversation. Older people know what hazards they face with regard to crime and can add meaningful planning to the task of crime prevention.

9. *Physical environment and relocation.*—With the loss of so much that is familiar, special care and sensitivity to the problems involved in relocation is an essential dimension of planning which must be incorporated into the task.

The problems facing senior citizens cannot be isolated into neat and separate categories, such as employment, health, or social functioning, as all the facets of man's life style are inter-dependent. We have only attempted here to touch, superficially, on the high spots in each of the task force areas, but we are working with each neighborhood to build its plan on its own very special needs. We do believe these basics must be explored in each location. We are totally committed to finding ways to assure that the basics are provided, and Model Cities offers a hope in this direction.

Senator Moss. Thank you, Mr. Gaston, for a very fine statement, and the fine supplement that you have prepared to go with it. I am

particularly pleased to have you indicate that you think the model cities planning offers a much needed opportunity to involve the older people themselves in the planning phase of shaping the development so that it fits their individual needs and individual problems. I think there is nothing more fundamental to this whole thing than involving the older people themselves, and calling on their experience, and their wealth of information in developing this so that it is their program right from the beginning, and I congratulate you on that foresight and determination.

We would now like to hear from Mrs. Alvis, the former executive director, and now president, of the Georgia Gerontology Society. Is that right?

Mrs. ALVIS. Not quite.

Senator Moss. Well, I tried.

**STATEMENT OF MRS. ELSIE C. ALVIS, PRESIDENT, GEORGIA GERONTOLOGY SOCIETY\***

Mrs. ALVIS. Mr. Chairman, and all the people here, I am delighted to be here. I have submitted a statement, but I think I will just briefly summarize some of the points I would like to make.

Senator Moss. If you would like to do that, and the statement in full will be in the record.

Mrs. ALVIS. I was formerly the executive director of the State commission on aging. Mr. Gaston was the chairman but I am presently president of the Georgia Gerontology Society. My experience, I would say, coincides pretty much with what Mr. Gaston has already expressed, since that has been my major work during 8 years.

On the subject of voluntary participation, I have more firm feelings, I expect. I had been a retiree for a short time and have been involved in the past 8 years in the program for aging people. So I now refer to myself as a resignee.

Now I kind of like that role, because it is voluntary, you know. But in a way my concern is about delivery of services, and that was one point I was asked to comment on, that during the period I had served on the Commission on the aging I was so aware of the many services needed, big agencies, small ones, voluntary, and public, that very little visible evidence of cooperative planning, coordinated delivery of services.

So it seems to me the model cities, the model neighborhood plan, really offers us a challenge and an opportunity to prove that they can be coordinated, and there can be cooperative planning. If we don't get that result, then I would say the Federal Government is wasting a lot of money, and I would hope that the experience, the demonstrations in the five towns and cities in the State of Georgia, would not only affect and benefit those communities, but the experience would be passed on throughout the State to lesser or greater degrees, depending on the different communities, and therefore they should be realistic, and they should be visible, and they should be of such nature that other communities can pick it up and utilize it. If we don't have that opportunity, then I think we have wasted a lot of energy and time.

There are a few specific services which Mr. Gaston mentioned, which I would like to again mention. These are gaps in services, as I

\* See Appendix 1, p. 495 for additional material.

see it, which should come to the attention of model cities and neighborhood services. Several points of information: There are a lot of resources already available, and new ones that will be made available, but who knows about them? The older people do not always know where the resources are and how to get to them. So a referral center, resource center, should be established where this can be made known.

Transportation has been mentioned. I'm delighted to hear Mr. Johnson, in Atlanta, really is coming out with a good plan of transporting older people to the resources, or carrying the resources to the older people. This is one program that the Gerontology Society, a voluntary society, is giving some thought to; not only to the provision of transportation, but cost; reduced costs. We may take this on as a program for the next year to see what we can do to influence transit companies, and so forth, to reduce the cost.

Now, we can't make a commitment on this; we are not promising anything; but this is something we feel needs to be done.

### HOME HEALTH CARE

Home health care programs, that would be partially paid for through medicare. I think we are lagging terribly on this, because the older people are entitled to this. They are helping to pay for this through this added \$4 a month. And I think we owe it to people in every town and community to make this service available; all the home health care services.

Day care program people: We heard today about day care for children, and the part older people can play in helping to give this day care, but nowhere in the State of Georgia do we have day care for older people who need not go to nursing homes, if there is some other facility available. It would help the families and everyone if this type of service could be provided.

Home-delivered meals: We have only one semblance of such a program in the State of Georgia, where food can be taken to older people in their homes, or older people can be taken to a central point, where at least one hot meal a day could be provided. Now, this is simple, but a very important missing link, I think.

Another service that can be given by any community you are very familiar with: Volunteer friendly visiting. This can be not only to provide the service to the elderly people, but one which is ideal in which older people can participate.

So there are still many gaps, and again today I am glad to hear plans are in the making in the Atlanta area to provide many services. We haven't scratched the surface yet, I assure you, and there is opportunity for it.

### INVOLVEMENT OF VOLUNTEERS

Now just a few comments on opportunities for the involvement of volunteers. There are unlimited retired people, or people in the older age group, in the State of Georgia and the city of Atlanta. There aren't many opportunities yet that have been developed to involve in giving service, or becoming a part of this. Some very good ones were described today, but they are not too visible; they are not too well known; they do not involve enough people to begin, again, to scratch the surface on what might be done if better opportunities were developed,

new programs, new chances for older people to participate. And then to let it be known that these things are available.

We have to develop new ways and means of reaching these retirees and preretirees. And I propose that we need programs that can be either financed, or where the volunteer can purely give full time and provide the cost and do whatever is needed. In other words, an out-and-out volunteer. Because there are many older people who would say, "I don't need to be paid, but I do want to have a part in this kind of community life. I don't want to have to keep time records, and I don't want to bother with some petty voucher to be reimbursed."

Others would say, "I can give my time, but I would be happy to be compensated or reimbursed for added cost, travel, or what have you."

Then a third category would relate primarily to people who lived in the model neighborhood areas, or contiguous to it, would be those who would need to be paid both for their time and for involved costs.

Now, I think, usually, planners are apt to think, "Well, we will set up a plan. Everybody has to fit into it. Either we are going to pay everybody, or we are not going to pay anyone." Now, I think planners must realize that, in this volunteering, the retiree or older person comes home; there are all kinds of people with all kinds of attitudes, and interests, and plan accordingly. Not try to fit everybody into a pattern. Let's have patterns that fit varieties of people, and until we have done this, I think we are not going to make a very good showing in this involvement of older people, even though I think we want to be involved—I will include me in this—we want to be involved, but we want to know it is worth while; it is a challenge to us; it is something to which we can contribute; and that we are needed and wanted. I have no complaint on this, because I find myself very busy indeed. But many people are not.

Mr. Parker, who is in the audience, Harold Parker, who succeeded me in this position of executive director, said to me the other day that "what we really are talking about in this model cities program, in this coordinated planning, is organized neighborliness." Well, I would accept this, provided planners don't get so involved in the planning process, and the organization, that the neighborliness gets overlooked and submerged. Thank you very much.

Senator Moss. Thank you, Mrs. Alvis, for a very fine statement, and a person who has been working in the field the length of time you have certainly has much to contribute to us, and I am very happy to have your testimony here today.

If there are no questions, then we will excuse you, and thank you again, Mr. Gaston and Mrs. Alvis. As I said, we have had a very fine audience today, and I learned that one member of our audience is having a birthday today; in fact, her 92d birthday. Is Mrs. Holmes in here now? Mrs. Holmes Alexander, it is. Congratulations. [Applause.] We are glad you celebrated it with us here, today.

(The prepared statement of Mrs. Alvis follows:)

#### PREPARED STATEMENT OF MRS. ELSIE C. ALVIS

Mr. Chairman and members of the committee, may I say that it is a privilege to speak before this group today in terms of my previous and continuing interest in and knowledge of certain needs of older persons in Model City areas and throughout the State and some of the inadequacies of the delivery of services already available as well as for the provision of new and needed services.

My assignment also encompasses opportunities for use of volunteers, including retired or older individuals in Model City neighborhoods, and I trust, elsewhere in Georgia.

Of major concern to me over the seven or eight years when I served as Executive Director of the State Agency was the fact that vast amounts of money—local, State, and Federal—were available to and used by numerous large and small agencies, both public and voluntary. Invariably, each pursued his own course with little *visible* evidence of coordinated or cooperative planning. Consequently, many gaps appeared and some duplication and even competition resulted. Lack of money resources was often blamed, but the truth is that basic resources do exist in every city, town, and county or neighborhood. Delivery of such services to home-bound older residents or plans for transporting these residents to the resources have too often been a missing element.

The purposes and principles of the Model City program are designed to overcome such missing links where such programs have been authorized and to demonstrate to other communities the feasibility of this coordinated approach. Since Model City funds are not and probably will never be available to all communities, it is highly desirable that what is learned and demonstrated in the fortunate few be utilized, with or without Federal funds.

What are some of the needs which might be called inadequacies? My comments are to emphasize rather than duplicate some of the program areas Mr. Gaston has identified.

1. A central point of *Information and Referral* should be a "must" and can be established without excessive cost. Mr. Gaston has mentioned a few such programs which were partially funded through Title III of the Older Americans Act.

2. *Transportation* in terms of availability and reasonable cost is a crying need in Metropolitan Atlanta and throughout the State. (The Georgia Gerontology Society, a voluntary organization, is giving some priority planning to a reduced-fare program for older citizens during the next year.)

3. *Home Health Care Programs* which would be partially paid for through Medicare are lagging in most cities, towns, and smaller communities thus depriving thousands of potential recipients of services due them.

4. *Day Care*, as an alternative to full-time nursing home care would be of inestimable value to the individual older person and to members of his family. No such program exists in Georgia but the need and demand is everywhere.

5. *Home Delivered Meals* or a hot meal a day in a central location, with transportation provided, is a proven need but not an easy or inexpensive program to initiate and maintain.

6. Last but not least, the familiar *Friendly Visitor Service* which is flexible, simple, and inexpensive as a sponsor chooses to make it. This is an ideal program for the involvement of retired persons, both as providers and recipients of services.

All of the above suggested services, with the exception of Home Health Care, are above and beyond those normally provided by Departments of Health, Welfare, Recreation, Labor, etc. Imaginative and creative planning by practical and knowledgeable leaders, plus essential funds can make possible these newer and needed services.

2. *Opportunities for the Use of Volunteers in Model City neighborhoods and others throughout Georgia* are unlimited. A number of programs already functioning and now in the planning stages have been described by previous speakers, eg. West End Child Development Center, Elderly School Aides and others. CAP agencies of O.E.O. and a number of Title III, Older Americans Act, projects have demonstrated the availability and "usability" of individuals from the older person population. The potential has been explored in a limited fashion, only, and for limited purposes. More *varied* and *visible* opportunities and demonstrations must be shown to attract individuals in the so-called "retired community" and those approaching retirement age.

A generalized approach based on an unproven theory, that countless numbers are waiting with bated breath to be drawn into the so-called "Mainstream of Community Life" is, in my opinion, an unrealistic one. This statement applies not only to the lack of known opportunities for service but to the attitudes, interests, and capabilities of retirees. I would suggest that we think more of "Tributaries" than of the "Main Stream" in our planning and of ways and means of involving individuals rather than a cohesive total or mass of older people in programs and activities.

This theory implies to me a recognition of varied roles to fit varied potentials and capabilities with the assurance of preparation (orientation and training) for



those who need it for specific jobs. Some will be willing and will actually prefer to serve without compensation for time, transportation, and other costs; others will be willing to volunteer their time but may welcome reimbursement for actual expenses; while many will want and need allowable payment for both time and expenses. The latter may well apply to low-income older residents of Model City areas who should be given considerable priority consideration for service roles for which they are suited.

*Recruitment* for both leadership and job roles should be realistic in terms of program and service needs and planned to reach potential volunteers "where they are" both within and without the target areas. Plans for *orientation, training, and supervision* should be carefully developed and made known to prospective volunteers prior to their involvement; assignment to positions or roles should be adapted to individual interests and capabilities.

*In summary*, I would emphasize that the Model Cities experiment and demonstration can and should do much to prove, or even disprove, the feasibility of a coordinated approach to planning and delivery of service to the aging population in the target areas and throughout the State. It should also provide new opportunities for the involvement of retirees, pre-retirees and others of the older generation in leadership and work roles.

The State Commission on Aging with its broad range of experience, responsibilities, functions, and resources is admirably equipped to assist with coordinated planning as is the voluntary organization, the Georgia Gerontology Society through its statewide membership. Gaps in the delivery of services now available through existing agencies and organizations and creation of new and untried ones may constitute roles for either or both of these organizations. It is most appropriate that further experimentation in the involvement of older persons, now retired or approaching retirement age, be given priority by all agencies, organized groups and individual leaders identified with the Model City program.

Within the range of major problems which the elderly face are those that may be solved through services created and delivered to them in their home setting or in a central meeting point where both "social" and "physical" needs may be met. Those identified as "urgent" include hospital, nursing home, Home Care Services, adequate income and suitable housing. Those termed as "essential" should be extended to include transportation, Day Care, home delivered meals, educational, recreational, and social outlets and others.

Those in the latter category and some in the former should offer many opportunities for the elderly to serve others of all ages in Model City and other neighborhoods if sound plans are developed for such involvement by and for older persons. Provision should be made for money payment to those "volunteers" who need or want such assistance, but opportunity should also be given to those who are willing and able to contribute their time and talents without compensation.

Imaginative thinking by community leaders and practical planning which includes the thoughts, wishes, and knowledge of older persons should result in programs and services that may be developed without excessive monetary costs. We all know there isn't and need not be, money available to pay for *everything*, especially on a continuing basis. A true demonstration should prove and make visible both problem areas and solutions to problems which may be considered by communities through the use or non-use of local, State, and Federal funds.

Senator Moss. We are now going to hear from various representatives in this region. Mr. Frank Nicholson, Associate Regional Commissioner on Aging, of HEW; Joseph Davenport III, planning associate, project on aging, Nashville Council of Community Services; Mrs. Clarence A. Johnson, administrative coordinator, Gainesville-Hall County Economic Opportunity Organization; Mr. Jesse F. Fuller, project director, Hillsborough County Citizens Advisory Council on Aging, Tampa, Fla.; and Mrs. Helen Brawley, project director, Comprehensive Planning and Services for the Aging, Carolina Community Actions, Rock Hill, S.C.

We have many out-of-State witnesses and we are delighted to have all of you come here today to help us in completing this record. We haven't been able to travel to every State. We have only been able to

go into various regions of the country. So we are pleased you came in to Atlanta to give us your testimony, to help us in making our record.

Mr. Nicholson, who is the Associate Regional Commissioner on Aging for HEW, will lead off, and we will let you be sort of chairman of this panel, Mr. Nicholson.

**STATEMENT OF FRANK NICHOLSON, ASSOCIATE REGIONAL COMMISSIONER ON AGING, DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE; ACCOMPANIED BY JOSEPH DAVENPORT III, PLANNING ASSOCIATE, PROJECT ON AGING, NASHVILLE COUNCIL OF COMMUNITY SERVICES; MRS. CLARENCE A. JOHNSON, ADMINISTRATIVE COORDINATOR, GAINESVILLE-HALL COUNTY ECONOMIC OPPORTUNITY ORGANIZATION; JESSE F. FULLER, PROJECT DIRECTOR, HILLSBOROUGH COUNTY CITIZENS ADVISORY COUNCIL ON AGING, TAMPA, FLA.; AND MRS. HELEN BRAWLEY, PROJECT DIRECTOR, COMPREHENSIVE PLANNING AND SERVICES FOR THE AGING, CAROLINA COMMUNITY ACTIONS, ROCK HILL, S.C.**

Mr. NICHOLSON. Senator Moss, committee members, welcome to the southeastern region. It is indeed a privilege and a pleasure to have you as the Senate Special Committee on Aging here in region IV to give us an opportunity to present information to you, and to share our views with you on this vital topic.

My written testimony has been submitted for the record, and in the interest of time I would like to give a general overview of the regional picture.

Senator Moss. All right. We will be glad to have you do that. Your full statement will be in the record.

Mr. NICHOLSON. Thank you.

(The prepared statement of Mr. Nicholson follows:)

STATEMENT BY FRANK NICHOLSON

Mr. Chairman, Committee Members, it is indeed a pleasure to have the U.S. Senate Special Committee on Aging here in our Southeastern Region to provide us an opportunity to make our views known to you with regard to the "Usefulness of the Model Cities Program to the Elderly."

We have six States in our Region—Alabama, Florida, Georgia, Mississippi, South Carolina, and Tennessee. The estimated population in the Region (July 1, 1967) is 22,883,000, of whom 2,134,000 or 9.3 percent are age 65 years or older.

To date, Model Cities have been named in all States except Mississippi. We now have 15 Model Cities in the Region, as follows:

<i>State/Model City</i>	<i>Date announced/or funded</i>	<i>State/Model City</i>	<i>Date announced/or funded</i>
Alabama:		South Carolina:	
Huntsville.....	Feb. 26, 1968.	Rock Hill.....	Nov. 4, 1968.
Tuskegee.....	Dec. 3, 1968.	Spartanburg....	Nov. 21, 1968.
Florida:		Tennessee:	
Miami.....	Feb. 15, 1968.	Chattanooga....	Sept. 6, 1968.
Tampa.....	Feb. 19, 1968.	Cookeville.....	Nov. 21, 1968.
Georgia:		Nashville.....	Feb. 23, 1968.
Alma.....	Nov. 21, 1968.	Smithville.....	Mar. 15, 1968.
Athens.....	May 20, 1968.		
Atlanta.....	Jan. 30, 1968.		
Gainesville....	Feb. 13, 1968.		
Savannah.....	Sept. 6, 1968.		

Our estimate on the total population in the Model Cities in the region is 3,013,836, which an estimated 373,184 or 12.4 percent reside in the model neighborhood area. Of the model neighborhood residents, approximately 29,724 or 8.0 percent are age 65 and over. Of the elderly model neighborhood residents, an estimated 7,438 or 25.0 percent receive old age assistance.

As you know, Mr. Chairman, the Model Cities program is intended not only to upgrade the physical environment of the neighborhood but also to improve significantly the lives of the residents in the neighborhood. The main thrust of the program is to help people—to help them raise substantially their levels of education, health and medical treatment, employment and job training, income, and social services in the model neighborhood. The primary responsibility is placed on the local community. The Model Cities program encourages cities to coordinate and concentrate public and private resources in a locally developed program to deal more effectively with local urban problems. Accordingly, each Model City identifies its local problems, needs, resources and establishes its own priorities for providing additional services or facilities required. At the Federal level, we reviewed the initial application for planning grants and will continue working with the cities to plan and carry out their programs. We want to serve in a responsive, supportive, and helpful role to the cities. This is true as well of our State related agencies in DHEW. From the beginning of the Model Cities program, we have encouraged our State Agencies on Aging in Florida, Georgia, South Carolina, and Tennessee to join us in this effort. And they responded favorably. We work with and through them in providing consultation, technical advice, or assistance with grant applications. So the local, State and regional levels of the Federal agencies are exploring new ways of blending together the services of public and private agencies in a coordinated approach to the problems of the Model City neighborhoods.

We know that through the efforts of our State Agencies on Aging that contacts have been made with a number of the Model City Agencies. These contacts may have been made directly and/or where there are local agencies specifically serving the elderly, including Title III grantees under the Older Americans Act, many of these agencies are serving as advocates for older people, maintaining communication and working relationships with the Model City Agency. There are several of the Model Cities in the region which are now nearing the completion of their initial planning phase. There appears to be an expressed interest in several of the cities with regard to providing essential services to meet the needs of the elderly in their Model City neighborhood. It is too early to describe these plans precisely at this time. We do expect the recommendations to be forthcoming in the next couple of months.

At the hearings before your Committee in Washington in July, Mr. William Bechill, Commissioner, Administration on Aging, SRS, DHEW, described several activities currently taking place under various programs of the Older Americans Act. He stated that if these were replicated broadly, they would have "a major impact on the future development of basic programs and services for older people in communities receiving Model City awards." Commissioner Bechill described activities in the areas of community planning, information centers, senior activity centers, food and nutrition services, and transportation. All of these activities he described are certainly applicable to this region and are noteworthy of consideration by all of our Model Cities in this area.

As you know, the five Federal agencies directly involved in the Model City program are Housing and Urban Development (HUD), Office of Economic Opportunity (OEO), Labor, Bureau of the Budget, and the Department of Health, Education and Welfare (DHEW). The primary responsibility for providing the leadership in this effort is with the Model City Administration in HUD. We have a Regional Interagency Coordinating Committee which has representation from each of the four Federal agencies in Atlanta, including DHEW. Within DHEW, the office of the Regional Director has the coordinating responsibility for the program. We have a Regional Resource Committee on Model Cities comprised of representatives from the DHEW agencies. Consumer Protection and Environmental Health Service, Office of Education, Health Services and Mental Health Administration, Social Security Administration and Social and Rehabilitation Service (SRS).

Our Aging Services is a component program of SRS and is represented on the DHEW Model City resource committee by our two Assistant Regional Commissioners, each of whom works with three States. These two SRS representatives have participated in on-site visits and discussions with officials in several of the

Model Cities. We in Aging Services are kept informed through these channels and are brought into the local situation when there is an indicated need to do so.

Mr. Chairman, you know that the processes involved in effecting the Model Cities program are complex. There are several suggestions I wish to make for consideration with regard to action that can be taken at the regional level to increase coordination and overall effectiveness among agencies involved in Model Cities planning and programming. They are:

1. We in DHEW have made determined efforts to keep our respective State agencies informed, up-to-date, and involved in the Model Cities program. The recent reemphasis by HUD that the States become increasingly active in the Model Cities program should improve coordination.

2. Much effort has gone into developing a communication system in the region between and among the local, State and regional levels in the Model City program. We will continue to explore ways to improve it. We need to continue staff training by identifying training needs and possibly the development of short courses to meet some of these needs.

3. With limited regional staff and travel budgets in Aging Services to meet current program needs, the addition of a high priority such as the Model Cities program imposes severe restrictions on our ability to respond adequately at an appropriate level. An increase in staff and travel funds would strengthen coordination efforts.

4. Once a city has defined its problem, and the kinds of services and/or facilities it believes is required to cope with them, evaluated existing systems and resources, and has established its priorities and determined the cost, then I believe it is the primary responsibility of the Federal and/or State agencies to consider these needs and to identify them and make available the sources of funding related to them, if any. An effective coordination of funds, through simplified procedures and process is essential and necessary if the Model City is to succeed. The current legislation provides funds on the basis of categories of service. This makes it difficult to coordinate funds for any specific problem. I am convinced that categorical funding as provided for in current legislation is not compatible with comprehensive planning.

5. It is my understanding that each of the Model Cities has established a series of task forces in broad problems existing in Model City neighborhoods including the areas of health, education, transportation, housing, income maintenance and social services, employment, crime and delinquency, physical environment, and relocation. Each task force is concerned about the total problem in its sphere of responsibility as related to all people in the Model City area, including the aged. I submit that none of the task forces will be successful in their endeavors if they neglect to consider the unique problems which various special interest groups, including the aging, may have as related to their particular task. This is necessary to double check the soundness of the plan which is being developed. Priorities may have to be established within the plan. But the parts and pieces are related to the whole—like a jigsaw puzzle. If special interest groups are not considered, then one runs the risk of developing a plan which would appear to meet the needs of all but which in reality fails to meet the needs of many. There will, of course, be many common elements. I believe the Model City task forces should be encouraged to consider the special interest groups in the development of their plans and to identify unique needs which they have so as to assure that these are built into the service system.

6. The Model City task forces are intended to be problem oriented and neighborhood centered. Care should be taken that they do not become program oriented and agency centered, which is the traditional pattern. Only recently have we begun to consider consumer needs and the citizens' point of view in our governmental planning efforts. Perhaps the best way for agencies and their paid professional staff to participate in the Model City role is in a consultative capacity. Real innovation and new approaches to old problems are most likely to occur when there is a high level of citizen participation, including the elderly, on the task force.

7. All the monies now available for aging in the States under Title III of the Older Americans Act are allocated to the State Agencies on Aging for their disposition. They determine what projects will be funded in the various communities throughout their respective States. Four States in our region presently participate in the Title III program—Florida, Georgia, South Carolina, and Tennessee. The majority of funds which they currently have are obligated for continuation of projects already funded and only a small amount remains for new starts. The State Agencies must consider requests and pressures from many communities

throughout the State, including Model Cities, for these limited funds. The State Agencies, of course, would be in a better position to respond to these many needs if they had a higher level of funding.

Mr. Chairman, I hope that my suggestions may be of some help toward the improvement of the overall model cities program for I believe the program can be very meaningful and extremely useful to the elderly if the cities decide to make this so. Regardless as to how effective the coordination of service may be in the model city effort, this will be meaningless to older people if the model cities do not give some priority consideration to the major needs of their elderly residents in their planning and allocation of resources for services and/or facilities. A very basic and fundamental question is the attitude that our cities have toward the elderly. If it is good, then it will be reflected in the actions the cities take. Will they try to give life some purpose and make it more meaningful for their elderly residents? I am reminded of a poem by Rev. W. Candler Budd, which goes like this—

"Old Age is a boon or a bane, a cordial or a curse, a symphony in the soul or a thorn in the flesh, a time of rejoicing or an hour of weeping, days filled with delight or nights crowded with despondency."

How will the elderly fare? The answer will depend a great deal on what each Model City decides and the level of resources available to meet the identified needs. If the model cities give significant recognition to the major needs of the elderly then we will have taken another step forward toward accomplishing our objectives for older Americans. I hope they do so. Our Regional office looks forward to joining hands with all other interested parties in the model city effort.

Mr. NICHOLSON. We have 6 States in our region, with an estimated total population of 22,883,000, of whom 2,134,000, or about 9.3 percent, are people aged 65 and over.

It might be of interest to you to know that some 414,673 of these older citizens receive old age assistance, or about a little better than 19 percent.

The maximum grant for the old age assistance recipients ranges from \$50 in Mississippi, to \$90 in Tennessee. The average payment made for old age assistance ranges from a low of \$40 in Mississippi to \$75 in Alabama.

#### FIFTEEN "MODEL CITIES"

Today we have 15 cities in this region named as model cities.

Our estimate of the total population in these 15 model cities is about 3,013,836, of which about 12.4 percent, or 373,184, actually reside in the model neighborhood areas.

Of the model neighborhood residents we estimate about 29,724, or about 8 percent of these people are 65 and over, of whom about 25 percent receive old age assistance.

The model cities program is extremely important to the residents of the model cities neighborhoods, and certainly to the older people I have indicated.

At the Federal level it is our intent and purpose to serve in a responsive, supportive, and helpful role to the cities, as they go about resolving their problems and identifying ways to meet—to provide the services to meet these needs. This is true also of our State-related agencies within the Department of Health, Education, and Welfare, including the State agencies on aging which we have in the region. We work with the State agencies on aging, in providing consultation, technical advice, or assistance with grant applications to these local communities.

I might add, too, that through our State agencies we know that a number of contracts have been made, either directly by the State

agencies themselves, or by local agencies which have a particular interest in older people, with the model cities agencies. They are serving as advocates of older people, if you will. And we know that there are several of these model cities now in the region which are nearing the completion of their initial planning phase.

Atlanta, just within the past few days, has submitted its recommendations. We expect recommendations to be forthcoming from several of these other cities in the next couple of months. And it is too early for me to say to you at this time what the current plans are with regard to the elderly in these model cities. We are waiting anxiously, of course, to learn what these are, and to work with the cities in providing the funding for the services.

The primary responsibility for providing the leadership in the model cities program here in the region is with the model cities administration and the HUD agency. There is a regional interagency coordinating committee which has representation from each of the four Federal agencies in Atlanta; the OEO, HUD, DHEW, and Labor, and they do have a committee with which they coordinate their efforts.

Within the Department of Health, Education, and Welfare, our regional director has coordinative responsibility for the program, and we have a regional resource committee on model cities within the DHEW on which there is representation from the several agencies within the Department, including the social and rehabilitation services. We have two assistant regional commissioners as our representatives on this committee, and we in aging services work through them in responding to the needs of the cities, and I might add that these two men have, on several occasions, made visits into the field to the local model cities themselves, to work with them.

Well that's our general picture. The written testimony is more in detail, and it includes suggestions with regard to coordination of services which was requested.

In order to provide more of a regional flavor to the hearing we have with us today representatives from agencies which have an expressed interest in older people, each from a different model city, and from different States. Each has a brief presentation to make. Three of these people come from organizations which receive title III funds under the Older Americans Act from their respective State agency on aging, one of these being a local CAP agency. These are the committees of Tampa, Nashville, and Rock Hill. All three of these organizations are involved in community planning activities for the elderly.

The other person comes from a CAP agency, Gainesville, Ga., which has considerable interest in and concern about the poor elderly people with whom they come in contact.

I have requested each of these people to give us a brief description of their local situation which leads them to believe the model cities program would be helpful to them in meeting the pressing needs of older people which are not met by existing programs, and such other comments as they consider appropriate.

After they have made their presentation, Mr. Chairman, I would like the privilege of making a closing statement.

Senator Moss. Very good. We will proceed in that manner. We will be glad to. If you will indicate in what order these people are to speak, we will go right ahead.

Mr. NICHOLSON. I would first introduce Mr. Joseph Davenport, planning associate, Project on Aging, Nashville Council of Community Services.

**STATEMENT OF JOSEPH DAVENPORT III, PLANNING ASSOCIATE,  
PROJECT ON AGING, NASHVILLE COUNCIL OF COMMUNITY  
SERVICES**

Mr. DAVENPORT. Senator Moss, I would like to comment on three basic areas in which the model cities program will be of special advantage to the elderly in Metropolitan Nashville—Davidson County, or as we say, "Music City, U.S.A.:" One, it appears that the model cities program is ideally suited for the coordinated and comprehensive planning required to "plug the gaps" in the delivery of services to the elderly. For too long our social welfare delivery system has been characterized by fragmentation and lack of coordination. Agencies and organizations have operated largely independently. Model cities offers the opportunity for joint planning and joint action by all levels and segments of the private and public sector.

There is also the opportunity for increased representation of the aging in the planning and decisionmaking processes. There has been a tendency for the aging to be under-represented and overlooked; hence they have not received their fair share of social welfare services.

Examples of this are easy to find in Nashville. Several agencies offer foster home care to children, but the only such service for senior citizens is to patients of Central State Psychiatric Hospital. There is a protective services program for children, but there is none for the older person. Indigent children can usually secure prescription glasses, but the indigent elderly are lucky if they receive glasses after a long wait. The list could go on and on; these are just a few blatant examples. I feel that one of the primary reasons for this situation is that the aged have not received adequate representation in the community's planning and decisionmaking processes, and I feel that model cities has the potential to alleviate this problem.

Reality does not always stem from potentiality, but the Nashville scene looks encouraging. Important steps have been taken which will insure that the interests of the aging are not overlooked in model cities planning. The assistant director of the model cities program is a member of the council of community services' committee on aging and serves as a direct link between the two. Other links were established when the following persons were named to the model cities task force: executive director of the Tennessee Commission on Aging; program director of Senior Citizens, Inc.; and the staff specialist on aging of the council of community services. Additionally, the chairman of the council's committee on aging was appointed by the mayor to the citizens coordinating committee, and several senior citizens from the "target area" were elected to serve on this committee. Finally, the model cities office commissioned the council to do a survey of selected characteristics of the aging in the model cities area. This will be used as a basis for formulating future plans. Summing it up, model cities has provided an opportunity for increased representation of the aged in the community's planning and decisionmaking process, and improved future services should be the result.

## SHELTERED CARE FOR ELDERLY

A prime area for model cities attention and efforts is that of sheltered care for the elderly. The need for such a service has been attested to by welfare workers, health nurses, public housing personnel, hospital administrators, and a consultant from the national council on the aging. Nashville's aging who are not completely independent but who do not require the level of care provided by a hospital or nursing home often encounter severe problems in their living situations. Many such individuals either continue to face unusual hardships at home or end up in a total-care institution. Neither one of these alternatives is sound nor desirable, and a remedy for this situation has been proposed.

I would like to point out this is not the sole remedy, or the solution, but it is just one possibility.

Briefly, the plan entails the utilization of part of an existing public housing project in the model cities area for a sheltered care facility. Such a plan would have to include the Nashville housing authority for the facilities, the welfare department for some financing, and the health department for health services. Right now we envision the health department having an office in the project with possibly one nurse and several nurse's aides. Other services such as friendly visiting and meals on wheels could be financed through the Tennessee Commission on Aging or Model Cities funds. The model cities program with representatives from all of these agencies offers a golden opportunity for the development of such a service.

An increased opportunity for employment should also stem from the model cities program. Initial model cities planning indicates that there will be an expansion of health and welfare services. These services will require extra personnel, and a proportionate number of the new positions could be filled by senior citizens. Our experiences with older persons in the foster grandparent program and a special home health aide training program have convinced us that many older persons welcome the chance at employment, and they have proven that they are more than capable of assuming such responsibilities. This idea has been presented at the model cities task force on social services meeting, and it has been enthusiastically received.

Concluding, I have not attempted to outline all of the many ways in which this program would be helpful in meeting the needs of older persons in Nashville. Instead, I have pointed out several areas where it could accomplish a great deal, including the increased representation of older persons in the community's planning and decisionmaking processes, the increased opportunity for coordinated and comprehensive planning of social welfare services, and the increased opportunity for employment. In short, the model cities program can do much to enhance the quality of living of our older Americans.

Thank you.

Senator Moss. Thank you, Mr. Davenport, for a very fine statement. We appreciate it.

(The prepared statement of Mr. Davenport follows:)

PREPARED STATEMENT OF JOSEPH DAVENPORT III, STAFF SPECIALIST ON AGING, AT HEARING OF U.S. SENATE COMMITTEE ON AGING, ATLANTA, GA., DECEMBER 11, 1968

Mr. Chairman, I would like to discuss why I believe that the Model Cities Program would be helpful in meeting the pressing needs of older persons in Metropolitan Nashville-Davidson County. Existing programs and services are



meeting some needs, but a recent survey of the Nashville social welfare system by our Council of Community Services revealed some major gaps or deficiencies in our social welfare delivery system. The Community Survey pinpointed these gaps in a special Chapter on Aging, made possible by a project grant to the Council of Community Services through the Tennessee Commission on Aging under the Older Americans Act of 1965. While the Community Survey encompassed the entire county, and not just the Model Cities area, it is a safe assumption that the older persons within this particular area have the same problems in greater measure than the overall aged population. This is indicated in the *1967 Residential Survey of Poverty in the Inner City* which showed that persons in the OEO "target areas" had greater incidence of social problems than did the general population. (The OEO and Model Cities "target areas" are not exactly the same, but there is considerable overlapping.)

It appears that the Model Cities program is ideally suited for the coordinated and comprehensive planning required to "plug the gaps" in the delivery of services to the elderly. For too long, our social welfare delivery system has been characterized by fragmentation and lack of coordination. Agencies and organizations have operated largely independently. Model Cities offers the opportunity for joint planning and action by all levels and segments of the private and public sector.

There is also the opportunity for increased representation of the aging in the planning and decision-making processes. There has been a tendency for the aging to be under-represented and overlooked; hence they have not received their fair share of social welfare services. Examples of this are easy to find in Nashville. Several agencies offer foster home care to children, but the only such service for senior citizens is to patients of Central State Psychiatric Hospital. There is a protective services program for children, but there is none for the older person. Indigent children can usually secure prescription glasses, but the indigent elderly are lucky if they receive glasses after a long wait. The list could go on and on; these are just a few blatant examples. I feel that one of the primary reasons for this situation is that the aged have not received adequate representation in the community's planning and decision-making processes, and I feel that Model Cities has the potential to alleviate this problem.

Reality does not always stem from potentiality, but the Nashville scene looks encouraging. Important steps have been taken which will insure that the interests of the aging are not overlooked in Model Cities planning. The Assistant Director of the Model Cities program is a member of the Council of Community Services' Committee on Aging and serves as a direct link between the two. Other links were established when the following persons were named to the Model Cities Task Force: Executive Director of the Tennessee Commission on Aging; Program Director of Senior Citizens, Inc.; and the staff specialist on aging of the Council of Community Services. Additionally, the chairman of the Council's Committee on Aging was appointed by the Mayor to the Citizens Coordinating Committee, and several senior citizens from the "target area" were elected to serve on this committee. Finally, the Model Cities office commissioned the Council to do a survey of selected characteristics of the aging in the Model Cities area. This will be used as a basis for formulating future plans. Summing it up, Model Cities has provided an opportunity for increased representation of the aged in the community's planning and decision-making process, and improved future services should be the result.

A prime area for Model Cities attention and efforts is that of sheltered care for the elderly. The need for such a service has been attested to by welfare workers, health nurses, public housing personnel, hospital administrators, and a consultant from the National Council on the Aging. Nashville's aging who are not completely independent but who do not require the level of care provided by a hospital or nursing home often encounter severe problems in their living situations. Many such individuals either continue to face unusual hardships at home or end up in a total-care institution. Neither one of these alternatives is sound nor desirable, and a remedy for this situation has been proposed. Briefly, the plan entails the utilization of part of an existing public housing project in the Model Cities area for a sheltered care facility. Such a plan would have to include the Nashville Housing Authority for the facilities, the welfare department for some financing, and the health department for health services. Other services such as friendly visiting and meals on wheels could be financed through the Tennessee Commission on Aging or Model Cities funds. The Model Cities program with representatives from all of these agencies offers a golden opportunity for the development of such a service.

An increased opportunity for employment should also stem from the Model Cities program. Initial Model Cities planning indicates that there will be an

expansion of health and welfare services. These services will require extra personnel, and a proportionate number of the new positions could be filled by senior citizens. Our experiences with older persons in the Foster Grandparent Program and a special Home Health Aide training program have convinced us that many older persons welcome the chance at employment, and they have proven that they are more than capable of assuming such responsibilities. This idea has been presented at the Model Cities Task Force on Social Services meeting, and it has been enthusiastically received.

Concluding, I have not attempted to outline all of the many ways in which this program would be helpful in meeting the needs of older persons in Nashville. Instead, I have pointed out several areas where it could accomplish a great deal, including the increased representation of older persons in the community's planning and decision-making processes, the increased opportunity for coordinated and comprehensive planning of social welfare services, and the increased opportunity for employment. In short, the Model Cities program can do much to enhance the quality of living of our older Americans.

Mr. NICHOLSON. Our next presentation will be by Mrs. Clarence Johnson, administrative coordinator, Gainesville-Hall County Economic Opportunity Organization, Gainesville, Ga.

**STATEMENT OF MRS. CLARENCE A. JOHNSON, ADMINISTRATIVE  
COORDINATOR, GAINESVILLE-HALL COUNTY ECONOMIC OPPORTU-  
NITY ORGANIZATION**

Mrs. JOHNSON. Thank you, Senator Moss, thank you for coming to Atlanta, and for expressing your concern for the problems of the elderly. If we had more leadership like this, it would renew our determination to continue our fight in their behalf. We appreciate it.

As a matter of semantics, when asked to reply to the question on the "Usefulness of the Model Cities Program to the Elderly," let me say if it is implemented as intended, it will be the greatest thing that ever happened since the discovery of motherhood, or ice cream on Sunday. But if not, it will be shelved as most of the statistics have been in many Federal programs, and we will wind up not telling it as it is.

There are problems on which we are not touching the surface. The elderly are beginning to communicate with us, and only when they do will we become effective.

As a matter of location for you, Gainesville is an urban county—unlike the crowded cities. We are crowded, but not like the city of Atlanta. We are located 50 miles north in the foothills of the Blue Ridge. We have a population of 19,000, in Gainesville; 7,600 people live within the boundaries of the designated model cities area—43 percent of our population; 600 elderly citizens in the area rely on welfare, social security, or other supplementary income; 50 percent have no income; 63 percent of the housing is below standard; far below. Ninety-five percent of the people in the model cities area have outside toilets. Something maybe you can't visualize in your town. Twenty-three houses have no toilets at all.

So you have asked me what the usefulness of the model cities program is to the elderly: So far the situation has remained the same as before. We are still pointing out the needs, as we have done continuously, from time to time, in many conferences, yet we have not scratched the surface on implementation. I hope that your committee will enable us to scratch the surface on implementing.

In Gainesville, OEO preceded model cities by 2 years, and the desperate needs of the elderly were pointed out at that time as we

surveyed the target areas. The citizens placed priority on their needs then and 2 years later the same statistics, only greater numbers, were verified by the model cities two-thirds draft which was submitted this past week. The needs are still there.

During those 2 years one program, was funded by the Office of Economic Opportunity. This was called JOY; just older youth. This was accomplished with a small amount of money, only because we had saved it from other OEO programs, the obstacles that I encountered to get that, you will never know. But we did it. And it was at no additional cost that we implemented the grandparents clubs and part-time aides in day care centers, utilizing the older people. We provided recreational facilities for them to acquire a hobby which they were not accustomed to when they grew up, but this is not the total answer.

A facility does not cure loneliness. They need people around, and they need to believe their usefulness. This is what we hope we have been able, in some small way, to provide.

However, every time you seek a new program, you attend another conference and you hear more about what is available. It really isn't there when you start to look for it. If we realized how many problems we encounter in looking for these programs, we would probably stop compiling statistics, and start implementing programs for the poor. Target-area residents in the model city area have placed immediate priority on aid for the forgotten elderly. Periodically we are encouraged only to find there is another brick wall of financial aid thrown in the way of progress.

#### HEALTH AIDES AND PREPARED MEALS

Applications such as you have heard about today, the HAM project, in Gainesville—home health aides and meals on wheels for the elderly—must be implemented. This is health aids and prepared meals for the elderly—those who are confined or in need of emergency aid. This program was submitted to OEO, only to be told, "We do not have the money. You are limited on your level of funding." And then, again, we sent it to title IV of the Older Americans Act, through the Administration on Aging, but the project was denied because it was "not innovative." Have you ever tried to get an innovative program through Washington? If they don't know where to put it in the four corners of the box, it is shelved. So therefore it is shelved, and you have to come out fighting again.

We have yet to reach the bureaucrat who is not afraid to be innovative. Under title III we have resubmitted the plan but we have not penetrated that. We are waiting to find the way, but we are not going to wait too long.

Fifty of the elderly people in Gainesville, in the model cities area, are bedridden and live in rat-infested homes. Some lay in their human waste as long as a week, until somebody comes in to bring them food. I think that establishes a definite need. Twenty-seven are in critical need, and if we don't hurry we are going to be funding either supplementary funds for funerals, or for funeral homes. Several double amputees are on our hands. An excessive number of the elderly are in desperate need of dentures, and eyeglasses.

In this area there is no transportation, no big supermarket, and some residents can't even get to the hospital unless we take them. They cannot afford hospital nor convalescent home care. These people are on welfare, and I might add that many times their small social security check, or other check, is taken by other members of the family and spent on liquor. It might help the person taking it, but not the person needing it.

Have you ever tried to get a Negro person in a convalescent home? The convalescent homes are filled to capacity, and if they weren't, I doubt the chances of getting a Negro in.

The elderly are neglected, and being helpless and bedridden, they cannot cope with the situation.

#### MODEL CITIES "THE ONLY HOPE"

So to return to the question: "The usefulness of the model cities program?" Senator, at this stage in the game I would say it is our only hope, if we are going to meet the present needs of the elderly. Through the coordinated efforts of 27 agencies concerned with the elimination of poverty in the area, Gainesville will be awarded a concentrated employment program, in which we include Operation Mainstream for the Elderly. The other day we had a brainstorm that the people at the JOY Center, who are able, could prepare the food for the recipients of the CEP during training. This will give them added income and fulfill their need to be useful. Concerning Mr. Alexander's remarks earlier, if you and your committee are concerned—which I am confident that you are—at this late hour of the day, if you are concerned to the point of action, I think you could best serve all of us who serve model cities, and the intent for which we are working so hard, if at the Federal level, you could find a way to spearhead legislation to equalize the public housing policy for setting rents. We are defeated if someone doesn't take hold and admit the weaknesses of public housing, because all the other programs that we have going for the poor are defeated when their rent is skyrocketed, or if they go into the hospital and their welfare assistance is upped, and the rent is upped likewise. This destroys their incentive to do better.

We are defeated unless the Federal agencies are concerned, and not just with ideas, but implementation. We must look to the priority interests, and to implementing programs worthy of a model cities grant.

So, our challenge is to go back and instigate legislation which will enable us to fight for the rights of the elderly. Headstart has been a tremendous success—now is the time for us to devote our efforts to a late start.

Senator Moss. Thank you, Mrs. Johnson, for a very eloquent and moving statement. If we needed any convincing, you certainly would convince us of the need and I recognize one of our great problems that we have had, and we still face, is this problem of funding to implement what we are trying to accomplish, and now as we are talking about the planning phase, we are also bordering right on putting it into effect, and this is where there is going to be a battle yet to be waged.

Mrs. JOHNSON. I think, if I might take one moment: In the battling, if the agencies can begin to actually work together as if it were their total responsibility and not to be concerned about their position—like

the rent, for instance—if this can be erased, we don't need so many Federal dollars. We will get there because funds will all be in the melting pot concern. This is what we need, more than we need money.

I would like to ask if I may submit a written statement.

Senator Moss. You may, indeed. We would be very pleased to have a full, written statement. You may amplify as fully as you care to do. Thank you, Mrs. Johnson.

(The prepared statement of Mrs. Johnson follows.)

PREPARED STATEMENT OF MRS. CLARENCE A. JOHNSON, ADMINISTRATIVE COORDINATOR, GAINESVILLE-HALL COUNTY ECONOMIC OPPORTUNITY ORGANIZATION, INC., GAINESVILLE, GA.

Senator Moss, Chairman Oriol and other members of the subcommittee, thank you for coming to Georgia and for being concerned about the problems of the elderly. Your concern has strengthened our determination to continue the fight in their behalf.

In response to your question on the "Usefulness of the Model Cities Program to the Elderly", may I say that Model Cities, when and if implemented as intended, will be the greatest discovery since motherhood and ice cream on Sunday. If it is *not* implemented, it will be just another Federal Program which performed a beautiful job of gathering statistics and shelving ideas—ideas brought about by the people who reside in the target areas and coordinated by existing social welfare agencies.

As a matter of descriptive semantics, Gainesville, Georgia, population 19,000, is located in the center of Hall County, population of 65,000. It could be classed as a rural setting at the foot of the Blue Ridge. Gainesville serves as a regional trade and industrial center for all of Northeast Georgia.

Seventy-six hundred (7600) persons live within the boundaries of the designated Model Cities Area—this represents 43% of the city's population. Six hundred (600) elderly citizens in the Model Cities area rely on welfare, social security, or other supplementary income. Fifty (50%) percent have *no* income. Sixty-three (63%) percent of the housing is *below* sub-standard. Ninety-five (95%) percent of the people in Model Cities use outdoor toilets—twenty-three (23) houses have *no* toilets.

You have inquired about the Usefulness of the Model Cities Program to the Elderly—*so far* the situation has remained the same, Senator. We are still pointing out the needs of the elderly—we are yet to scratch the surface on implementation.

In Gainesville' the Office of Economic Opportunity preceded Model Cities by two years. The desperate needs of the elderly were pointed out at that time as we surveyed the target areas. The citizens placed priority on their needs then and two years later the same statistics, only greater numbers, were verified by the Model Cities two-thirds draft which was submitted this past week. The needs are *still* there.

During those two years, a program was funded by OEO—named the JOY Program which stands for Just Older Youth. This was possible *only* because a small amount of funds had been reprogrammed from other local OEO programs to attempt to meet a portion of the need. At no additional cost, grandparents clubs were formed to work with the children in the OEO operated Day Care Centers. The elderly were employed as part-time aides. Recreational facilities were provided in the local Housing Authority Community Center in a cooperative effort to add a little enjoyment to their sunset years. However, facilities are not the only answer—loneliness is a degrading factor and must be considered. We must remember these elderly people had no hobbies during their growing-up time so this is a new field and great effort must be extended in the area of communication.

Although this was a beginning, it was meager and did not begin to reach the medical needs of the elderly.

Professionals have attended conference after conference only to hear, again and again, the NEEDS of the poor elderly explored. *Now* we must begin to implement programs geared to the needs of the elderly instead of attending more conferences to TALK about their needs. Target area residents in the Model City have placed immediate priority on aid for the forgotten elderly. Periodically, we are encouraged only to find another brick wall of financial aid thrown in the way of progress. We are challenged to involve the citizens. When this is done and application for

assistance is made and many times rejected, the citizens lose faith and the desire to regroup and hit 'em again. Perhaps it would be better *not* to involve them again until there is some minute assurance that there *is* a chance.

Locally, a Project called Ham, (Home Health Aides and Meals for the Elderly) was submitted to OEO. Statistics on large sums of money being available for the aged are extremely misleading because OEO Washington nor Regional are cognizant of availability of funds, and if they were, the level of funding for local CAP agencies is frozen which immediately denies additional programs. Resubmitted under Title IV of the Older American's Act, through the Administration On Aging, the project was denied because it was "not innovative". Innovation is the national cry, however, I am yet to see a truly innovative program funded by the Federal Bureaucracy. Senator, if a program gets to Washington and it *is* innovative, it frightens the bureaucracy because there is no four-sided box to place it in for funding. Therefore, it is usually shelved and the needs of the elderly are again overlooked. This same project has again been submitted under Title III of the Older American's Act through the Georgia Commission On Aging and is presently under review—so far we are yet to penetrate *the* agency which is determined to "find a way". But, gentlemen, we must find a way, which I intend to do.

Fifty (50) elderly people within the Model Cities area are bedridden and live in rat infested homes. Some lay in their own waste until someone happens to help or comfort them. Twenty-seven (27) are in critical need—several double amputees. Excessive numbers of the elderly are in desperate need of glasses and artificial teeth.

#### NO PUBLIC TRANSPORTATION

Adding to the existing problems, there is no public transportation service in the Model Cities area and residents experience difficulty in getting to the clinic or hospital. They cannot afford hospital care—nor convalescent home care. Most rely on welfare or social security and even if they were admitted on a charity basis, the state vendor payment is \$75 less than the lowest charging convalescent home. Rest homes are filled to capacity and if they weren't what chance would an elderly *poor* person have for entrance—particularly a black poor person? They are left at home—where many times their small welfare check is taken by some member of the family and spent on indulgences of liquor. If the elderly person is helpless and bedridden they cannot cope with the situation. Environmental behaviors of these residents must be changed—perhaps through our concern.

So, we return to the question—"The Usefulness of the Model Cities Program?" Senator, at this stage in the game, Model Cities is apparently the *only* hope we have of meeting the pressing needs of the elderly. Through the coordinated efforts of twenty-seven (27) agencies concerned with the elimination of poverty, Gainesville will be awarded a Concentrated Employment Program (in which the component of Mainstream has been included). This will provide employment and supportive services for the elderly. The elderly in the JOY Center will be employed to prepare food daily for the CEP recipients while they are in training. Older people will be employed in the Day Care Center operated in conjunction with CEP. In Gainesville, we *are* concerned and are trying very hard to do something about it.

Confirming Mr. Alexander's remarks, made earlier, Senator, if you and your committee are concerned to the point of action—you could best serve by spearheading legislation to equalize the Public Housing Policy for setting rents. Other assistance programs are defeated because Public Housing immediately raises the rent when a person begins to better himself. May I suggest some legislation be enacted to grant target area people a period of one year to better themselves, through our help, before they are evaluated and their rent raised beyond their reach.

We will remain defeated if there is no assistance at YOUR level. We are defeated if the many federal agencies are concerned only with written ideals. We must erase vested interests and begin to "tell it like it really is", if we are to implement the intent of the Model Cities Program.

Senator, and members of the committee, I challenge you to pave the way to instigate legislation which will enable us to help the elderly poor. Head Start has been a tremendous success—now is the time for us to devote our efforts to a LATE START!

Mr. NICHOLSON. Jesse J. Fuller will make the next statement. His position is project director, Hillsborough County Citizens Advisory Council on Aging, Tampa, Fla.

Senator Moss: Mr. Fuller, we will be glad to hear from you, sir.

STATEMENT OF JESSE J. FULLER, PROJECT DIRECTOR, HILLSBOROUGH COUNTY CITIZENS ADVISORY COUNCIL ON AGING, TAMPA, FLA.

Mr. FULLER. Thank you, Frank. Mr. Chairman, essentially, you know, after all this testimony, that I am much enlightened, and I feel rather well about the whole situation, because I know now that we don't have all of the problems of the elderly in Tampa, Fla.

I don't want to be repetitious in my testimony, Mr. Chairman, but of the 45,000 senior citizens in Hillsborough County, the largest percentage being within the city limits of Tampa, there are 3,658 over 65 years of age living in the designated model cities area.

Within this structure there are 819 Old Age Assistance recipients, which is 2.4 times as many per 1,000 population as there are in the other areas of the city.

The social security benefits average \$6.50 less per month per benefit within this area.

Since Florida has succeeded to the greatest percentage population of the seniors over 65, it would seem to me that this area presents a rather interesting and challenging study for us to lend support to the elderly within the area.

The interim report of the model cities program for Tampa was submitted November 18, 1968 and the 5-year projection forecast will be submitted before January 1, 1969. The estimated implementation date is April 1, 1969.

With this status of the present situation, and in order that I answer the question as to the usefulness of this program to the elderly, I would like to discuss the approaches suggested by the various subcommittees, and I feel this will afford you an insight to the problems presented to the demonstration agency as they pertain to the elderly within the area.

I was fortunate, or not fortunate as it may be, to be chairman of the social services committee, and was in touch with the rest of the model cities committees' reports, and we are glad to see they are doing something about the elderly in the problem areas.

In the area of health it has been proposed that a complete health facility be constructed to afford clinical diagnostic and outpatient health maintenance, family oriented, and easily accessible to older people. Primarily, these objectives are desirable for our limited ambulatory people. Additionally, a research project to ascertain costs and develop a prepaid health insurance program. The health facility would provide intensive care to the medically indigent. Further, a psychiatric social service, providing group therapy and therapeutic listening, as well as individual counseling in this area, and I have certainly found out that listening can be therapeutic since I have been working with these people.

Within the area of social services facilities would be provided for a community workshop encompassing human relation programs, home management, financial management, nutritional training to include a "meals on wheels" program.

In the area of employment it was suggested a senior service corps could be utilized to assist in providing some of the services required, as well as permitting those able and eligible older people an opportunity to augment their limited income.

## "PRIDE" AND HOUSING

In the area of housing a more intensive approach to project "pride" or financial assistance to refurbish individual homes, which are now dilapidated. A housing counseling service to secure adequate housing for those individuals who for one reason or another have to relocate their homes; and then we need adequate tax relief for those participating in project "pride" so that when they do fix up their dilapidated home, the tax assessor would not come along and tax him for the improvements, and therefore sliding him back into the position he just left.

In the area of education, adult education should be expanded to provide programs that are of interest to the elderly. With the possibility of educational TV to assist those who are nonambulatory, or who lack adequate transportation to go to the facilities. Additionally, recreation and cultural programs must be active and effective, as well as expansion of the legal aid programs where legal assistance is beyond the reach of the financial means of older people on fixed retirements.

With the implementation of these new programs in the model cities area, and a comprehensive effort to improve the physical environment it must be said that as it concerns the elderly we would approach what could be considered truly a "model city," where the needs of our older people can most certainly be met.

In conclusion, the development of these programs are dependent upon the financial and already existing aid programs, and cannot be easily met unless a liberal interpretation and broadening of the scope of their horizons, as well as the A.O.A. title III programs we have now in operation, and to work with existing agencies in a unified and cooperative effort.

Some of the problem areas in securing the finances in the area I mention will manifest themselves as we proceed with the implementation phase. It is hoped with your support and sanction of these objectives that these model cities projects can be implemented.

Now I have presented to you those programs which I feel should be developed. However, I would not want any of these programs, or certainly all of them, to be developed within the model cities area alone, and that if we have to do this financially at the expense of the adjacent areas, or at the expense of other people who need these services equally as bad, then I would not be in favor of their development at this time.

Senator Moss. Thank you.

Mrs. Helen Brawley, project director, Comprehensive Planning and Services for the Aging, Carolina Community Actions, Rock Hill, S.C., is recognized for a presentation.

### **STATEMENT OF MRS. HELEN BRAWLEY, PROJECT DIRECTOR, COMPREHENSIVE PLANNING AND SERVICES FOR THE AGING, CAROLINA COMMUNITY ACTIONS, ROCK HILL, S.C.**

Mrs. BRAWLEY. Senator Moss, committee members, in the city of Rock Hill, as all across the country, the aged have problems which cannot be ignored. In a society that is doing all that it can to insure that we live to a ripe old age, it seems incongruous that, having succeeded, we leave the elderly in a state of mental and physical deprivation. We have the standard Federal benefits—social security, medicare,



medicaid, welfare, et cetera—and since it is generally recognized that they fall short of the needs, I will not belabor the point. I will say, however, that in our town the average minimum expenditures of the aged for food, rent, transportation, medical expenses, and supportive health aids total some \$2,000 more per couple per year than their available benefits. This says nothing of their psychological needs.

Before I begin to discuss the role of the aged in the model cities program, I must point out that Rock Hill is still in the preplanning stage and all I can reflect in my statements today is the intent of the initial program development by the planning personnel. The local CAP agency has a full-time human resources planner who divides his time equally between the model cities and Carolina Community Actions, Inc. staff members. The planning does not presuppose the ratification by the model cities commission. Also, until more adequate statistics can be gathered and evaluated, the model cities commission cannot establish its actual goals and priorities. Until that time, however, we can assume certain general commitments that are inherent in the model city concept.

One of these is coordination of existing services and community resources, another, representation of the target area residents at all levels, and finally the simultaneous impacting of all programs in the target area.

Let's consider the actual effect on the aged by categories, the first being administrative. Since 39 percent of the aged live within the target area, they will be directly represented by the citizen participation groups. Another 40 percent live in areas contiguous to the target area and will be indirectly represented. Also, as part of the coordination of services, a task force of representatives of the aged will be invited to serve as a policy level advisory committee to the model cities commission. This will encourage agencies to focus their planning and services on the needs of the elderly.

### HOUSING

Since the model city program is so closely tied to housing and urban development, the coordination in this area has been greatly simplified. In fact our local housing authority has offered full cooperation, not only with existing programs, but in meeting future needs of the model city program. They are presently in the process of constructing 50 units of public housing specifically designed for the low-income aging. These units will be supported by a community facilities building in the adjoining park. Another community facilities building and a civic center are planned for the model cities area, both offering contact points for all agencies serving the aged. One wing of the civic center building is being specifically designed for senior citizens. It consists of a large club room, supported by a kitchenette, and will offer office space for administrative support, counseling, and for related programs.

### TRANSPORTATION

There is virtually no public transportation system in Rock Hill. Studies are underway to determine the feasibility of involving local business, which is tending to cluster in shopping centers, to provide

- customer transportation. Early coordination can assure that these routes and perhaps the vehicles used are programed with the needs of the aged in mind.

A major factor that will help alleviate the transportation problem of the aged in and near the model city target area is the decentralization of services that will be offered through community centers. These centers, which are being organized by church groups, Carolina Community Actions, Inc., the city recreation department, will be equally divided among the seven subareas of the target area. They will normally be equipped to provide recreation and meeting areas, information and referral services and craft shops. They will be staffed to acquaint the elderly with existing assistance programs, and to serve as a focal point for other agencies to disseminate their services. It should be noted that these centers will serve head start classes and therefore by necessity have the capability to serve low-cost hot lunches for the older people.

#### EMPLOYMENT

We must face the fact that the aged are not on the most wanted list at the local employment office. Through the neighborhood center referral service they will be able to find more specialized employment information. Even more important, there is a tremendous need for personnel to work in the centers and with the youth that utilize them. Perhaps in return for services rendered the elderly could receive some sort of in-kind payment; for example, ladies would teach sewing in return for material for their own clothing. The important side effect would be that feeling of being needed and of doing something worthwhile.

#### HEALTH

Under the system of coordination among local health agencies which are represented on the policy advisory committee to our model cities program, the needs of the aged can be at least interjected into the dialog; for example, money to pay for hearing aids, false teeth, and artificial limbs. The neighborhood center, again, could serve as a setting for varied physical and mental health counseling. Our area mental health center director has already expressed willingness to cooperate with this type of program.

#### EDUCATION

Educational programs for older people under consideration are: Adult and technical education classes; preretirement training programs offered by employers; refresher courses; tutorial programs for and conducted by the elderly; consumer education programs and home makers classes for, and taught by, the elderly. These programs will be coordinated through local school districts, colleges, and the technical education center.

#### RECREATION

The local recreation department has begun plans to have a comprehensive program for all ages in each of the seven model cities areas. Three programs are already approved for funding. One of these will be contiguous to the housing authorities' 50 units for the aged, the others will be centrally located for easy access.

There are many other problems that the aged and the poor share which the model city plans hope to attack. High among them are the need for legal aid and consumer protection. There is a Carolina Community Actions, Inc. legal aid project proposal in Washington at this moment, waiting to be funded.

I have presented a general picture according to our organizational breakdown, not necessarily in order of priority. I feel that model cities can be a great vehicle to coordinate programs and services for the elderly; but, we must face the fact that without the support of other agencies, at both the local and national level, then "comprehensive planning" and "coordination" are just words. And I would like to add, let's hurry; because we are talking about you and me, and all the rest of our lives.

Senator Moss. That's so true, Mrs. Brawley. Your statement is a very good one. It underlines the urgency there is to move on beyond the planning stage, to the implementation stage, which I certainly hope we can do.

Mrs. BRAWLEY. Senator Moss, perhaps you can tell me. Why are hearing aids so costly?

Senator Moss. I don't know if I can answer your question, Mrs. Brawley. I wish we could find out for you, because—

Mrs. BRAWLEY. I'm very serious about that question. I have not been able to give old people an answer when the question arises.

Senator Moss. Well, I can't imagine. I would think, with the number that we now produce, that we ought to be able, with our ingenuity, to get a reasonable cost on a hearing aid.

Mr. Nicholson is going to make a bit of a summary, and then we have a question or two.

Mr. NICHOLSON. Senator Moss, I would like to thank the members of this panel for having come from out of town to be with us today. There are, in their own local communities, as you see, advocates for older people. We have similar organizations in many of these model cities. Many of them which are speaking up on behalf of the older people.

I think that as one sits at a hearing like this today and listens to the witnesses, it would be hard to go away from this meeting and say that the model cities program could not be useful in helping older people. It certainly can.

We know that there are many complexities in coordinating the various programs and resources in the model city at the local, State, and regional level; between and among these various levels; but I would like to make the point that regardless of how effective this coordination of efforts might be, that it will all be meaningless for older people if the model cities agencies themselves do not give some priority consideration to the needs of older people in their planning and allocation of resources.

I think a very basic and fundamental question is the attitude that the cities have toward our elderly people. I think if it is good, this will be shown in the recommendations that will be forthcoming from these model cities agencies.

We have heard testimony here today about the expression of needs, the problems and concerns, and it hasn't always been in the vein of more services for older people at all. The thought has been expressed

on several occasions about the necessity of providing older people opportunities to serve others, to serve their community. This, too, provides a meaning to their life, and I think we should remember this as well.

I think, really, in the final analysis, that our agencies at the local level, which are serving as advocates for older people, can continue to express their concerns; to make suggestions; and whatever; but in the final analysis the decision will rest with the model cities agency, because their task forces are responsible for identifying these problems, for the coordination of the various and sundry programs, resources, and for setting the priorities.

I have faith and confidence that they will come through for us, and I think that they can; the model cities program can make a very substantial contribution to the older people. Thank you.

(The chairman, in a letter written shortly after the hearing, addressed several questions to the witness, questions and replies follow:)

1. You state that "recent reemphasis by HUD that the States become increasingly active in the Model Cities Program should improve coordination." To what directives or instructions from HUD do you refer?

Mr. Earl Metzger, Assistant Regional Administrator for Model Cities, DHUD, Region III, provided the attached memorandums, papers, letters, and statements relating to State participation in the Model Cities Program.

2. Please elaborate on your statement that limited regional staff and travel budgets in Aging Services severely restrict your ability to respond adequately as regards the Model Cities Program.

We presently have three professional staff and one secretary in Aging Services, SRS, Region IV. We know from participating in the review of the Model Cities planning grant proposals that the review process does require much time and effort. The action recommendations from the Model Cities are now beginning to come forth. It is difficult to estimate how much time of Aging Services staff will be requested and required to work with State Agencies on Aging and local communities in providing consultation and assistance in preparing grant applications. If the needs of the Model City communities can be programmed into our regular travel plans, we would not anticipate any real problems in providing technical assistance. In SRS we have been able to economize in staff time and travel funds as related to the Model Cities Program to date through a coordinated utilization of our SRS Assistant Regional Commissioners who have served as generalists for all SRS related units. As we move toward specifics, if it is anticipated that Aging Services will work directly with the Model Cities Programs. As this work progresses, any substantial or significant increase in demands on staff time and travel funds for the Model Cities Program will pose difficulties.

3. You state that "categorical funding as provided for in current legislation is not compatible with comprehensive planning." Please furnish details and examples.

The Model Cities Program is intended to provide for a comprehensive attack on all the deep-rooted social and environmental problems of a neighborhood in the selected cities through a concentrated and coordination of Federal, State and local public and private efforts. The emphasis is on local community planning in overcoming the fragmentation of effort and in developing new and innovative approaches to long-standing problems in our cities.

The coordination of the many Federal and State programs and agencies related to the Model Cities Program is a complex task. My reference to categorical funding being incompatible with comprehensive planning was related to numerous Federal programs now in existence which provides Federal funds for rather specific kinds of assistance, services, and/or facilities. This I define as program oriented or categorical funding. As a practical matter, such programs, have statutory and administrative restrictions, limitations, procedures, time tables, priorities, etc., which do not in fact dovetail together in the solution of a common problem as may be identified by a community in a comprehensive plan. As an example, I understand there is considerable interest in many of the Model Cities Programs toward developing strong outreach services which would assist the Model City neighborhood residents to learn about and be referred to existing community services. This kind of effort can be presently financed under five or

six Federal categorical funding authorities. No one of these authorities could provide sufficient Federal funds for the scope of activity required for a given Model City. The difficulty is increased in procuring sufficient funds for a total outreach approval. It is unlikely that the fragmentation of effort will be minimized as we continue the categorical funding approach unless a simplification in procedures and funding methods is accomplished. To the contrary, it is my impression that the fragmentation of effort is apt to be intensified initially as the Model Cities seek assistance from existing grant-in-aid programs according to the existing regulations, standards, and priorities of these programs. To this end, these initial efforts will not be problem centered but program centered, which is the traditional approach.

In my opinion, the real innovations which are most likely to occur may be brought about with the use of the special grants to supplement existing grant-in-aid programs as provided for in the Demonstration Cities and Metropolitan Development Act of 1966. This type of funding provides for more flexibility and represents a community, problem centered funding approach which should result in new and imaginative program developments and a greater degree of unification of effort in the deliver of services.

I have no examples to give on Model Cities at this point as we are just beginning to move into the funding of programs following the initial year of planning. In the Pilot City Chattanooga Neighborhood Services Program, however, I might note that of approximately 20 priorities established by the local community, only five could be funded by the Federal agencies because they did not meet the predetermined purposes and/or priorities and funding patterns of the Federal programs. And the five priorities funded by the Federal agencies were not the top priorities established by the community.

*4. You seem to suggest that the Model City task forces may not be giving adequate consideration to the unique problems of special groups, including the elderly. Please elaborate and include suggestions how this defect may be eliminated, especially as regards the elderly.*

In a review of the Program Achievement Standards as related to the various Model City task forces as set forth in "A Program Guide to Model Neighborhoods in Demonstration Cities" (HUD-PE-47, December 1967), one may note that the only mention made of utilizing special efforts to identify the disabled and dependent older persons, handicapped persons, etc., is under the section of income maintenance and social services. This should also be done in the areas of education, health, housing, transportation, etc. Whether or not the Model City task forces are giving adequate consideration to the unique problems of special groups, including the elderly, is something I do not know. My only point is that it is desirable to double check the plan against the need of special interest groups to assure that any unique needs they might have are built into the service system. I would think a special communication to the City Demonstration Agencies on this point from the appropriate Federal authorities would bring about the initial consideration which is required. Special follow-up efforts might then be made.

*5. How would you propose to implement your suggestion to have a high level of citizen participation, including the elderly, on the task force in order to bring about "real innovation and new approaches to old problems"?*

In the "Program Guide to Model Neighborhoods in Demonstration Cities" HUD did not determine or establish the ideal organizational pattern to accomplish the objective of citizen participation. This determination is left to each of the Model Cities. I would not wish to impose my suggestions on any of them. It would seem to me, however, that each of the Model Cities should be advised of the various ways of involving citizens and agency representatives in their planning and the possible implications and consequences related thereto. My comments, based on experience, were prompted as a note of caution. Committee structures having both lay and agency representatives, who are usually paid professional staff, invariably evolves into sessions which the paid professionals mostly attend and dominate. The skills, talents, and opinions of both groups are needed but in the proper relationship to one another in the planning process. My ideas as to what is "proper" were briefly referred to in my testimony. More time and effort is required to bring about and maintain an active citizen interest, including the elderly, in a planning effort than is true of agency representatives.

Senator Moss. Well, thank you, Mr. Nicholson, and thank all members of the panel. It certainly has been helpful to have you come and give us testimony about your own programs, and your own problems.

I wondered, is the model cities program an adequate vehicle to meet the problems on all sides of the communities, or does this complex application do much for big cities? Do you have any observation on that?

Mrs. JOHNSON. I would like to make an observation. On the Technical Review Committee, which states all social agencies concerned within the community should be represented. We all serve on it. Application can't pass without a review of the T.R.C. The people speak to us. We are their advocate. So the final decisions rest with the people as to what is placed in the model cities, and we are going to be there to be sure it is included. From a small town viewpoint I would answer you, sir. In a larger town it is much more difficult, but we hope, in Gainesville, by the coordinated effort that we will show you what a real model city is in the final analysis, when they are handing out the final awards. Sometimes we get lost in the heavy-populated city, and you can cover up your mistakes in a large city, but you cannot cover up your mistakes in a small town. You must live with your mistakes. So I think that a small town will actually be the basis of what you expect in a model city program. Coordination is brought about through head-bashing and crosswords many times but in the final analysis a greater understanding of what real coordination is, is achieved. Until you can mix moneys of the different agencies, you will never really know what coordination is. However, you will know what vested interests and misunderstandings are. We have done that in Gainesville, and we have had many fine sessions, and some not so fine, but we have come out better people for fighting for what we believe in.

Senator Moss. Any comments from the staff?

(No response.)

Senator Moss. Thank you all very much. It has been a good hearing. As John Guy Miller said earlier, I think this is one of the finest hearings we have had. You have come well prepared. You have spoken right up on what your experiences were, and what your recommendations were. We know what your apprehensions are. And we know a great deal more about the planning phase, now, in this part of the United States, and we are very grateful.

And most of all I want to compliment all of the people who have appeared, for their dedication to the general welfare of elderly citizens, but all of the people, in trying to help us find the way that we can implement a program that will be beneficial to our elder citizens and others, and I want to compliment this fine audience that we have had all day—had an overflow, carrying chairs in—and many of you have stayed through the full day, and it is now past 5 o'clock in the evening.

We are grateful for the use of this fine building here, and those that planned the site, and planned the testimony that came before us today. They have done a very fine job.

We understand we are sort of breaking this room in at this hearing site by our hearing today, and we are very glad to be in this fine, new facility.

I think it has been a very good day, and I am most happy that we came, and thank you all.

We are adjourned.

(Whereupon, at 5:10 p.m., the meeting was adjourned.)

## APPENDIX

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### ITEM 1: LETTER FROM MRS. ELSIE C. ALVIS,\* PRESIDENT, GEORGIA GERONTOLOGY SOCIETY, INC., ATLANTA, GA.

JANUARY 10, 1969.

DEAR SENATOR MOSS: In response to your letter of January 2nd, I am glad to explain, or further elaborate, on the two points which you have enumerated that were included in my testimony. In so doing, I shall give a few examples or instances rather than actual facts and figures.

1. Unlike many states, Georgia does not have a Council of State Agencies or comparable framework through which both large and small agencies may engage in cooperative planning, in an organized fashion, in areas of mutual concern. A relatively new agency, the State Planning Bureau, may eventually bring to light the gaps and overlaps in services that appear to exist, to result in better planning.

Some examples of "inadequate coordination or cooperative planning" relate to administrative and operational aspects of Medicare and Medicaid as State Departments of Health and Welfare have been involved. To a lesser degree, the same criticism could be applied to Mental Health in which the same two strong agencies and a voluntary organization, the Georgia Mental Health Association, are involved and sometimes appear to be competing for authority and recognition.

Not unique to Georgia is the chasm between public agencies and powerful medical associations on federal, state, and local levels which has often created confusion in the minds of older recipients of health services.

Other areas might include Departments of Education, Labor, and Vocational Rehabilitation where elements of training and employment appear to duplicate and overlap.

2. In using the statement, "Basic resources do exist in every city, town, or neighborhood", I have in mind such "basics" as: city and county tax resources; church organizations; public school systems; men and women's civic and service clubs (usually looking for service outlets); youth organizations; recreation departments; home economics clubs; public libraries; and many others. These resources vary, of course, in number and variety, but are to be found if brought to the attention of local planners—who often overlook or minimize their community assets.

\* \* \* \* \*

Sincerely,

Mrs. ELSIE C. ALVIS, *President Georgia Gerontology Society, Inc*

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### ITEM 2: LETTER FROM E. H. BROOKS, PROGRAM PLANNER AND DEVELOPER, ECONOMIC OPPORTUNITY ORGANIZATION, INC., GAINESVILLE, GA.

GAINESVILLE-HALL COUNTY  
ECONOMIC OPPORTUNITY ORGANIZATION, INC.,  
*Gainesville, Ga., December 2, 1968.*

DEAR MR. ORIOL: \* \* \* We have submitted under Title IV, to the Administration On Aging in Atlanta a project called HAM ("Home Health Aides and Mobile Meals"). The Administration On Aging rejected this project because Dr. Taves, Title IV Director, Older Americans Act, Washington, D.C. indicated that in his opinion, the proposal did not meet the criteria established for Title IV funds, i.e., innovation, uniqueness, Regional or National significance. However,

\* See statement, p. 469.

we have resubmitted the project to Georgia Commission On Aging under the Title III Program. We hope they will respond positively to the needs of the elderly in our community.

We know there is a need for this project as in the Model Cities survey it was pointed out that the Target Area possesses a high degree of needy aged persons.

For example, the heads of households sixty-five years and older, one hundred, fifty-three (153) or nearly 50% report *no income*, and over one-third showed weekly incomes of under \$40.00. There are five-hundred, fifty (550) elderly non-whites in the Model Neighborhood, many of which rely on welfare, social security, or other supplementary forms of income. With this form of subsistence payment, they cannot afford home nursing care or two nutritious meals a day. These people generally live alone and have to rely on friends and neighbors to feed, bathe, or tend house for them on an "at-will" basis. Statistics show that there are at least fifty (50) elderly persons in the Model Neighborhood who are completely bedridden or unable to care for themselves. The majority of the elderly live in hazardous and unsanitary conditions. Actual surveys of the elderly have pointed up twenty-seven (27) Senior Citizens in critical need of immediate attention, two of the twenty-seven are double amputees. There are times they lie in their own waste waiting for help. The combined total of substandard housing units in the Model Neighborhood is over 63%. Thus, many of the senior citizens needing sound nursing, home health aides, and nutritious meals are also living in substandard houses, adding to the acute health and emotional problems. We believe the problems of the elderly in the Model Neighborhood are sufficiently severe to warrant special attention.

It seems in all the seminars, meetings, workshops, etc., there is a great river of concern that flows constantly but when you try navigating it, you're lost in a "dead sea". As Captain of your ship, do you have a negotiable sea to suggest in which we might sail our needy craft.

I believe that you stated that you will be in Atlanta on December 11th. Our Administrative Coordinator, Mrs. Jeanne Johnson, who you met at the National Council Meeting, and I would like to meet with you either here as our guest or in Atlanta at your convenience.

Respectfully,

E. H. BROOKS,  
*Program Planner and Developer.*

ITEM 3: ADDITIONAL INFORMATION FROM JACKQUELINE COOK,\*  
COORDINATOR OF TRAINING AND JOB DEVELOPMENT, SENIOR  
CITIZEN SERVICES OF METROPOLITAN ATLANTA

WEST END CHILD DEVELOPMENT CENTER PROJECT

THE SENIOR CHILD CARE PROGRAM

A "Career Training Unit" is included in the total operations of the West End Child Development Center. This portion of the program is called the Senior Child Care Program and is under the direction of Senior Citizen Services of Metropolitan Atlanta. (In a sub-contracted arrangement with E.O.A.)

In this program older persons are recruited, trained, and placed on jobs in Day Care Centers.

The West End Child Development Center is a "demonstration center" utilizing thirteen older persons on its staff. As such, the center serves as the primary source for training, evaluation and promotion of this "employment program".

*Participants*

The first training class of the Senior Child Care Program was held from September 16 through October 11, 1968.

A second class began on October 28, and ended on November 22, 1968.

The students of the second class are now on field placement assignments. The "graduates of the first class are now employed in the West End Child Development Center. In these two classes, a total of thirty-three older persons have been trained. Seventeen of these are negro; sixteen are white. Three are men, twenty are women. Their ages range from 58 to 76. The educational background range is from the third grade to graduate work. Past experiences include: School teaching, library work, beauty shop operation, clerical experience, service in the WAC, domestic work, factory production, nursing, and homemaking.

\* See statement, p. 453:



Many have volunteered their time to programs such as Red Cross, Neighbor Centers, Church programs, fund raising drives, etc. All have had some experience in the care of children and exhibit an ability to contribute to a day care program.

#### *Evaluation*

A professional evaluation of the training conducted by the Community Council gives clear evidence that the training sessions are most effective in equipping these persons for their job. It also revealed (as did observation) that major changes took place in the attitudes of the trainees toward themselves, each other and the work they were to do. Out dated ideas of child development were set aside as these workers accepted the more contemporary view of their instructor who is herself a "Senior Citizen". Also there was a noticeable strengthening of race relation and an increased understanding of the problems of the disadvantaged. Perhaps the most significant changes occurred in the attitudes toward themselves. During the initial interview many expressed despair over their personal situation. They felt cut off from the mainstream of society and were overwhelmed with financial problems. (All of the participants have incomes of less than \$1,600.00. Some came into the program with no income at all).

During the time of the training there was a marked change in the physical appearance of the participants. Grooming took on new importance. Expressions changed. There was definite indication that mental and physical health improved.

The self confidence gained should enable them to cope more successfully with their individual problems. These participants have expressed renewed interest in their community. They are now more interested in utilizing and improving community resources. Life has taken on new meaning and value.

#### *Benefits to the children served*

In focusing on these outstanding benefits to the older person in this program it would be a mistake to overlook the values to the recipients of the service they render, the children.

In our mobile society few children have grandparents near by. They miss the sense of belonging and family ties. The Senior Child Care Workers bring something of this experience into day care to the children. Also the older person brings a maturity and keen sense of responsibility to the job.

The skills and abilities which they bring to day care programs significantly enrich the experience of the children served. The individual contributions vary according to abilities and past experiences. A retired teacher of special education is helping school age children with academic work. A skilled home maker is assisting with the house keeping while a worker with past nursing experience is conducting the morning health inspections. All of these roles are valuable in day care. The Senior Child Care Workers have made many contributions in the preparation and repair of materials. Their skills in sewing, their efficiency and resourcefulness are assets to the program.

Perhaps most valuable is their ability to relate on a warm and meaningful one to one basis to the individual child. Also they have the ability to acquaint children with the continuity of life.

The use of these older adults in day care centers provides children with an opportunity to grasp the movement of life and experience the warmth of relationship beyond their own sphere.

#### *Additional support*

It should be noted that Mrs. Louisa Handcock, the instructor for the class room training, is herself an older adult. Her excellent contribution cannot be minimized, and stands also as a significant example of the valuable resource of the older person.

The services of this instructor and the class room space are contributions made to this program by the Vocational Educational Division of the Atlanta Public Schools and the Adult Vocational Home Economics Division of the Georgia State Department of Education. These groups have pledged their continued support to this program and their willingness to cooperate in every way.

COMMUNITY SERVICE PROJECT—SENIOR CITIZEN SERVICES OF METROPOLITAN ATLANTA, INC.

#### PURPOSE

The purpose of this Project is to show the effectiveness with which older persons can be utilized as staff persons in day care centers and other community agencies whose programs are related to children. As the primary means of accom-

plishing this demonstration, a Child Development Center in the West End of Atlanta has been established.

The West End Child Development Center provides all levels of employment for older persons, with priority given to West End residents. It also serves as the major on-site facility where additional persons from all areas of Atlanta are trained for jobs in other day care centers, and for agencies requiring employees who have knowledge and skills relating to care of children. This Project is being directed by Senior Citizen Services of Metropolitan Atlanta, Inc., through funds from Economic Opportunity Atlanta, Inc. The Child Development Center is operated by the West End Day Care Association. The West End EOA Neighborhood Service Center is cooperating in the total operation of the Project.

#### EMPLOYMENT IN WEST END CHILD DEVELOPMENT CENTER

There are various types of positions for older persons within the West End Child Development Center. The primary demonstration positions are for *Senior Child Care Workers*, who must meet the following qualifications:

- (1) Have an interest in and ability to work with children
- (2) Have the ability to read, write, and speak correctly
- (3) Have personal warmth and some experience with children
- (4) Be in good physical and mental health
- (5) Hold specific skills or abilities which could be utilized to instruct children and enrich their day care experience, such as art, music, storytelling, handicrafts, cooking, sewing, carpentry, singing, nursing, teaching
- (6) Be 60 years of age or older
- (7) Have an income of less than \$1,600 per year (\$125 per month) for a single person or \$2,000 per year (\$160 per month) for a couple.

#### WORKING HOURS AND PAYMENT

The Senior Child Care Workers in the West End Child Development Center are employed on a 20 hour per week basis (four hours per day, five days per week) and receive the minimum wage of \$1.60 per hour. \$32.00 per week. Prior to actual employment in the Center, a training class was held. During this time trainees were paid a stipend of \$20.00 per week.

#### OTHER TRAINING OPPORTUNITIES

In addition to the persons trained for the West End Child Development Center, other persons *who meet the same qualifications as those stated for the Senior Child Care Workers*, are being trained for employment in other community agencies who provide service to children. These persons are receiving classroom and on-the-job training. The classroom portion of the training is conducted at the Adult Education Center of the Atlanta Public Schools. During this time, they are paid a weekly stipend of \$20.00. After the training period, every effort is being made to place them in employment with community agencies.

#### SELECTION

Each applicant is evaluated according to the requirements of the position and interviewed by staff members in the Community Service Project. Those who are selected are given a through physical examination.

#### TYPES OF DUTIES

The following are some of the duties to be undertaken by the *Senior Child Care Workers*.

- (1) Assisting the teacher with materials and equipment.
- (2) Instructing small groups of children in such things as music, sewing, woodcraft, etc.
- (3) Assisting with activities such as naps, meals, bathroom, and dressing.
- (4) Accompanying children on trips.
- (5) Helping children to feel comfortable in the community agency or their own homes.
- (6) Reading or telling stories to children.
- (7) Providing individual attention to children who are in need of this type of care.

The *Special Care Worker* is trained to care for a sick child in his own home.

ITEM 4: LETTER FROM HUGH GASTON,\* CHAIRMAN, GEORGIA  
COMMISSION ON AGING, ATLANTA, GA.

STATE COMMISSION ON AGING,  
Atlanta, Ga., January 14, 1969.

Hon. FRANK E. MOSS,  
Chairman, Subcommittee on Housing for the Elderly,  
U.S. Senate, Washington, D.C.

DEAR SENATOR MOSS: With reference to your request for further elaboration on ways in which the Georgia Commission on Aging is seeking to implement the concept of "providing opportunities for older persons to render service, as well as to receive services" we present the following:

The Georgia State Commission on Aging is dedicated to the belief that one of the major sources of dissatisfaction in reaching the latter years is the dissociation which all too frequently occurs, in which the older person is relegated, by choice or by the course of events, into a dependent status.

Studies of the aging population bear out the validity of this belief and indicate that the prospect of having to assume the dependent role is one of the major fears of persons reaching old age.

Dependency has many faces, but in our society the concept of "rugged individualism", which has been part of the heritage of this great nation, has made it particularly painful for these oldsters (the youngest of whom reached adulthood in the mid-twenty's—and the oldest of whom reached adulthood at the turn of the century) to "take" without "giving" in return. Helping out your neighbors has been assigned a particularly high value in the scale of human endeavor during the lifetime of these persons.

Thus, the importance of providing means for older persons to continue to serve in a neighborly fashion becomes quite evident.

In Georgia, we are giving equal priority to implementing ways in which our older population can render services as well as receive the services which are so desperately needed.

We are moving in the direction of establishing a system of "organized neighborliness" to make this possible.

One illustration is the organization of a pilot project within the Atlanta School System, through which older persons will be utilized as classroom aides to provide individual attention and extra personalization needed to bring underachievers to a greater capacity of accomplishment. We hold that there is a wealth of experience in the retired population which needs to be tapped for the benefit of both children and for the "giver" of services. Older people have the time and patience so necessary to bring this special attention to youngsters. They have the ability—and we know that there are great numbers who have the interest.

Another example—in Athens, Georgia, where a nine-county surrounding area is comprised of a high percentage of poverty—amplified in the older population, here, as elsewhere—older persons are being trained and utilized as case-finders, case-helpers, and problem-solvers, to reach out into the surrounding area, locate those who are in such desperate straits that they do not know which way to turn in seeking help, and bring them in to the facilities where the services can be received.

A project of the University of Georgia's Council on Gerontology seeks to hit another level of the population—the less deprived financially but whose loss of status through their withdrawal from the world of rendering service (retired professionals and business executives) has a devastating effect on their self-esteem. The University of Georgia, under a Title III Grant, Administration on Aging funds, has conducted a series of conferences designed to explore ways in which these persons can assume a real service role in their retirement. The conferences have resulted in many-faceted ideas—in Cleveland, Georgia, an organization of retired businessmen now includes retired farmers, retired housewives, etc., all of whom volunteer time on a scheduled basis to work with their town in a variety of ways—promoting it as a retirement center, providing recreation opportunities, and lending leadership to the town as changing needs indicate.

The examples are endless. The concept pervades all activities of the Commission on Aging and, in its advocate role, the Commission works to see that this facet of planning is included each time a plan is drafted for rendering services to older persons—be it housing, education, recreation, religion, social services, whatever. We believe the spirit of the concept is basic to successful planning wherever services are contemplated.

We are committed to it.

\*See statement, p. 464.

We thank you, again, for the privilege of presenting our thinking to your Committee and, indeed, continue to pledge our support to your work in every way. If we may offer additional thinking along these lines, please be assured of our continuing cooperation.

Cordially yours,

HUGH W. GASTON, *Chairman.*

ITEM 5: ADDITIONAL MATERIAL FROM ALBERT HORVATH,\*  
EXECUTIVE DIRECTOR, SENIOR CITIZEN SERVICES OF METRO-  
POLITAN ATLANTA, INC.

SERVICE INFORMATION OUTLINE—SENIOR CITIZEN SERVICES OF  
METROPOLITAN ATLANTA, INC.

HISTORY

After three years of study by a committee of the Community Council of the Atlanta, Inc., and on recommendation of the Council's Executive Committee, Senior Citizen Services of Metropolitan Atlanta, Inc. was incorporated on October 12, 1965.

This action was encouraged by the Georgia Gerontology Society and the Georgia Commission on Aging.

*Objectives*

To help develop and promote an awareness, in the Atlanta Metropolitan Area, regarding the needs and contributions of the elderly and to provide consultation and assistance to groups interested in meeting these needs.

To involve older persons in the Community Organization Process in order that they have a voice in the development of policy and programs.

To inventory services available to the elderly and to help evaluate these services.

To build up a repository of information regarding resources available to aging persons and their families and to disseminate this information to agencies, interested groups and individuals in the community.

To develop cooperative working arrangements among public and private agencies serving older people and to act as a consultant to the agencies—lending technical assistance to develop program plans.

To identify areas needing additional information and research.

*Services*

Consultation and organizational assistance to communities for the purpose of developing awareness of the needs of the elderly and helping them plan for and implement these needs.

Dissemination of information on resources available to 1) aging persons and their families, 2) agencies and 3) interested groups and individuals in the community who are either involved in an aspect of an aging program or who inquire regarding specific information.

Provision of a Forum wherein public and private agencies and interested groups serving older people may be encouraged to work cooperatively and coordinate their efforts.

Maintain a continuous process of fact-finding and inventory of services with evaluation of same, in order to better implement services and to facilitate more rational development of services.

*Service area*

The service area is defined in the Charter as "Metropolitan Atlanta."

*Special projects*

*Multiservice centers*

Space for four Multi-Service Centers is provided by the Atlanta Housing Authority in four high-rise housing projects in low-income areas. Economic Opportunity Atlanta, Inc., contracts with Senior Citizen Services to supervise, staff, and operate the Multi-Service Senior Centers.

In addition, the project serves all the elderly living in the housing project community adjacent to the high-rise buildings and the elderly living in the contiguous low-income areas that comprise the "neighborhoods."

\* See statement p. 433.

*Foster grandparent project*

The Foster Grandparent Project, jointly sponsored by the Administration on Aging and the Office of Economic Opportunity, provides employment for older persons. The Foster Grandparents function in a service role to institutionalized children who are in need of a special relationship with an interested and mature adult. This Project is designed to explore, evaluate and demonstrate the feasibility, problems and potential benefits of several variations of employing older workers for the enrichment of the social environment of institutionalized infants and young children.

*Senior child care project*

This is a program financed through Economic Opportunity Atlanta utilizing the services of Senior Citizen Services of Metropolitan Atlanta to recruit, train and place older persons as employees in child day care centers. Two major areas of employment are being emphasized.

Senior Child Care Worker—a person employed to aid a head teacher in carrying out all aspects of the daily program——. Senior Special Care Worker—a person employed to carry out special assignments, caring for a sick child in his own home until he is able to return to the center. Also employment as housekeepers, janitor, cook or kitchen aide is being sought.

There is a shortage of trained persons available to work as aides in day care programs. Atlanta already has over 350 child day care centers in operation. In addition to these there are plans under way for new centers under both private and public sponsorship. As the demand for day care grows the shortage of workers will become more acute. The older population is a major resource to fill this need. Older persons are a logical group from which to recruit such workers. All are not suited for this work but many are physically and mentally capable of performing the job well. They bring to it a maturity and a sense of responsibility appropriate to the demands. Often their past experiences have uniquely equipped them for effective work with children.

They prefer part-time employment which often best meets the needs of staffing pattern in day care centers.

Employment of older persons in day care programs can enrich the experience of the children. Perhaps the greatest contribution of the older adult is his ability to acquaint children with the continuity of life. In our urban society and small nuclear families, a few children have grandparents nearby. They miss the sense of belonging and extended family ties.

The use of the older adult in day care centers provides children with an opportunity to grasp the movement of life and experience the warmth of relationship beyond their own sphere.

*Board*

Senior Citizen Services has a rotating board of 18 Trustees, which has final authority on all matters. Final decisions and policies related to projects financed by Federal and State funds are formulated after review of project contracts and agreements.

*Physical facilities*

Senior Citizen Services leases space from Palmer, Inc. at 719 Glenn Building—120 Marietta Street, N.W.

## SERVICE STATISTICS 1967-68

Provided assistance to model city planners in assessing the needs of older people in that area. Assumed responsibility for formulating program plans for older citizens in those neighborhoods and coordinating them with other programs.

A Directory of Senior Clubs was developed and distributed.

Provided consultation to Economic Opportunity Atlanta program staff regarding services to older citizens in low-income areas.

Project development assistance was provided to re-structure the Gate City Day Car Project to use older persons as aides in a day care program.

Documented the health needs of older persons in congregate living through development of a questionnaire and working with the Community Council of Metropolitan Atlanta to conduct an extensive survey.

Consultation was provided in the formulation of recommendations for the extension of homemaker services to mothers treated in the Maternal and Infant Care project at Grady Memorial Hospital.

Met increasing demands by individuals and agencies to provide information pertaining to the needs of older people and assistance with referral.

Carried the responsibility for developing a model program for the elderly in the proposed John F. Kennedy Community Center.

Have undertaken early planning with the school systems in the Metropolitan area regarding the contributions which older persons can make in school settings.

Participated with the State Employment Service, Red Cross and several local hospitals to develop and sponsor a "patient-sitter" service.

Planning a demonstration project encompassing a broad range of protective services for the elderly (hopefully in cooperation with one of the five-county Family and Children Services Units).

Assistance was provided in the development of a proposal to establish a sheltered work center for older people.

Project assistance was provided to initiate a program for employment of older persons as senior child care workers in the West End Child Development Center and for training of additional workers for employment in other public and private day care centers. Responsible for the recruitment, screening, training, and job development, placement, and the evaluation of older workers.

Given the responsibility, by the Council on Gerontology at the University of Georgia, for sponsorship, promotion and recruitment for two adult development and aging seminars. Fifty-seven (57) seminar participants were recruited from Metropolitan Area Agencies.

Provided organizational and consultative services to the Clayton County Economic Opportunity Authority in assessing that county's needs for its elderly and in helping formulate a countywide senior citizens program for funding under the Older Americans Act.

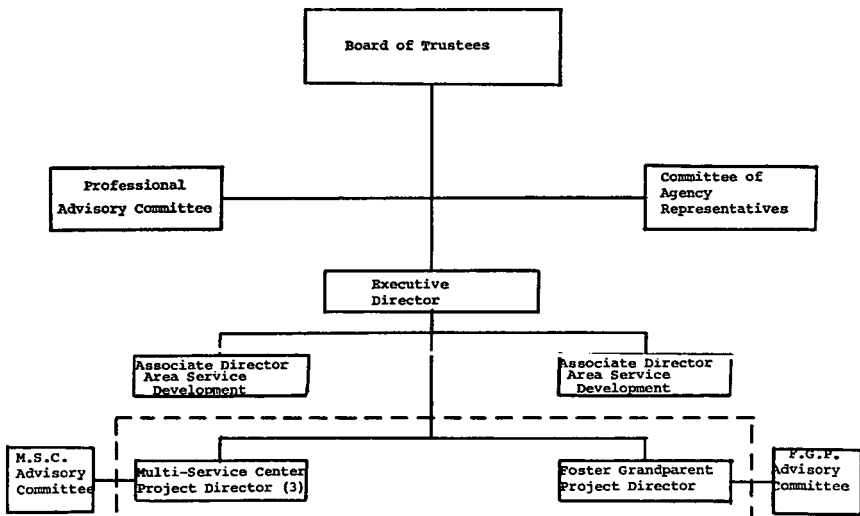
Shared a major role in the sponsorship and development of Metropolitan Area Consumer Conference for senior citizens.

Provided consultation and leadership to a committee of representatives from a number of senior citizen groups interested in the formation of a metropolitan area Association of Clubs.

Conducted a survey of Metropolitan Atlanta churches for the purpose of identifying existing programs and interest regarding services to the elderly.

Worked to assure sound local financing of the community organization and program development responsibility of Senior Citizen Services through Community Chest membership.

SENIOR CITIZEN SERVICES



-- -- Designates Direct Service Projects Funded Separately From Central Services.

## SENIOR CITIZEN SERVICES OF METROPOLITAN ATLANTA

## SURVEY OF MODEL CITY AREA STATISTICAL SUMMARY

Number Interviewed—201.

30% male.

70% female.

43% do not have phones.

*Income*

94% have incomes of less than \$3,000.00 per year.

48% have incomes of less than \$1,000.00 per year.

31% receive old age assistance.

49% receive Social Security. (Some both.)

*Housing*

42% have one or more problems with housing.

75% of these having a problem with current housing needed their houses painted.

69% needed repairs.

53% reported high rent.

Inadequate Plumbing Indoors.

*Health*

56% usually go to Grady Hospital for Medical Care.

35% usually go to a Doctors Office.

47% had been treated at a Grady Clinic in the past year.

35% had been treated in a Doctor's office in the last year.

10% had been in-patients in a hospital in the last year.

78% are cared for by family when they are sick and need help.

10% have no one to care for them.

69% use public bus or taxi to go for medical treatment.

9% require ambulance.

48% report one or more problems getting medical service. Most common complaint is waiting.

32% have trouble getting drugs.

43% of those having trouble getting drugs do not have a drug store available

37% were sick during the last two weeks.

15% of those who were sick went to a private physician.

39% of those who were sick went to Grady Memorial Hospital outpatient clinics.

14% of all answering question went to Grady during a two week period.

11% said they have trouble cooking.

61% of those who have trouble cooking are too sick to cook.

15% have trouble keeping house.

43% who have trouble keeping house said they do not feel like it.

9% had trouble caring for personal needs.

94% of those who have trouble need assistance.

24% have trouble shopping.

57% have difficulty leaving home.

*Socialization*

53% leave home one to three times a week.

24% leave home three to seven times a week.

2% do not leave home at all.

*When they leave home*

65% leave home to go to church.

48% go shopping.

41% go to the Doctor or Hospital.

20% go to Community Meetings.

30% go to visit relatives or friends.

*When they are at home*

- 45% spend their time watching T.V.
- 38% praying.
- 38% household tasks.
- 30% listening to the radio.
- 21% talking on the phone.
- 21% cooking.
- 20% reading.
- 13% visiting friends and relatives.
- 13% gardening.

*Need for protection*

- 5% frequently have a problem with Salesmen calling on them.
- 18% occasionally.
- 31% seldom.
- 45% never.
- 21% said salesmen try to sell them Insurance.
- 21% home repairs.
- 16% furniture.
- 15% magazines.
- 6% health items.
- 50% said they knew where to go for legal services.
- 50% did not know where to go.
- 68% have needed legal service at some time.
- 32% have not needed legal service.
- 65% say they do not need help in handling money.
- 35% say they do need help.

*Employment*

- 40% would be interested in working if work that suited them was available.
- 60% were not interested in working.
- 23% were interested in full time work.
- 77% were interested in part time work.
- 14% said they would enjoy baby sitting.
- 12% care of the sick.
- 5% factory work.
- 4% ironing.
- 2% sewing.
- 2% carpentry.
- 1% teaching.
- 58% anticipated health problems in working.
- 21% transportation problems.
- 9% loss of other income.

*Neighborhood facilities*

- 89% have a grocery store in the neighborhood.
- 11% do not.
- 57% think the grocery store has an adequate supply of quality food.
- 43% think not.
- 46% think prices are moderate.
- 54% think not.
- 28% have a drug store in the neighborhood.
- 72% do not have a drugstore in the neighborhood.

SUMMARY OF PROBLEMS AND CONCERNS AS EXPRESSED BY AGED RESIDENTS OF  
THE MODEL NEIGHBORHOOD

NEIGHBORHOOD MEETING—MARCH 18, 1968

*(1) Insurance*

(a) Supplemental health insurance to Medicare. Are companies misrepresenting the need? There is much confusion regarding the policies which are available.

(b) Automobile Insurance. Policies are either cancelled or the prices raised upon reaching age 65.

*(2) Financing*

(a) Home mortgages. Interest rates are high on new homes and on home loans.

(b) Small loans. Persons receiving limited incomes are approached by "loan sharks" who know they will have difficulty making payments.



(3) *Health costs*

(a) *Drugs.* Many drug stores charge excessive prices for drugs. There was indicated a wide divergence in prices among stores and the need for shopping around was pointed out.

(b) *Dentures and hearing aids.* These items are unavailable to most persons because of the high cost. There is no agency which will provide them to older persons who have no work potential.

(c) *Hospital costs.* Rates in hospitals have increased beyond the reach of most older persons.

(4) *Housing*

(a) *Living alone.* There are many older persons living alone who have no relatives or friends to turn to in time of emergency.

(b) *Boarding homes.* There are only very limited standards regulating boarding homes for the aged. There should be some method of supervision established and an enforcement of basic health and sanitation codes in addition to the formulation of social standards.

(c) *Rural areas.* There is a lack of housing resources for persons living in rural areas.

(d) *Housing codes.* Tenants are victimized by landlords who make repairs to homes as they are required to by housing codes and in turn increase rents to cover the expenses of the repairs. Should there be a ceiling on rents in low-income areas?

(5) *Neighborhood services*

(a) *Food stores.* Many small neighborhood stores in low-income areas offer inadequate foods at prices much higher than large supermarkets.

1. Merchants offer items which fail to sell in other stores.

2. Seconds are not marked.

3. Meats are low quality and often have inferior cuts ground in with what is advertised.

4. Prices are "jacked-up" at the times of the month persons receive checks.

5. Are the health laws and codes enforced properly regarding length of time food is to remain in stock, etc.? Does an "A" rating of a store mean that it offers quality food?

6. Unavailability of food and drug stores in neighborhoods. One comment which illustrated the problem: "They tore down our supermarket to build the Archives, and it hasn't helped me a bit."

## NEIGHBORHOOD MEETING—APRIL 1, 1968

(1) Lack of transportation to receive medical treatment.

(2) Unavailability to persons to care for elderly person in their homes when they are sick, including professional nursing service and homemaker or health aide assistance.

(3) Lack of income and opportunities to earn additional money.

(4) Lack of legal services.

(5) Lack of low income housing of an apartment type.

(6) Need for a type of food services including both delivery of meals to persons confined in their own homes, and group gatherings to assure that older persons eat properly.

(7) Lack of food stores in the area. There are no chain stores and the neighborhood markets have inadequate stock, inferior food and high prices as well as being located inconveniently.

(8) Concern for the neighborhood. There was a question raised as to whether the homes of persons in the neighborhood would be torn down.

There was also some distress expressed because of the overcrowding of children in many of the neighborhoods. This overcrowding causes the sidewalks to be crowded and makes for general unpleasant conditions. There was also a feeling that the neighborhood should be cleaned up, and persons made to keep their property in a good state of repair. The comment was made that because of the number of people in the neighborhood that they were afraid to live by themselves. There is a high degree of crime in the area.

## NEIGHBORHOOD MEETING—APRIL 5, 1968

(1) The need for assistance in homes when a person is sick or generally unable to carry out the functions which are required—such as cooking and cleaning.

(2) The need for transportation to medical facilities as well as grocery stores and shopping centers.

(3) The need for opportunities to work to earn additional income. It was expressed that many of the women would like to work in day care centers. The concept of a sheltered workshop was explained and the idea was well received.

(4) The need for assistance in shopping and getting checks cashed. Often persons who are confined to their homes depend on neighborhood children to perform these functions and are often taken advantage of.

(5) The need for assistance in planning the use of money.

(6) The need for adequate grocery stores in the neighborhood. It is necessary to go to Lakewood Heights to get to a large super market. The neighborhood stores have meat of inferior quality, and the fruits are not fresh.

(7) The difficulty to obtain persons to make repairs on the homes and to assist with the general maintenance of the home. The cost of making these repairs is also often prohibitive.

(8) The need for assistance in picking up surplus foods.

(9) The need for assistance for persons who have visual handicaps. Often people have problems but will not admit it and seek help.

#### NEIGHBORHOOD MEETING—APRIL 15, 1968

(1) Transportation.

(2) Medical Facilities—one lady mentioned that she wanted to know that since the EOA center had taken her to Grady and had sent someone to accompany her if she would have to turn over her property to them after she died. This apparently had been a major concern and she had not called on them recently because of this fear.

(3) The need for someone to accompany older persons to Grady and stand in line for them. Often older persons are not able to stand for long periods of time in the lines.

(4) Help in the home—persons need help with their personal needs as well as cleaning and cooking.

(5) Help in maintaining homes—it is often difficult to find people to assist with mowing the lawn and making repairs on the home. However, even though people may be available many older persons are not able to pay for the service.

(6) The need for a drug store in the area—there is not one in the Pittsburg neighborhood.

(7) The need for a health center located in the neighborhood. It is troublesome and inconvenient to go to Grady Hospital.

#### NEIGHBORHOOD MEETING—APRIL 17, 1968

(1) Too many steps to get to a second floor apartment. These steps confine many persons to their apartments and do not allow them the mobility which they would desire.

(2) Assistance with general cooking and cleaning for persons when they are sick or disabled for a long period of time. Many persons have no family to help.

(3) It was suggested that a registry be made of all the children in the neighborhood who wish odd jobs. The residents of Capitol Homes are required to maintain their own yards and they need to know the children who wish to earn extra money by mowing yards as well as performing other duties, such as running errands to the grocery. It was mentioned as a problem, however, that many times older people with limited incomes cannot afford this payment to children for these chores.

(4) There is a need for a drug store and a large super market in the area.

(5) The need for part-time employment. The fear was mentioned of rents being increased and checks being reduced. The concept of a sheltered workshop was explained and seemed appealing to many persons. One lady mentioned that she would like to take in ironing if this would be permissible.

(6) The need for assistance in maintaining apartments. It was mentioned that it costs \$10.00 to have the Housing Authority maintenance people wash down walls. Charges are made for repairs to screens and doors even when the person living in the apartment is not responsible for the destruction of the property.

(7) The need for nursing services.

ITEM 6: STATEMENT OF MRS. LINDEN G. JOHNSON, SR., RESIDENT,  
ATLANTA, GA.

DEAR SENATOR MOSS: If there had been enough time for everyone to be heard at the hearing I would have said: This program has brought our two races closer together and we have a much better city because of our combined efforts to make a Model City Neighborhood. We need the transportation connecting these neighborhoods worst of all and then the other things will be used to their best advantage. We have many old people of both poor and fairly well off that have out lived their people. Our older people have varied problems. Some have not yet been touched upon but in time will be. We are glad for this hearing for the needs of our aged. Because our Model City Neighborhoods are full of elderly this special effort to find their needs and do something about them is urgent.

ITEM 7: STATEMENT OF LEWIS DAVIS, EXECUTIVE DIRECTOR,  
WESLEY COMMUNITY CENTERS, INC., ATLANTA GA.

My name is Lewis Davis. I am Executive Director of Wesley Community Centers, Inc., related to the National Division of the Board of Missions of the United Methodist Church and a member agency of the National Federation of Settlements and Neighborhood Centers. Our agency address is P.O. Box 6802, Atlanta, Georgia 30315.

Ours is a multi-center agency with a Program Center located in the Model Cities area on Richardson Street in Mechanicsville. As a neighborhood center we have a vital interest in the total neighborhood and are constantly seeking ways to provide a program of social work services which will improve the neighborhood. As an agency we have provided a neighborhood center in the Mechanicsville community since 1928 at our present location at 342 Richardson Street, S.W.

As we look at our future in the present community we realize that our physical location as well as the nature of our services will be vitally linked with the Model Cities development of Mechanicsville. As we relate to the plans and projections by Model Cities we will be endeavoring to determine what types of services we will need to provide in the interest of identifying with the people who live in the community.

At the present time we are not certain about the directions of our future program of services in Mechanicsville, but it is certain that many changes in community patterns and service needs will result from the Model Cities development of the community. As the nature of these changes begins to become known, our agency will begin to determine in what ways we can render the greatest service in relating our program to the needs of the residents in Mechanicsville.

An important concern to which we will be giving serious consideration will be that of the needs of the elderly. We are presently offering a group work program for the elderly and have an active group in the Mechanicsville community. We will be vitally interested in developing plans for the community as they affect the elderly and will be relating our agency's resources to their needs to the extent of our ability.

I want to express our appreciation to Senator Moss and the committee for allowing us to submit this statement. If we can be of further service in supplying information we will be happy to do so.

ITEM 8: ADDITIONAL MATERIAL FROM JAMES W. MERCER,\*  
PERSONNEL PROGRAMS MANAGER, LOCKHEED-GEORGIA CO.

EDUCATIONAL MOTIVATION—ATLANTA, INC. (A PROPOSAL)

*Objective*

Establish a non-profit corporation whose initial function will be that of developing pilot projects during the months of February-June 1969 in selected Central Cities (Model City) and Title III A Project elementary schools wherein Senior Citizens will share their talents, enthusiasm, and maturity with young students (or drop-outs) in structured projects designated, coordinated, and administered by the Atlanta School System, to achieve specific educational objectives for such students (or drop-outs).

\*See statement p. 460

The Corporation shall develop an objective basis for evaluating during July-August 1969 the pilot projects and for determining whether the establish on-going large scale programs beginning with the 1970 school year to serve the joint needs of Atlanta's Senior Citizens and students in the Atlanta School System.

#### *Background*

1. Studies and projects have developed interesting data indicating that retired people profit by participating and youngsters benefit significantly from contracts with retired persons in joint-structured and professionally supervised programs designed to achieve clearly defined purposes.

2. The Central Cities, Model Cities, and Title III A Schools have a clear and present need for supplementary educational aid for underachievers, drop-outs, special students including those identified as socio-economic deprived.

3. The Greater Metro Atlanta area has a substantial retired community with an unlimited potential for useful service.

4. Amongst this retired community are substantial numbers who need supplemental sources of income as well as a need for usefulness in the community.

5. Industry is monthly retiring easily identifiable and reached persons with specific talents, affluence and mobility.

6. Industry and Business through such typical organizations as Merit Employment Atlanta, Inc. has demonstrated its ability to address itself to the non-profit oriented needs of the community. MEA has specific experience in educational motivation through its "Living Witness" program in schools located in predominantly socio-economic deprived areas. Such experience in organization, recruitment, and administration is potentially available to the proposed Educational Motivation—Atlanta, Inc.

7. Retired manpower resources and technical assistance are known to be available through Senior Citizens Services of Metropolitan Atlanta, Inc. and the Georgia Commission on Aging and resources and assistance are potentially available through National Council of Jewish Women—Golden Age Club, Georgia Gerontology Society, and the Department of Gerontology, University of Georgia, Athens, Ga.

8. The Atlanta Council of Parent Teacher Associations, Atlanta Parent Teacher Council, The Community Council of the Atlanta Area, Inc., and Junior League have expressed interest in the proposed projects and have indicated a desire to find ways to be supportive of the proposed project.

#### *Suggested approach*

1. Establish Educational Motivation—Atlanta, Inc. as a non-profit subsidiary of Senior Citizens Services of Metropolitan Atlanta, Inc. to act in support and under the auspices of the Atlanta School System in achieving specific educational goals determined exclusively by the System.

2. Establish a permanent steering committee consisting of members of EMA and the Atlanta School System to direct the establishment of written pilot educational motivation projects in the Central Cities (Model City), and Title III A project elementary schools. The Steering Committee shall be a community-school partnership.

3. Initially, the Permanent Steering Committee shall determine its own charter subject to counsel and guidance from and final approval of proposed pilot projects by the MEA and the Atlanta School System.

4. The Atlanta School System shall have as members of the Steering Committee:

- (a) The Director(s) of the Central City and/or The Title III A Project.
- (b) Community Resources Coordinator.
- (c) Coordinator of Schools Social Workers.
- (d) Dr. Helen Cook. (Director of the Occupation Project)
- (e) Representatives of the Research and Development Division.
- (f) Others as may be designated by the System.

5. The EMA shall have as members of the Steering Committee appropriate representation of:

- (a) Industry.
- (b) Atlanta Council of PTA.
- (c) Atlanta Parent Teacher Council.
- (d) The Community Council of the Atlanta Area.
- (e) Senior Citizens Services of Metropolitan Atlanta, Inc.
- (f) George Commission on Aging.
- (g) Others as may be designated by EMA.

6. Representatives of the Atlanta School System shall determine at least four but no more than thirty specific educational goals which are believed to be achievable through the employment of selected senior citizens.

7. EMA shall recruit qualified volunteer candidates for the specific projects designated by the School System.

8. The Steering Committee shall devise an appropriate screening process to select and assign volunteers to the proposed pilot projects.

9. The School System Representatives shall design and conduct an appropriate pre-service workshop for volunteers, coordinators, teachers, and principals. The final selection of volunteers will be made at the conclusion of the workshop experience.

10. Under the joint auspices of the Steering Committee the pilot projects shall commence with senior citizen volunteers matched by screening and pre-service experience with a specific educational project beginning in January-February and ending in May-June.

11. During the period of the pilot projects the Steering Committee shall meet regularly to evaluate the progress of the projects and to revise planning and support as necessary to ensure satisfactory completion of the projects and to ensure the establishment of on-going permanent programs.

12. During the Summer months of 1969 the Steering Committee shall evaluate the pilot projects through suitable means and shall prepare a final report with recommendation for the review of EMA and the Atlanta School System.

13. Based upon the conclusions reached by EMA and the Atlanta School System, a final determination shall be made by the Steering Committee during August 1969 as to future projects.

Community	Interface	School
Educational motivation—Atlanta	Steering committee	Atlanta school system.
(1) Develop administration	(1) Conceptualize pilot programs	(1) Determine specific educational needs and identify 30 proposed pilot projects.
(2) Develop publicity program among senior citizens.	(2) Establish volunteer specifications based on proposed projects.	(2) Design preservice workshop for volunteer teacher, principal, and coordinator.
(3) Recruit volunteers based on standards developed by steering committee.	(4) Initially screen and select volunteers to attend preservice workshop.	(5) Conduct preservice workshop.
(4) Continue to develop manpower resources and to explore financial support, community, State, Federal.	(7) Report final projects and volunteer evaluation to EMA and school system.	(6) Finally select and match volunteer with pilot project.
(8) Approve/disapprove final project/volunteer assignments.	(9) Evaluate/modify pilot project in process.	(8) Approve/disapprove final project/volunteer assignments.
(10) Evaluate impact of project upon senior citizen.	(10) Conceptualize 1969-70 project.	(9) Conduct pilot project.
(11) Support 1969-70 programs	(11) Design ongoing community-wide programs.	(10) Evaluate impact of project upon student(s).
		(11) Conduct 1969-70 programs.

#### "WINNETKA IDEA" REACHES OUT—AOA-SPONSORED SEMINAR DRAWS PARTICIPANTS FROM SEVEN STATES

A Winnetka School Volunteer Seminar in May, sponsored by the Administration on Aging, provided the most recent step in a long series in the national expansion of a natural idea of using older volunteers as a major community resource for providing children with educational enrichment.

Nine years ago in Winnetka, Ill., a program that later became known as PAM (Project for Academic Motivation) began in a single elementary school with the services of four retired businessmen, each working with one child or a small group for 40 minutes each week.

This essentially simple and natural idea expanded rapidly and with flexibility to nine communities on the North Shore from Evanston to Lake Bluff, with more than 500 men and women of various ages serving as volunteers. Some of

them met with children in a one-to-one relationship to discuss and experiment. Other volunteers served small groups of children; while others lectured to whole classes.

#### GRANTS HELPED PROGRAM EXPAND

In 1967, an AoA title IV grant made it possible for the Winnetka group, under sponsorship of the Winnetka Public Schools, to help six other Illinois communities of widely varying socio-economic backgrounds and resources adapt and establish similar school projects and train and recruit volunteers for them. As word spread, requests for information, help, and guidelines came in from many States.

The second-year AoA grant authorized a unique seminar for school administrators, volunteer agencies, and community leaders to meet in an intensive "show-and-tell" 4-day conference, headquartered in Winnetka and Highland Park but traveling to the many Illinois communities where PAM projects are underway. Fittingly, the seminar was held during Senior Citizens Month. Its Director, Howard Bede, is himself a senior citizen who has been a PAM volunteer for 8 years.

#### 7 STATES REPRESENTED

Participants came to the Winnetka meeting on May 14 from seven States—California, Oregon, Washington, Indiana, Louisiana, New York, Illinois—and from the District of Columbia.

They represented school administrations, existing volunteer services programs, and Federal, State, and local agencies on aging. Some already have volunteer projects going in their communities but sought more information in their use in schools and particularly on use of older retired people as volunteers. Others had not yet inaugurated volunteer programs but were eager to learn the "how" of establishing volunteer talent pools. These also wanted to know how to draw upon the hitherto largely ignored resource of local older citizens.

In 4 busy days and nights (starting before 8:30 each morning and running until 10 each night) the seminar "students" traveled hundreds of miles—in cars on Illinois roads and on foot in school corridors—to see volunteers at work in schools, in kindergarten, elementary, junior and senior high, in affluent communities and in low-income neighborhoods.

Additional program facts were brought to them each night at the seminar dinners by representatives of programs in still other Illinois communities, including several parochial programs in inner city Chicago. Information, ranging from insurance coverage of volunteers in the schools to specific inclusion of volunteers as "a learning resource" in a school system's curriculum plan, was provided at these evening sessions.

Participants were impressed by the adaptability of the natural idea of help from those with experience, knowledge, and time to share. They saw it work in Winnetka, a high-income community long known for its progressive educational plant and professional population, and in poverty neighborhoods where neighborhood cooperation is developing effective volunteer resources working, in some cases, through local community action agencies. They saw it help schools, teachers, children, and the volunteers, who are needed and cherished.

#### VOLUNTEER WORK VARIED

They saw older volunteers at work:

- In learning labs as recognized authorities on special subjects and also just as friendly listeners.
- In school corridors carrying on an art project with eager helpers.
- At a desk just outside a classroom door helping Spanish-speaking children struggle with and master English phonetics.
- In a basement with handmade surveying equipment locating a bridge across an imaginary river.
- In classrooms as story-tellers, lecturers, tape recorder operators, and teaching assistants.

#### COORDINATOR VITAL ELEMENT

Everywhere, they learned the vital importance of the coordinator—a job created by the Winnetka project. Mrs. Janet Freund, Project Director of PAM, who was the project's first coordinator serving all Winnetka Schools, has developed a training manual for coordinators and gives a training course for them at Barat College in Lake Forest. Every school in which the program begins now has a coordinator—responsible for matching teacher requests and student needs to volunteer services—the essential ingredient of success in planning and performance.

Seminar participants also learned of the importance of establishing a volunteer talent pool in every community where the program begins in order to assure adequate, efficient, and continuing service.

Older people make up less than 10% of the national population, yet they make up from 25 to 33% of the PAM volunteers. About 20% of the coordinators are 60 or older. Teachers, in particular, reported to seminar classroom visitors their pleasure and success with older volunteers and their feeling of the value to children "to get to know older people." Older volunteers meeting with seminar participants told of their own pleasure in the active involvement the program gives them in their communities.

Convinced that wherever older people reside, a project similar to PAM can make their lives happier, busier, and offer a new resource to their community, one of the seminar participants went home determined to "locate *all* the senior citizens in my town."

A teaching film, based on the seminar experience, is now being edited. Further details of the Winnetka idea and PAM program may be obtained from Mrs. Janet Freund, Winnetka Public Schools, 1155 Oak St., Winnetka, Illinois 60093. For information on setting up a community volunteer talent pool write the Winnetka Talent Pool, 620 Lincoln St., Winnetka, Ill. 60093.

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ITEM 9: STATEMENT OF ROBERT P. WRAY, CHAIRMAN, COUNCIL  
ON GERONTOLOGY, GEORGIA CENTER, ATHENS, GA.

THE UNIVERSITY OF GEORGIA,  
*Athens, December 12, 1968.*

DEAR SENATOR MOSS: I appreciate the opportunity to accept the invitation you extended to those of us present yesterday at the Hearing on "Usefulness of the Model Cities Program to the Elderly" to submit a statement to your committee. The subject of the hearing is broad, and presumably is intended to encompass *all* of the elderly. I am concerned that most of the attention being given to Model Cities Program appears to be directed primarily toward those who are lowest on the economic ladder. Unless we are going to simply develop modern ghettos, attention should be given to developing a complete Model City and not just a section of one.

With respect to the elderly, such a person who is economically secure may need housekeeping services or health care services in order to remain in his own home rather than go to a nursing home or hospital. Similarly, adequate housing, perhaps in an apartment that has features that make life comfortable for aged and physically handicapped persons, should be available regardless of income to those who need better housing in order to retain independent living. If housing is built specifically for low income persons, the main eligibility factor is amount of income. Similarly, if housing is built for the elderly, the main eligibility factor is need for housing, not income.

Making housing available to all of the elderly who need it does not mean that all of the elderly should pay the same rent. Rents can be scaled according to ability to pay, but without an arbitrary ceiling. The same principle can be applied to payment for other services.

In brief, let a Model City provide for persons of all economic levels and of all ages.

Sincerely yours,

ROBERT P. WRAY, *Chairman.*

