

**EVALUATION OF ADMINISTRATION ON AGING AND
CONDUCT OF WHITE HOUSE CONFERENCE ON AGING**

HEARINGS
BEFORE THE
SPECIAL COMMITTEE ON AGING
UNITED STATES SENATE
NINETY-SECOND CONGRESS
FIRST SESSION

PART 9—CASPER, WYO.

AUGUST 13, 1971



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EVALUATION OF ADMINISTRATION ON AGING AND CONDUCT OF WHITE HOUSE CONFERENCE ON AGING

FRIDAY, AUGUST 13, 1971

U.S. SENATE,
SPECIAL COMMITTEE ON AGING,
Casper, Wyo.

The committee met, pursuant to call, at 2 p.m., in the Mardi Gras Room, Ramada Inn, Senator Clifford P. Hansen of Wyoming, presiding.

Present: Senator Hansen of Wyoming.

Also present: Mr. Ben Yamagata, professional staff member, and Mr. John Guy Miller, minority staff director.

OPENING STATEMENT BY SENATOR CLIFFORD P. HANSEN, PRESIDING

Senator HANSEN. The hearing will please come to order.

On behalf of the committee, I would like to extend a welcome to our witnesses and guests this afternoon.

This is an official hearing of the Special Committee on Aging of the U.S. Senate. A record of all testimony heard today is being made, and the proceedings will be printed as part of the public record and will be distributed to all Members of the Senate for their information. Printed copies of what is said here today also will be circulated among many Government officials and other interested persons outside of the Senate. If you would like to receive the proceedings of this hearing in Wyoming, you may request copies by writing to the Special Committee on Aging, U.S. Senate, Washington, D.C. 20510, or by writing directly to me.

"OVERSIGHT"—RELATING TO THE AGED

The Special Committee on Aging, as many of you know, is a study committee. It is sometimes referred to in the Congress as an "oversight" committee, and is concerned with "oversight" of all types of problems relating to age and aging among American citizens. In a very real sense, it aims to bring special attention by the Senate to needs of older Americans.

This special committee has seven subcommittees, each concerned with a special need or problem area, such as health, employment, and retirement income, consumer interests, and housing.

Tuesday and Wednesday of this week, the Subcommittee on Employment and Retirement Incomes, under the chairmanship of Senator Jennings Randolph, of West Virginia, held hearings in Roanoke, Ala.,

and Miami, Fla. These hearings were concerned with employment problems relating to age among older and middle-aged workers. In this area, our committee is involved in needs of persons who may be as young as 40 or 45 years old. A somewhat similar hearing will be held in Pocatello, Idaho, probably on August 27.

Today's session, being related to a wider range of subject matter, is being held on behalf of the full committee.

This particular hearing is concerned with the 1971 White House Conference on Aging called by President Nixon and scheduled to meet in Washington during the week beginning November 28 of this year.

It is our intention to have a review of the situation among older persons in Wyoming. I requested the hearing because I believe it is important that the record show the special characteristics of aging in States such as Wyoming as well as in the more populous sections of the Nation.

It seemed most appropriate to make this review a part of the Wyoming State Conference on Aging called by Gov. Stanley K. Hathaway for today. I am deeply grateful to Governor Hathaway for his splendid cooperation in making this joint effort possible. I am equally grateful to you, many of whom have come great distances, for sharing this period with the U.S. Senate.

Committee hearings of this type have been held in conjunction with State conferences in several other States. As such, they are a continuation of a series on "Evaluation of the Administration on Aging and Conduct of the White House Conference on Aging" which began with hearings in Washington, D.C., during March of this year.

I hope and trust that our work today will make a valuable contribution to creation of an effective national policy on aging as requested by President Nixon in his call for the White House conference.

There will be 11 scheduled witnesses today. Nine will participate in two panels discussing various specific need areas to be considered at the Washington conference in November and early December.

Witnesses appearing on the panels, also, I understand, will present summaries of reports from workshops you have held today.

In addition, there will be two witnesses who will discuss what lies ahead in Wyoming.

After completion of the scheduled witnesses, if there is time, an opportunity will be given, for as long as time permits, to hear from persons in the audience. Any person whom we are unable to hear or who would prefer to make his comments in writing may write out a statement on the yellow forms we have prepared for this purpose. They are around at some of the tables. If anyone indicates a desire to transmit his thoughts in writing, you have but to indicate to one of the staff people here present, and we will see that you get one of these yellow sheets on which you may make such remarks as you wish to. A supply of these yellow forms, incidentally, is available at the back of the room now.

You may either turn your comment in to our staff today or mail it to me in Washington. Each will be made a part of the printed hearing record.¹ The record will be kept open 30 days for this purpose.

¹ See appendix 3, p. 595.

I urge you to let us have your thoughts. We do want to hear from you.

As you know, I had the pleasure of addressing myself to the task before the White House Conference on Aging in remarks at the luncheon session of Wyoming's conference today. In the interest of time I shall not repeat any of that now, but request that the portion of those remarks appear at this point in the hearing record.

(The statement referred to follows:)

ADDRESS BY SENATOR CLIFFORD P. HANSEN AT WYOMING STATE
CONFERENCE ON AGING, AUGUST 13, 1971

Many, many thousands of words have been used in discussion of aging and old age. Thousands more will be heard in the future. Indeed, hundreds of thousands will be written in connection with the 1971 White House Conference on Aging with which you and I are concerned today.

With so many words, running into millions since man began, I am a little hesitant to add mine today. My reluctance is greater because I face an audience largely composed of real experts on aging.

I am keenly sensitive to the fact that many of you, through direct personal knowledge, have authority on this subject which can only come from experience.

I shall nonetheless refer to some observations made about aging in the past, and express some personal opinions of my own.

The most important thing I can say today, however, is that I hope you will give to the Nation the benefits of the wisdom you have acquired through your own experience.

I hope your voice will be heard clearly through Wyoming's delegates to the White House Conference.

More importantly, I hope you will seize every opportunity—as long as you live—*every* opportunity to share your insights with our State and Nation as society develops new policies on aging—policies which respond to the needs of older persons and will give them full opportunity for continuing involvement in life's main stream.

I have confidence that you will emphasize the positive—that you will insist, as I do, that aging and future developments in aging must offer new challenges to America and every American—challenges to progress; challenges to fulfillment.

You and I here in Wyoming have been reared in an atmosphere of challenge. Our pioneer heritage is sufficiently close, that you and I inevitably must be progress-minded—looking for new frontiers to conquer.

Today's older Americans are pioneers in the field of aging just as your fathers and mine—perhaps even you, yourself—were pioneers in opening this great western land in which we live.

Seventy years ago there were less than 7 million Americans over the age of 65. Today there are well over 20 million.

Sheer numbers alone reflect a revolution in aging. This revolution in aging has produced new problems, but more essentially, new opportunities and new challenges. It is time we face them squarely.

Concurrent with the quantitative revolution in aging, there has been a *qualitative* revolution. True enough there are many more persons past 65, but no less significant has been the expansion in the individual's capacity for full living in later years. Both are products of our progress in science, education, and overall living standards. Both quantitative and qualitative progress may be expected to continue.

I hasten to interject that I refer to numbers *past 65* only because that is the age which custom—began in the middle of the 19th century—has established as a dividing line. I seriously question, in view of our progress, whether the line is appropriate now. I am confident it will not be appropriate for the 21st century.

No one is more aware of the continuing revolution in aging than you, so I shall not labor the point with documentation. It does, however, accentuate the need for a new national policy on aging as requested in President Nixon's call for the 1971 White House Conference on Aging.

Inherent in any acceptable policy are three ingredients: There must be adequate response to the multiplicity of *problems* confronting older Americans today.

There must be expansion of opportunities for older people to respond to the *challenges* of longer life with independence, involvement, and full personal satisfaction.

There must be a restoration—wherever it has been lost—of *respect* for older persons and *recognition* of the contributions they have made.

These matters have been in your minds today in this conference. Your seasoned judgements will be reflected in reports from your working sessions to be presented at the hearing by the U.S. Senate Special Committee on Aging this afternoon.

In commenting on these three elements—problems, challenges, and recognition—it is appropriate that I should refer to comments about aging and old age which come to us from the past.

All of you are familiar with Browning's famous lines :

"Grow old along with me!

The best is yet to be . . ."

Indeed these words have been quoted so many times that they may be nauseating to some who hear them now.

What Browning said should be true. But how can it be true for older people whose incomes are inadequate for the minimal needs of decent subsistence? How hollow Browning's invitation must be to the aged who are racked with physical pain and do not have adequate relief and comfort available to them? How good can old age be if it is a time of loneliness because of isolation from one's fellow man? How can one *grow* in old age if there is no opportunity for fulfillment of purpose?

These questions generated by Browning's poem concern you and they concern me. It is essential that the Nation as a whole show its concern.

Wyoming's delegates to the White House Conference, I am sure, will call for new national policies on aging which will offer answers to the problems of older Americans today—problems related to income adequacy, health care, recreation, housing, economic opportunities, transportation, continuing education, and social involvement. I hope the recommendations will receive prompt response from society.

Concern for today's older generation must also relate to the serious need for *expansion of opportunities* for full participation in the nation's mainstream.

Older Americans have mental and physical capacities far in excess of those generally recognized by society. They have a zest for life that should not be ignored. They have appetites for fulfillment which need to be met. New doors should be opened offering them personal challenges to which they can respond with dignity, independence and satisfaction.

A quotation from Justice Oliver Wendell Holmes, Jr. sets forth a part of this need.

Mr. Holmes said :

"The riders in a race do not stop short when they reach the goal. There is a little finishing canter before coming to a standstill. There is time to hear the kind voice of friends and to say to one's self: "The work is done." But just as one says that, the answer comes: "The race is over, but the work never is done while the power to work remains." The canter that brings you to a standstill need not be only coming to rest. It cannot be, while you still live. For to live is to function. That's all there is in living."

These words by Mr. Justice Holmes were delivered in a radio address by him, March 8, 1931. *That day he celebrated his 90th birthday.*

"For to live is to function." Purpose is as important to the seventy year old as it is to the seventeen year old. Sometimes, I think, it may even be more important.

Regarding another concern, I turn to another quotation—a sentiment so true that a dozen noted writers of the past have phrased it in different words.

Most frequently attributed to Francis Bacon, I think it perhaps was expressed best at the beginning of the 17th century by Shackerley Marmion, who said :

"What find you better or more honorable than age? Take the preheminnence of it in everything—in an old friend, in old wine, in an old pedigree."

What is at issue here, I believe, is the valid question of whether or not we should pay honor to those who have done so much throughout their lives for the benefit of those who follow.

You and I have the good fortune to live in a State which is sensitive to our great debt to those who did so much to build it. We come easily to a tradition of respecting those living persons whose contributions to us are so visible. I hope we will never lose our deep respect for our elders.

But anyone who has studied the field of aging cannot escape the conclusion that many of the problems spring from a lack of respect for the old—meaningful respect reflected in deeds. Too many fail to recognize that the aged are

entitled to generous and warm consideration because of what they *are* and what they *have done* for America throughout their lives.

Obviously we cannot legislate respect. We cannot provide adequate social recognition through executive order. But we still have a major need for creation of new attitudes toward aging and the aged through persistent, insistent education of the young.

I know of no one better able to provide leadership in meeting this crucial need for new attitudes toward aging among the young than today's older American. As a pioneer in a new era of aging, he is best equipped to meet this responsibility, and we should all give him full support.

I speak of today's pioneer generation in aging. It would be a mistake, however, to assume that we have reached all of the frontiers in aging. Progress has not stopped. We will have new frontiers in aging as surely as we have them in outer space.

You at this conference today have undoubtedly given first attention to the most immediately pressing needs of older persons. This is as it should be.

It is also important, however, that we take the long view toward aging in America. We must give attention to what our Nation may face, as related to older persons, twenty, forty, or sixty years from now as a result of progress yet to come.

In our obsession with obvious advances to be expected in such fields as oceanography and space, it is easy for us to overlook the fact that we are still but on the threshold of many other areas of scientific knowledge, including much that will affect the daily lives of ordinary citizens.

Distinguished scientists predict an average life expectancy of 90 to 100 years—a gain of 20 to 30 percent—by the turn of the century.

What will be the social impact of such progress? What problems will it create if we blindly adhere to 19th century concepts of aging and older persons? What opportunities for real living can such advances actually offer?

If a man lives to 95, how can we continue to arbitrarily force him into retirement at 65? How can that 30 years have value to him if we deny him opportunity for purpose and self-expression?

If we continue the present trend of postponing entrance of the young into productive arenas of society until later and later ages, what will be the reaction of the middle age group toward supporting the young *and* the old? How much of the fruits of their labor will they be willing to assign to others?

Don't forget that predictions of longer life spans are accompanied by the view that the added years will be ones of heightened mental and physical capacities. An obvious assumption is that zest for life will also be expanded and that older Americans of the 21st century—even as the pioneer older Americans of today—will demand expanded living opportunities in the fullest sense.

How will we answer these challenges? How can we delay their consideration?

One obvious field for exploration, already important, is the matter of compulsory retirement. It would appear at a minimum that current concepts of retirement need review.

Nor can examination of these questions be made only with reference to changes in disease control and the aging process. Progress in all fields will have a significant bearing on the validity of our responses.

We are already talking about sharp increases in leisure time through reduction in mandatory work loads resulting from technological improvements in production and service industries. What will this mean in aging?

It may be necessary to study the whole question of how we as a Nation and as individuals may use additional leisure time. One question which rises immediately is how leisure time might best be allocated during a life-time as distinguished from a given week or year. Should leisure time opportunities be spread more equitably over an entire life-time? Should they be concentrated largely in the later years through earlier and earlier retirement?

Closely related is the question as to what leisure does or should mean. Will not the human craving for purpose require that we bring new meaning to this word, "leisure"? What are the implications of all questions of this type for our educational systems, social services, and a host of other activities within our society? Wherein can the churches and synagogues best fit in resolving these problems?

These and countless other questions—equally serious—will have a bearing on all aspects of aging and will affect persons of all ages.

Confronted with such questions, it appears imperative that we enlist the best brains at our command to meet these challenges—to develop workable, long-range responses even while we meet pressing needs of today.

I would not presume to give you answers. I do not hesitate, however, to state my view that some of the best brains in this country are to be found among older Americans.

With the benefit of their wisdom and experience—as a truly pioneer generation in aging—we can make giant strides toward solution of problems and expansion of opportunities for *living* among older persons of today and tomorrow.

I feel this conference and others like it throughout the Nation can be a real step forward. I would urge you, however, to *persist* in your pioneering efforts—neither stopping here today. Nor with the White House Conference in November and December, but carrying on the fight until the day is won.

Senator HANSEN. Nine members of the Wyoming Advisory Committee on Aging will be witnesses. Advisory committee members who will not be witnesses are, and I would like now to introduce them at this time and ask that they arise and be recognized:

Mr. Stanley Edwards of Laramie;

Mr. Edward R. Jones of Evanston. I guess he is not here yet, I don't believe.

Mrs. Alice Hawken from Sundance;

Mrs. John Lucas, Jr., from Rock Springs;

Mr. V. L. Herzeelle of Casper; and

Mrs. Nellie E. Frizzell of Kemmerer.

The other members of the advisory committee will be introduced later. They are to be appearing on the panels.

With me this afternoon representing the committee staff, on my extreme left is Mr. Ben Yamagata, professional staff member of the committee, from Washington, and Mr. John Guy Miller, minority staff director for the committee.

Preparing the official transcript of these hearings is court reporter, Mr. Osmund Miller. He won't stand and be recognized, but he is right here in front of me, and I want to caution you that whatever you say, he will get down just as you said it.

I am pleased, also, that there is here in Wyoming with me this afternoon a member of my staff, J. Nolan McCain.

Mac, will you stand, please.

And we have my Wyoming representative, Warren Carlson, from Casper.

The first nine witnesses will appear in two panels as listed. Each panelist will read a prepared summary, a 5-minute summary, I understand. Is that right?

Mr. RHONE. That is right.

Senator HANSEN. These will be recommendations from their respective special needs area meetings with the understanding that a more complete statement will be accepted for the record.

Mr. Robert "Buck" Rhone is chairman of the Wyoming State Advisory Committee on Aging, and I would like to ask Mr. Rhone to stand again, if you will, please, Buck. He will introduce the other panelists and will be the last speaker on the second panel.

Buck, I am going to turn it over to you now at this point.

Mr. RHONE. Thank you, Senator.

At this present time, the first one to testify is Mrs. Kathryn Meloney. She will report on income.

Mrs. Meloney.

**STATEMENT OF MRS. KATHRYN MELONEY, MEMBER, WYOMING
STATE ADVISORY COMMITTEE ON AGING**

Mrs. MELONEY. Mr. Chairman and visitors or guests here today, briefly and adhering to the subject "Income for the Aging," we set forth the following comments:

The poverty level as established in 1967, was set as \$2,020 for couples and \$1,600 for single persons. Since 1967, the cost of living has reduced that level to the point where it is not possible for the aged poor to live in dignity and respect. We feel that the retirement level on income for aged poor should be increased to take care of the rise in the cost of living and automatically increase there after to take care of the further rises in the cost of living.

MEANS OTHER THAN SOCIAL SECURITY NEEDED

Social Security income is not now sufficient for the care of the elderly poor. The lengthening years of aging reducing their financial circumstances of a poverty level poses the greatest problem. Other means than Social Security benefits must be provided in order for the poor aging to preserve their dignity and respect.

One means might be through the medium of forgiveness of property taxes for those who own their homes and are able to live in them, along the lines of the forgiveness of property taxes accorded widows of Wyoming veterans.

Another means might be to equalize the taxes on single persons who must maintain the same home as married couples. Some tax relief should be given through the classification of the head of a household.

Another means could be through the subsidizing of rent costs where the needy poor do not own their own homes.

The present Social Security Act was passed in 1935. It established trust funds as it received payments being placed in Government securities and other Government-guaranteed bonds. The interest rate on the securities varies from 2½ to 8 percent, depending upon the type of bond and the date on which it was purchased. As of March 1971, the trust fund amounted to approximately \$12.4 billion. The money in the Government securities is placed in the General Federal Treasury and is not earmarked for any special areas or programs. We feel that the interest earned on the above investments should be used to assist the aged as that is the purpose of Social Security funds, and should not be placed in the Treasury of the United States as they are today.

We feel that widows should receive 100 percent of the income from the Social Security payments which their husbands had received prior to their death.

CASH CONTRIBUTIONS—RATHER THAN FOOD STAMPS, ETC.

We feel that the income of the poor and aging should be in the form of cash rather than other forms of contributions, such as food stamps, and so forth.

Many poor people have no means of transportation to get to the offices where welfare payments are distributed, and we feel that all welfare payments should be through the district Social Security Of-

fices or by mail if the recipients are not able to make the trip, either because of lack of transportation or otherwise.

So much has been stated and written that perhaps society can begin to build the ideal world where everyone has an adequate income.

Respectfully submitted, Kathryn K. Meloney and Nellie E. Frizzell.

Mr. RHONE. Thank you very kindly, Mrs. Meloney.

Senator HANSEN. Mr. Rhone, if I could interrupt just a moment, let me take this occasion to recognize the presence of the Governor of Wyoming.

Unless he has just stepped out now; has he? He moved places on me.

We are delighted, indeed, Governor, that you are able to be here for a little while this afternoon.

I had asked the Governor to join us up here. He does have to drive back to Cheyenne this afternoon, and he won't be here through the full hearing so he chose not to come up here.

I would also like to say that we were very privileged to sit in on your session this morning. Again, I want to compliment you for the extremely fine message that you brought to this conference this morning, Governor Hathaway. Thank you so much for being here.

Thank you, Mr. Rhone.

Mr. RHONE. Thank you.

The next report will be on housing, presented by Mrs. Art Buck of Cheyenne.

STATEMENT OF MRS. ART BUCK, MEMBER, WYOMING STATE ADVISORY COMMITTEE ON AGING

Mrs. BUCK. Mr. Chairman, there are over 40,000 senior citizens in the State of Wyoming, 20,000 of whom are on Social Security. We have no means of knowing what their actual income may be; however, we know in every community there are those individuals who are on the poverty level. Wyoming has been the last State to pass the Federal Housing Enabling Act, so we have a lot of catching up to do.

HOUSING PROJECTS UNDERWAY

Housing appears to be one of the major areas for assisting the aged. We want to report the following towns in the State have housing projects under way, either remodeling, reconstruction, construction, or they are finished and are leased:

Cheyenne has 360 units; Laramie, 36; Rock Springs, 59; Torrington, 12; Pine Bluffs, 14; and Sheridan had 32 under construction.

These towns have projects in what is known as the application phase:

Douglas, 12; Thermopolis, 24; Lusk, 12; and the Wind River Indian Reservations have a total of 120.

Wheatland is now in what is known as the feasibility study stage.

The combined totals of these show 807 units with a total of \$2,719,000. There are seven of these projects that have not yet been funded. We think that we have made progress since January of 1971. We hope that the future will make progress move more rapidly. Wyoming needs housing for its low-income families and for its senior citizens in order that we may emphasize their freedom of choice and the prevention of dependency.

Thank you.

Mr. RHONE. Thank you, Mrs. Buck.

The next statement will be on transportation by Mr. Alfonso Sandoval of Rawlins, Wyo.

STATEMENT OF ALFONSO SANDOVAL, MEMBER, WYOMING STATE ADVISORY COMMITTEE ON AGING

Mr. SANDOVAL. Mr. Chairman, members of the committee, people who are listening, the public:

I shall give mine on transportation. I hope everybody will hear me.

Government at all levels, Federal, State, and local, have been working to preserve the ecology of this country, but the same kind of concern just doesn't seem to be apparent when it comes to the human ecology. This sectional meeting will discuss one of the needs of the senior citizens in Wyoming, namely, transportation.

Transportation is the key to all other needed areas. If a person has no means of getting around, how can he get to the supermarket or to the doctor, and what is more, how can he go to church or his neighborhood senior citizen center or to visit his relatives or friends, or to any other programs that the community might be providing.

TRANSPORTATION—A MAJOR PROBLEM

I would like now for us all to take a closer look at what kinds of problems face the older people in Wyoming in the area of transportation. One area of concern is that fact that most older persons have a limited income which is more often not enough, too low. This means that the amount of money that they can spend for traveling is limited. A lot of times older persons cannot even afford to travel at all. For example, if something comes up at the end of the month which necessitates that the older person should travel but he is low on money or social security funds are almost gone, there is a problem. No money is left to purchase transportation services.

Even if the older person has money, how does he get around? Oftentimes services are not available or they are extremely poor or not related to the senior citizens' needs in terms of destination or scheduling. Recently rail services have been curtailed in Rawlins. This means that there are only three trains per week, three trains east and three trains west. There are no special facilities on the trains for older persons. No city in Wyoming has a public transportation system.

Very few older people drive cars which makes getting around difficult. There are economic reasons why this is so. For example, an older person might own a car but not be able to afford to pay the maintenance expenses for the vehicle, and there are physical reasons why older people don't drive. The very nature of modern day highways, the high speeds of cars, the difficulties in merging into the roads presents serious problems to the older persons whose reactions aren't always as quick as they used to be. Also, as persons get older, they suffer from physical ailments which make it harder, if not impossible, to drive.

Another area of difficulty is public transportation. Often older persons can't use public transportation because of physical limitation. For example, stepping up onto a bus is hard for one, and the design

and features of present transportation systems stress speed and complex situations beyond the diminished physical and psychological capacities of the many aged.

Rawlins has tried to meet some of these problems of senior citizens in the area of transportation. They had a service going 5 days a week where if someone needed to get somewhere, they could just call a member of the neighborhood center, senior center, and someone would come out and get them. Then the service was cut back to 2 days a week and people weren't using it. If someone got sick on Saturday, they couldn't wait until Tuesday to get someone to take them to the doctor. The reason was that funds were running out. Volunteers now provide transportation to senior citizens around the clock, but it still is not enough.

In thinking about transportation problems of senior citizens of Wyoming, I have come up with some recommendations. First, the income for senior citizens should be increased so they could either afford to utilize public transportation, for example, taxicabs, buses, trains, or airplanes, or buy their own vehicles and to continue maintaining them.

GOVERNMENT SUBSIDIZED TRANSPORTATION

Second, public transportation should be more available at a price which senior citizens could afford. This is difficult in Wyoming because of the sparse population. Bus routes between cities are not financially feasible under the present system of private enterprise because there just are not enough persons who would use them. With the help of government subsidies, buslines could afford to operate, and senior citizens could afford to ride them.

Third, the establishment of a transportation network which would be flexible and meet the needs of senior citizens is needed. For example transportation would be available for the senior citizens who need to go to the doctor's office which is sometimes 25 miles away. Transportation would be available at night when an older person wants to go to the senior centers or anywhere else. By flexible, I mean that if someone has to move and needs to transport his belongings and doesn't have the money to do this, transportation would be provided. In other words, transportation should be available to the senior citizen at the time of his or her need at a cost that he or she could afford.

Fourth, programs should be designed to provide for the safety, comfort, and convenience of the elderly pedestrians, drivers, and users of transportation systems. For example, a walkway either under the main street of town or over the main streets of the town should be provided so that senior citizens do not have to cross streets in front of rapidly moving vehicles.

Another example, public dining rooms and restrooms should be conveniently located on trains and buses and should be so arranged to accommodate senior citizens. Menus in dining cars and trains should be printed in extra large type letters, printed in several languages, Spanish in Wyoming, and the senior citizens should be able to purchase his or her meals at a reduced rate.

Another example, buses should have hosts so if an aged person has a disability which makes it difficult for him or her to board the bus, the host can assist the senior citizens on or off.

Transportation should be provided for recreational outings for senior citizens at a low enough cost so that they can use it. For example, buses that take senior citizens on picnics, shopping, to larger cities, visiting relatives, and so forth.

Another area closely related to transportation is mobility. By this, I mean how a person gets around in his own home, in stores, or other places he might be. For example, how can an older person climb the steps to his apartment; how can he get out of a bathtub safely; how can a disabled person fit his wheelchair through the doors in his house; how can he do his own cooking, cleaning, laundry, home maintenance, and repairs? Homes and apartments should be designed to meet the needs of the older persons, and home maintenance and related services should be available.

What is needed is a concentrated effort on the part of the Federal, State, and local governments, public and private organizations, and private sectors to see that the kind of services I have been talking about are made available to senior citizens.

Thank you.

Mr. RHONE. Thank you, Mr. Sandoval.

Of this first group, the next report is on nutrition and health and is by Mrs. Albert Tillman of Fort Washakie, Wyo.

Mrs. Tillman.

STATEMENT OF MRS. ALBERT TILLMAN, MEMBER, WYOMING STATE ADVISORY COMMITTEE ON AGING

Mrs. TILLMAN. Mr. Chairman, my people, and my friends: I am here to speak for the Tribe of the Shoshone and Arapahoe Tribe of the Indians in the reservation of Wind River. I have just a few comments, and I am not going to read it all.

In order to stay healthy, people need to eat a balanced diet, but there are problems which prevent older persons from eating the kinds of food they need. Many persons do not know what a balanced diet is. Many people over a lifetime have grown used to certain eating habits which often do not provide the necessary nutrients. Some people are just not inclined to read and so are not informed of the advances made in the field of nutrition. Older persons are often too poor to buy the food needed to provide a balanced meal. Food is not packaged for the convenience of the older person. Also, many older persons have problems with transportation and can't get to a store.

Physical conditions prevent some older people from eating a balanced diet. For example, older persons often wear dentures that don't fit well and so can't chew. Older people sometimes live in houses that have limited cooking facilities. For some people, carrying the groceries up a flight of stairs into their home presents a problem.

ANXIETY CONTRIBUTES TO POOR DIET

Senior citizens also suffer from diseases that require special diets and often are unable to prepare them. Many times older people who live alone are lonely, anxious, depressed, fearful or suspicious. These emotions often reduce their appetites to a point where they are no longer hungry and are not motivated to cook for themselves at all.

It is thought by experts that senility is related to malnutrition. The meals on wheels and similar programs are a beginning in seeing that senior citizens, especially shut-ins, are provided with nutritious meals. More is needed in this direction.

Food stamps are presently available to persons with low income. However, the way the food stamp program is presently operating presents some difficulties. For example, the amount of food stamps an elderly person is required to purchase often exceeds the amount of food they actually consume. In addition, food stamps may be used only for food items which excludes other household necessities. There is a stigma attached to using food stamps. We urge that regulations be changed to permit wider usage of food stamps. For example, food stamps could then be used to pay for the meals on wheels program.

There is a need for an emergency food service program that would be accessible to all those in need. Such a service would make food immediately available to those persons who are without any food.

There is also a need to educate all citizens in Wyoming as to what constitutes a balanced diet.

The key problems facing the senior citizens in Wyoming in the area of health are: How to get the medical care he needs, when he needs it, and at a price that he can afford.

Presently the health care system is inadequate both in Wyoming and throughout the Nation. For example, a good health care program would provide for regular checkups to detect any serious illness. When illness is found early there is often a better chance for recovery and the cost is much less, too.

Health care should be provided before a person becomes ill, but none of Federal or State health programs provide for preventative services. We recommend that preventative programs be a part of future Federal and State health programs.

The delivery of health services is fragmented and often there are no provisions for continuity of care. For example, an older person sees one doctor in one place for a certain ailment and then has to travel clear across town to see someone else. Services that provide for recuperation and rehabilitation are not adequate, and often there is no followup service when the older person returns from the hospital. By followup service, I mean a visiting nurse, health aids, and homemakers. There are inadequate services for the frail elderly who are not in need of round-the-clock nursing care. We recommend the health service be continuous and that followup service be provided for all citizens in need.

The key to insuring the health status of all older Americans is to remove the socioeconomic barriers that interfere with the aged person's ability to get into the health service system.

We recommend that a person receive an adequate enough income so that he can afford health care and/or that a more comprehensive health care system be made adequately available to all Americans regardless of socioeconomic status.

A closer look at what has been done so far will show that a step has been taken, but it is not enough. For example, there is the medicare program which has been disillusioning to many. Medicare now covers only 40 percent of all health costs of the elderly, and the high cost of medical care and the problems involved with catastrophic illness make medical care a problem of great concern to all but the very wealthy.

MANY SERVICES NOT COVERED BY MEDICARE

At the core of the problem is the cost of services not provided by medicare. This includes: Preventative services, including disease detection programs; out-of-hospital prescription drugs; eyeglasses and hearing aids; long term institutional care with skilled nursing care for more than 100 days; and long term care in an institution providing custodial assistance.

The Medicaid program was expected to cover health care costs not included in Medicare for people who could not otherwise afford to pay for them, but Medicaid administered by the State is inadequate. Older people cannot qualify for Medicaid unless they are so poor they cannot even meet their daily living expenses. Medicaid does not provide for the payment of the following services: Out-of-hospital prescription drugs; dental services; routine examinations; eyeglasses and hearing aids; prosthetic devices; and transportation to and from the physician's office.

For those who require nursing care, the facilities in Wyoming are equipped to handle all levels of care.

We recommend that primary emphasis during the coming years should be placed on seeking and developing alternatives to nursing home care. For example, a person might be able to remain in his own home longer if housekeeping services were made available which would include chore services, cooking, transportation, et cetera.

The kinds of health programs offered and the location of these various programs is so confusing that a coordinated system of information and referral should be developed to direct the older person to the right place at the right time.

I would like to say a word about mental health problems of the aged. Most older people suffer from loneliness, isolation, and hopelessness. Contact with person is essential in relieving these conditions.

I would like to speak briefly about the problems facing the Indians in the areas of health and nutrition. Probably the greatest problem facing the older folks is their limited income which prevents them from buying enough food for an adequate diet. A lot of older Indians only receive \$50 per month to live on. There is a program on the reservation whereby girls take the older folks into town for groceries and see to it that they take their medication. Indians on the reservation do not get food stamps. Instead, they receive surplus commodities, and their diet habits prevent them from using a lot of it.

NO PROVISIONS FOR EMERGENCY SITUATION

The picture is not so good when it comes to the health services provided on the reservation. There is a clinic, but an older person has to wait sometimes as much as 4 or 5 hours before he can see a doctor. Oftentimes a person must go on home without getting his medication, and the clinic provides no emergency service. If you miss the clinic hours, you just have to wait until the next clinic. If there is an emergency, the person has to wait until the clinic doctor has finished seeing all the patients before he will come out to the house.

People who need to go to the hospital go to the one in Lander. Often a person has to wait for several hours until an ambulance comes. Most people try to get relatives to drive them down to Lander. Those Indians

who live in Lander and have to go to the hospital must first go to the clinic in Fort Washakie to get an authorization to go to the hospital.

That is all.

Senator HANSEN. Thank you, Mrs. Tillman.

Mr. RHONE. Thank you very kindly.

Senator HANSEN. Mr. Rhone, if I may, I would like to ask a few questions of this panel.

Mrs. Meloney, you spoke about several things, the poverty level, the inadequacy of income, maintenance on the basis of the \$2,020, I believe you said, for a couple, and \$1,600 for an individual. Did your committee have any recommendations to make as to where those levels should now be fixed in light of—

Mrs. MELONEY. No, there was no amount stated. There was no amount stated, but we feel that with the inflation, that is entirely too low.

Senator HANSEN. You spoke about the desirability of forgiveness of property tax for those older retired persons living in their own homes whose incomes are inadequate to take care of all of their other needs and to pay a property tax. As I understand, this suggestion would address itself, I suppose, to State and county governments, am I right in that?

FORGIVENESS OF PROPERTY TAX

Mrs. MELONEY. That is correct. Using an example, the fact that the State does forgive the widows of veterans or allows them a \$2,000 assessed valuation exemption. If that were carried out with the aged, many could be taken off of the tax rolls entirely. We think that the Federal Government out of the income from the social security funds which now go into the Treasury should be used to repay the State and the local governments. In that manner, the Federal Government would be helping the States and the local government as well as the aged people in their homes.

Senator HANSEN. You recommended also, I believe, or rather your committee did, that you would favor automatic cost of living increases being tied to social security payments, was that right?

Mrs. MELONEY. Yes; the social security to the cost of living.

Senator HANSEN. Would these reflect the Bureau of Labor Statistics' cost of living index?

Mrs. MELONEY. That is a question I couldn't answer because I didn't make a study of it.

Senator HANSEN. We do appreciate having the recommendations from your committee on income. I think they are very appropriate, and I will say once more that if there are other comments in the audience that might be made in this area, we would welcome having them. You may mail them in if you care to. If you have time when we conclude the second panel, why, we will be happy to hear them then.

Thank you very much.

Mrs. MELONEY. Thank you.

Senator HANSEN. Mrs. Buck, you spoke about the need for additional housing in the State of Wyoming. I think you gave some detail on the number of housing units that are under construction in several of the cities in Wyoming as well as what is being planned in others.

I know I have seen figures from time to time that would indicate that in, and these are nationwide statistics, now, to which I refer, that

for each three homes for people with low incomes, only one home has been rebuilt to replace those that were removed. Would this typify the situation in Wyoming as far as you know? Of course, we haven't had very much urban renewal going in this State.

Mrs. BUCK. That is true. I couldn't say that it typifies the State, but I do know that for the length of time that we have had our Enabling Act, we certainly have made progress. In our workshop this morning, the discussion was leveled more as to how they should go about obtaining this housing. It is not an easy proposition to figure this out on a local level. People want to know what they should do first and how they should go about doing that. That is what we had more in our workshop today.

They did also emphasize, several asked about extended care facilities which actually does not come under HUD but comes more formally under HEW. As I talked with two members of the HUD group after this morning, they seemed to think there is going to be a medium line drawn between the two so that extended care facilities can be made within various States that need them.

Senator HANSEN. Recognizing the desirability, on the one hand, of retirement homes outside the city where there might be available land at a cheaper price per acre, and the possible desirability of recreation areas, and then the need for people to have ready access, as you pointed out in your testimony, to sources of supply for their needs, their medical needs, the opportunity to purchase things, to see a doctor, to have their hair done, do you have any recommendations as to where this type of building construction should take place? Would you say that retirement homes should be within the city or should they try to be on the periphery of the city?

RETIREMENT HOMES IN CITIES OR SUBURBS?

Mrs. BUCK. Personally I would prefer they be on the periphery of the city rather than within the city though I think a great many people feel they would rather be in the city. Of course, all of this involves the transportation problem which we lack in this State. I think at times you may have volunteers who are quite willing. In one or two of our retirement areas that are privately owned, they do have volunteer programs where each individual who has a car will volunteer to take so many to town each day during the week. I think that could be worked out very nicely.

Senator HANSEN. May I invite other members of the panel to raise any questions. If you have questions that you might like to direct to Mrs. Meloney, I am sure she would be happy to respond.

When we speak of transportation, the area to which you addressed yourself, Mr. Sandoval, I think you pointed out very clearly what the problem is. It is a very real problem. I happen to have been in New York City a few weeks ago as a member of the Interior Committee, and we were looking at the needs for recreation of some 1,200,000 families, none of whom own a car, and I think it ties right in with what you were saying. Obviously those same 1,200,000 living in New York with no car must have access to cheap, dependable, public transportation, and access through that transportation to a recreation area.

I had no idea of the enormity of a problem that is presented by bringing as many people together as can be found within the horizon

in one's sight. When you are standing atop the Empire State Building, there are some 25 million people, I understand, living within that area, and it is quite a job in trying to get people to places they need to be. This is especially true in recreation.

You spoke about the diminishing train service. I am aware that a number of people, families whose husband or father worked on the railroad, have passes on the railroad. Has the fact that fewer train schedules go through the State now militated against these people being able to get where they need to go and have a right to go, in your opinion?

Mr. SANDOVAL. Well, Mr. Chairman, in that respect for the pass, when an employee worked 30 years he was eligible for an annual pass which furnished the transportation free, not only in this country of ours but as well in foreign lands. That advantage has now diminished completely. For a while there, the annual passes that were given to these people who have earned them through the sweat of their brow of all these years of faithful employment were taken away from them. Later on through the efforts of the unions and the companies, which I understand now they come to an agreement whereby they could furnish the pass on a half-fare basis, and as I understand it, that is where it stands now. But still at that, that is too high.

TRIP PASSES

They did have trip passes. If you had a son or daughter going to the University of Laramie, they had trip passes where they could go and come home on weekends to save economically some money, but those are gone, there is nothing there at all, and nothing has been done. To my estimation, I don't think they will ever bring that back.

Senator HANSEN. What is your thought, Mr. Sandoval, on the location of housing for elderly citizens; would you agree with Mrs. Buck that it should be on the edge of a city or do you think it would be better within the city?

Mr. SANDOVAL. We have a problem of that that concerns us in Rawlins. They wanted it centrally located where they could probably be easily accessible to all the shopping necessities, doctors, lawyers, food, whatever it is, but that is impossible. So they have to go out and expand and when that comes in, if it does, transportation will be the problem.

Mrs. MELONEY. I would agree with that, that it should be centrally located, their housing to the shopping area, and, if possible, the libraries and so on for them to be able to have a fuller life with less inconvenience because transportation is one that we won't solve overnight, I don't think.

Senator HANSEN. You spoke also, Mr. Sandoval, about the need for design in buildings providing for the needs of older people. I think that is a point well taken. I know a good many public buildings now do require that handicapped persons, persons who must move about in wheelchairs, be provided for by ramps and by elevators that can be operated from a wheelchair. I think all of these things make good sense, and I suspect you had that in mind when you spoke about homes and apartments being designed to meet the needs of older people.

Mr. SANDOVAL. Right.

Working for the Union Pacific for a long time, we have always had meetings, at the time they were called safety meetings, and I based my assumption on that. The older citizens do need to be taken care of in safety forms.

Senator HANSEN. I think your point on menus is well taken. If they could be printed in larger type and be bilingual as well, it would be very helpful.

Mr. SANDOVAL. It is helpful in the form, too, if he cannot read or write, at least something will attract him on the menu and he can point it out and ask questions about it, while if it is in small print, he doesn't see anything.

Mrs. MELONEY. I would like to inject here that the road signs might be in pictures, also, for those coming in and as in foreign lands, it is very helpful to the traveling population.

Senator HANSEN. A very good point.

Mrs. Tillman, you spoke on nutrition and health, and I think your message was excellent in calling specific attention to our first Americans. We are proud to be represented in Wyoming by the Shoshone and Arapahoe Tribes.

I believe you said that one of the reasons for the lack of adequate balanced diet was that there was not among everyone sufficient knowledge to know what should be served, that, additionally, costs of some of the foods that should be used are too high. You spoke about the transportation difficulties of getting to and from supermarkets, and then you spoke, also, about the desirability of using food stamps to present wider opportunities for the kinds of foods that are desirable. You contrasted that with the old commodity program. I assume what you were saying is that food stamps are a much better way of insuring an adequate diet among Indian people than was the commodity food program, am I right in that?

Mrs. TILLMAN. Yes, you are right.

FOOD STAMPS FOR "MEALS ON WHEELS"

Senator HANSEN. It is my understanding, you spoke also about food stamps being used to purchase "Meals on Wheels." I understand that that has been recommended. Would you comment on that, Mr. Miller?

Mr. MILLER. I think it is appropriate to point out that the recommendation made by Wyoming with reference to this very matter of food stamp use for "Meals on Wheels" and that sort of service activity in the food area is one that has been made throughout the country at the various White House Conferences, and more particularly, to our knowledge, at hearings by this Special Committee on Aging.

Senator HANSEN. Just before you do dismiss this excellent panel, Mr. Rhone, if I may, I would like to ask if anyone has further comments that they might care to make with respect to the observations made by Mrs. Meloney. She spoke about the inadequacy of the poverty level, the \$2,020 for a couple, \$1,600 for an individual. I was interested, also, in your suggestion that we might have a forgiveness of a property tax. I suspect that would imply some sort of standardization by the Federal Government if money were to be made available to the State for supplementation of loss of its income from a reduction

in the ad valorem of property tax if it were to be expanded to include older retired persons.

Mrs. MELONEY. Yes. I certainly agree with you. As I understand it, 21 of the States already do have a reduction or have some form of property compensation, reduction for compensation, but it is not uniform. I used Wyoming's own \$2,000 to veterans' widows because we are familiar with that, and it does help, oh, \$200, \$300 a year. It also takes many off of the roll, and I think it is very much, it is worth considering. But I think it should be uniform throughout the country. The \$2,000 that Wyoming has, the legislature, over the years has allowed a veteran's widow, seems to me, a very fair figure. Now, of course, other States might disagree with us. I do think not a percentage, I don't think we should go into percentages. I think it should be a definite amount, and I feel that that would help to a great extent on taxation, particularly of the older people.

I do also realize that it would be a burden to the States unless there was compensation, and I feel that inasmuch as the interest on the Social Security funds is now going to the General Treasury—which I disagree with because the Social Security moneys are paid into the Social Security fund to benefit the aged—in this way, the interest on those securities could repay the State and the local communities for that forgiveness which I think would help all the way around. That is, Mrs. Frizzell and I have gone over this, and we decided this money that is from the securities, invested securities, of the Social Security funds should not be in the Federal Treasury. It should be used to assist the aged. In so assisting the aged in that manner, we won't have to raise the Social Security taxes like it has been. In that manner, we would also be assisting those who are paying their Social Security because it wouldn't be raised. You take the young folks today who are raising their families and educating them have plenty of expenses. I think it would relieve them if they knew that their Social Security tax was not going to be raised, immediately anyway, and still the aged could be taken care of through the income of these funds.

REVENUE SHARING

Senator HANSEN. One of the President's proposals before the Congress now is in the area of revenue sharing. He has proposed some special revenue sharing measures along with some general revenue sharing measures, the central idea being that while there is commonality of problems in each of the 50 States and in many of our communities, there are specific needs and specific problems so that you do not find any two States with precisely the same needs. In light of that fact, he has proposed that the Federal Government return to the States, through revenue sharing, funds which could be used to be spent under the direction of State legislatures, and maybe municipalities; certain amounts that could be spent as local people, local officials hopefully most familiar with the problems, might best determine. Would you comment on that proposal?

Mrs. MELONEY. I think that is very good. I think that we have to assist the States. Wyoming is very fortunate, as you know, in handling of their funds, but I know that is not true throughout the United States. Therefore, I certainly could go along with that suggestion, that the Federal Government do share with the States. I think that is a very

well taken point, but I think that the subject which was assigned was income as far as we were concerned, that we have to have help through taxation.

I mentioned on the income tax, for instance, I am a widow, and I know what I am talking about here, that I pay on the basis of a single person, my Federal income tax, and when my husband was living, we paid then on a—what do they call it, it was a joint return, but there is another word for it. I am paying a greater share, a heavier tax than I did, but I am maintaining the same home, the same standard of living as I did previously, and I feel that there should be, the people who, if they are single, OK, they are single. When you are at the head of a household, household is the word I wanted, I am at the head of a household the same as I always was, but I am paying at the rate of a single person which is heavier, and I think that is something that might be investigated.

I realize that I am asking for a whale of a lot, maybe, for a lot of these things, but I feel that income to our aged has to come through a relief on taxation and at the same time, I feel that a relief can come to the younger if we don't increase their Social Security payments any more than we have to and certainly not in the immediate future.

Senator HANSEN. Mr. Chairman, I compliment you for a very fine panel. I am sure what they have had to say will stimulate a lot of thinking by all of us.

Thank you all very much.

Mr. RHONE. Thank you, Senator.

This will end the first part of this panel, and you may take your seats now.

The next group will now approach the bench here.

All right, Senator, the next report will be on education by Mr. Clyde Kurtz, of Powell, Wyo.

Mr. Kurtz.

STATEMENT OF CLYDE KURTZ, MEMBER, WYOMING STATE ADVISORY COMMITTEE ON AGING

Mr. KURTZ. Mr. Chairman.

At the outset I would like to say that the thoughts contained in this 5-minute paper are not only mine but those people who have been working with me.

On June 3, 1971, we had a meeting of Governor Hathaway's Commission on the Aging. At this meeting, it became apparent that few facts about educational situations of our older Wyoming citizens were available. Accordingly the Divisions of Adult Education and Community Services at the University of Wyoming was asked to make a survey to ascertain the needs of our older people. The results are to be turned over to our State department of social services and to be used as a guide for future activities by policymakers, administrators, and agencies concerned with the problems of our aging. This survey is now underway. Interviews are being arranged with senior citizens by people who are concerned with education in this category.

National statistics indicate that about one-fifth of those 65 years of age and older are functionally illiterate. This probably is also true in Wyoming, and it points out the need for our older citizens to be able to read and write and to do elementary figuring so as to avoid the continued dependence on other people.

EDUCATION NEEDED FOR ELDERLY

There are also other areas of instruction needed for this segment of our population and should include education for physical fitness, income management, insurance, legal procedures, and a housing problem. Another factor should include education in the field of spending of leisure time and increasing the ability to take part in social actions that affect them, that is, the elder citizen, and to be able to contribute to the well-being of society.

Generally speaking, Wyoming citizens have been inclined to want to solve their own problems at the local level. Education of the elderly has been a stepchild of both the Federal and the State levels. The time is here, and it is happening, to make an about-face in meeting the needs of this group. No doubt there will be a need for some help from the Federal level and particularly from the Department of Health, Education, and Welfare, but resources of agencies on the local level should not be overlooked.

For instance, in the State of Wyoming, facilities of the University of Wyoming should be utilized as well as those of the seven community colleges of the State and of the public schools. These agencies can all give tremendous help in this field. Minimal financial aid will, no doubt, come from the Federal Government, but it is recognized that some of the most successful educational programs are sponsored by senior citizen centers, religious groups, and other equally important community organizations. The Little House of volunteer workers in Palo Alto is a good example. This is something I happen to know about, the new policy of the Northwest Community College in Powell provides free tuition for classes in which our elder citizens may be interested as well as free admission to senior citizens in all college events. I think it is very inspirational to see and hear the response to this kind of recognition as our older citizens are able to take advantage of these activities.

Many other State projects might be mentioned, but time does not allow. Many vital projects are in the offing; it takes time. I hope that 10 years from now we can all take pride in the forward steps that have been taken during this period. Everyone can help in making public the program or programs that will come in to being to help the educational needs of our elderly.

It has been a pleasure to appear before this hearing, and I thank you.

Senator HANSEN. Mr. Rhone, would it be all right if I asked Mr. Kurtz a question at this time?

Mr. RHONE. Certainly.

Senator HANSEN. I am well aware, as I suspect most people are, of your great background in education, Mr. Kurtz. You spoke about what was being offered by Northwest Community College in Powell in the way of tuition-free instruction for elderly persons, was I right about that?

Mr. KURTZ. Yes.

Senator HANSEN. Do you find that that offering has resulted in as many people taking advantage of the program as you would have suspected or is there a lack of motivation or how do you feel about it?

Mr. KURTZ. Well, Senator, this program is just starting this fall.

Senator HANSEN. I see.

Mr. KURTZ. I inquired before I came down here from the administrative office over at the college and asked if there were any inquiries from people who thought they might be interested. They told me that the response was very gratifying. As a matter of fact, many of them wanted to register and they didn't have the forms ready.

Senator HANSEN. Thank you.

Mr. MILLER. Mr. Chairman, might I ask a question on that point? Do you anticipate that the problems of transportation referred to by Mr. Sandoval might be a deterrent in use of these educational services as they become available?

Mr. KURTZ. Yes, I think that that is true. You see, you may not know it, but this Community College in Powell, as well as our other community colleges in the State of Wyoming, not only serve the immediate vicinity but also the county, and this matter of transportation will be a very vital thing because all over the Big Horn Basin there will be people wanting to come. The first question will be, how am I going to get there? or the second comment will be, I guess I can't take advantage of it because I don't have any transportation.

Mr. MILLER. Thank you, Mr. Chairman.

Mr. RHONE. Thank you, Senator.

The next report will be on facilities, programs, and services by Mrs. Hugh Duncan of Glenrock, Wyo.

Please try to keep your report as short as possible as time is running short.

STATEMENT OF MRS. HUGH DUNCAN, MEMBER, WYOMING STATE ADVISORY COMMITTEE ON AGING

Mrs. DUNCAN. Mr. Chairman—

Senator HANSEN (interrupting). Could I interrupt just a moment to say, Mr. Rhone, I appreciate your observation about brevity. As far as I am concerned, I am delighted to be here, and while we are aware that a number of people have a long distance to travel and undoubtedly would like to be able to leave as quickly as they can, I think this is of such importance that I would hope Mrs. Duncan would take what time she thinks is necessary.

Mrs. DUNCAN. Thank you, Senator.

I have tried to condense this, and, in fact, this is the reason I was late to the meeting because I was trying to recondense it. I still am concerned because I think it is too long, but I am presenting facts, and it is difficult to condense facts.

Senator HANSEN. May I say that whatever you have written or if you would like to add to it, can be included in the record.

Mrs. DUNCAN. Thank you very much, Senator.

We have—the boys helped me—we have eliminated some of it, but it is on the record here, so I will read what we kept on. It will be more or less in outline form, not complete sentences, so I hope you will bear with me.

My program touches on all eight of the others which, of course, makes it quite difficult to condense to a short talk.

Facilities, programs, and services, which include all of the subjects that the panels are talking about. Facilities are the means whereby the policies and the social plans of these other programs for the elderly are developed, and we hope will be realized.

The programs are the arrangements of the professional personnel and employees who are necessary to perform certain functions and who are interested and considerate of the elderly. I would like to add here that hopefully there will be many young people going into this field which, I believe, will be opened up wide, that these young people will be interested in the elderly because in this manner, they can help our needs.

FACILITIES SHOULD RESPOND TO ELDERLY NEEDS

All programs should be readily available and with regular hours for the elderly.

The next is services which are the end product and delivered to the older person through the first two, programs and facilities. These services should be responsive to the needs and wishes of the elderly as well as those suggested by professional experts. Resources is the last and necessary in order, of course, we all know we have to have money to do anything and is necessary so all of these above goals may be effective. But at the present, of course, a gap exists because I don't believe the funds have been sufficient, are sufficient at the present time.

In the process of organizing all of these various programs which have been and will be reported to you, relationships between the goals and the means of reaching them may be lost instead of delivering what the program is meant to do. The goods and the services to the elderly, there is a danger because of insufficient funds that the program merely serves the needs of those who administer it. You have to set up an administration to administer the program, but if there isn't enough funds, there is nothing to come down to meet those needs.

Four guidelines are necessary. Accessibility, and we have discussed this already, availability, and we have discussed this, too. It must either either be in the center where people can reach everything or transportation provided. I was going to suggest at this point, too, that this transportation could be a built-in service, just as the janitorial service or the nursing service. Responsiveness, a balance between what experts aim at and what we need, and these should be the things that we ourselves see as major needs because if we don't get these things, we are not going to use the facilities. Our needs will make us use the facilities and vice versa. Adequate resources must be realistic. A limited objective with enough funds is much better than a broad objective and no funds to, well, it falls flat on its face, in other words.

Now, how do these programs develop in your communities? In real life they don't develop in an orderly fashion, so most families just wait until the need arises. Various groups usually will step in to provide these needs if they see a profit or a means of making a living, which is our free enterprise system. This would be the commercial interests who do it for a profit. The volunteer groups, such as the churches and the various civic clubs, chamber of commerce and so forth, and the public facilities, but there must be coordination and cooperation between them.

The thing that each community would want to avoid would be the fact that the various groups might tend, without thinking about it, to promote their own interests above the interests of the elderly.

GIVE ELDERLY MORE RESPONSIBILITY

Citizens participation.—There is not enough participation by the elderly in the programs which are presently attempting to serve them. Perhaps the reasons are more responsibility should be given to the elderly in programing as they know their own needs. Senior citizen centers should be staffed and operated, not entirely, but by a greater percentage of the elderly than at present. I don't know of an elderly person here who doesn't like to see a young, good looking or pretty face, so we have to have the young around us, but we do feel that we should have a greater representation on these groups.

Also, minority and ethnic groups would also serve on boards, staffs or as volunteers just as all of us wish to.

Next comes the choices of program by the aging in your community, what programs would they like to have promoted, where the groups are mixed, the age groups are mixed, attention to the elderly seems to decline. To avoid this, there could be an adjustment of funds so that the activities for this group would receive an amount in balance to their numbers or needs or a percentage as a group. In this manner, if they are properly funded like the youth group or the middle groups, then there would be perhaps a better chance of getting them to be active.

Housing, availability.—A freedom of choice is cherished the world over, especially by Americans, but limited funds limit freedom of choice. Inasmuch as this has been discussed thoroughly by our chairman on housing, I will go no further.

To date, research on specific needs for the elderly deals with problems and issues involved in developing the machinery of my program as they relate to special needs, such as the various chairmen are presenting in housing, income, et cetera.

In order to reinforce all these programs my various colleagues are reporting on, there are three important things to reinforce them, and you can remember this when you are working with them in your communities. The three things are social services, consumer protection, and legal services. Human factors which affect individuals or groups are very important, and oftentimes the human factors are overlooked among the elderly. You say, oh, well, they are getting old, so what?

Personnel assigned to cope with and identify these factors are essential. Naturally they must be professional people. Their activities come under social services in two categories. These categories are shared by psychologists, psychiatrists, social service workers, psychiatric social service workers, well, I don't know all their names, but they are all fine people.

PERSONAL CONTACT NECESSARY

The obligations, also, of these individuals are counseling people who have personal problems, counseling those individuals whose social and economic situation prevent them from making effective use of facilities and services. How else are we going to know that Mrs. Jones needs a ride downtown unless someone contacts her. If she is isolated and doesn't have any relatives, the social workers can contact these individuals to find out why they are not using the social center. A broader function is that social needs are met with more ease.

For example, health services are used and sought but also many nonmedical factors are involved, such as family conditions, personal attention, cultural patterns, and so on. Every need of the elderly has social and personal effects that must be considered. Oftentime they will sort of withdraw and maybe you have almost gotten them to say what it is that is bothering them, and then they quit. Experienced personnel are essential to the success of meeting these needs.

Consumer protection.—In a free society, needs of all are met by buying goods and services on the open market. I don't need to tell you that this is what has made a wonderful America. Good value from purchases affects the quality of the very lives of the elderly because of their income. Other reasons are, beside low incomes, investment swindles, physical and mental problems, unnecessary home repairs, dishonest contractors, and housing that isn't proper for the elderly and so on. I could go on and on. People need to be protected when they become older from this type of thing. I think perhaps they tend not to do anything about it. It is just the same as hesitation in asking for legal services, in that they just cannot admit the fact that they were taken, and they accept the injustices rather than complain about it.

The actions that we hopefully will see come up in this next year, particularly if we as citizens, young, and so on, fight for it, ask for it, demand it, is the present or the future action necessary for consumer protection. President Nixon's message to Congress in 1971 asked the following:

A product safety act, consumer fraud prevention act, fair warranty disclosure act, consumer products test method. Also, he proposed broadening responsibility for the Federal Trade Commission and to broaden education programs and other measures, and we definitely should support it. Voluntary action, such as a Ralph Nader group is also helping in consumer protection and will produce more effective measures.

LEGAL SERVICES FOR ELDERLY

Our last group is legal services. Legal services are called for or are really needed by the elderly in more situations than any other group. A lawyer's help is needed for contracts for house repair because many dishonest people step in and overcharge, sale or leasing of their property, housing code violations, condemnation of property, property and inheritance tax. His assistance is also needed against loan sharks, danger of being declared mentally incompetent when they are not, making of wills, and so on.

Another reason besides feeling inferior about calling a lawyer is that they can't pay or lack of awareness of the need. They just overlook it. The legal services also include law reform. To advance the interests of the elderly, the Office of Economic Opportunity, the lawyers throughout the country, law school program, and they—I believe this was started by the American Bar Association. By the way, one of the television programs, I believe "The Lawyers," is based on this, and other activities have been sponsored by lawyers. These assist the poor, the consumer, as well as the elderly.

Law enforcement activities include litigation, drafting of model laws, advocating new legislation to benefit the elderly, abolishing old laws to give better protection to the disadvantaged.

The basic services for law reform would be that, well, for one thing, there is still not enough legal services for the elderly. The lawyers are performing a larger role in advancing the interest of the elderly by helping groups of elderly to organize buyers clubs. I thought that was tremendous. Making housing arrangements for them, developing business opportunities, effectively advocating administrative and legal reforms so that organizations are becoming more responsive to their needs and rights. Lawyer services to individuals, individual older people, have resulted in increased benefits to thousands. We should realize that the lawyers do this gratis to hundreds and thousands of older people. They can't all do it, and they can't all accept nonpaying clients, but they do more than their share. Adequate legal service for the elderly must continue.

It has been told to us that our program is going to be called Action at the Washington Conference, right?

Mr. RHONE. Correct.

Mrs. DUNCAN. I am really looking forward to it. One elderly cowboy in Glenrock said to me, "Now, Mrs. Duncan, I want you to remember this, I am not growing any younger, so git to gittin'." There is your answer.

Senator HANSEN. Thank you very much, Mrs. Duncan, a very excellent presentation.

Mr. RHONE. Thank you, Mrs. Duncan.

The next report will be on employment and retirement roles by Mr. Willard Beck of Sheridan, Wyo.

Mr. Beck.

STATEMENT OF WILLARD BECK, MEMBER, WYOMING STATE ADVISORY COMMITTEE ON AGING

Mr. BECK. Mr. Chairman, in the area of employment and retirement roles, the most obvious need is to preserve identity of the individual and to save his skills. The majority of retired people of our State had inadequate preparation for the actual time of retirement. We have an opportunity at this Governor's conference and the White House conference, to make this adjustment easier for those who follow us. Pre-retirement counseling relating to retirement adjustment will encourage and develop broader planning opportunities and positive attitudes in the preparation for the challenge of retirement living.

In the absence of availability of these services excepting through private business organizations, we recommend that Wyoming utilize the resources of the public schools, the network of community colleges, and the University of Wyoming in providing leadership training for retirement preparation and for vocational training and rehabilitation where indicated. This recommendation employs a need for administration backing and financial support. Unfortunately, counseling will not solve all the problems related to the retirement incomes below the level which employment normally supported. The cost of retirement has increased appreciably through the years.

SKILLS OF ELDERLY SHOULD BE UTILIZED

The employment needs of older retirees, those of the past 55 year age group who are unemployed, require concerned and creative efforts

from these conferences. Employment for older workers is a mutually beneficial resource of our society. This group should prepare to release younger workers for industrial employment where they are most valuable. Older workers could then serve as replacements in such areas as clerks, waitresses, warehousemen, caretakers, guards, deliverymen, checkers, janitors, cooks, housekeepers, babysitters, health aides, and other service jobs. It is recommended that educational opportunities should be made available for retraining and for refresher courses as preparation for new roles in employment. We urge consideration of employees' skills and experience in job placement and training.

In conclusion, we advocate placing more emphasis on keeping elderly people active and independent rather than permitting them to waste, needlessly so, their energies and skills.

This Subcommittee on Employment and Retirement Roles recommends that: (1) Job opportunities for older workers may be expanded; (2) the scope of preretirement planning be enlarged; (3) discrimination against employment for older workers which arises as a result of their increased age be alleviated; (4) research in the field of aging and financial support for research be increased; (5) aggressive use of adult educational programs for older Americans; (6) we urge continued assistance from the State of Wyoming in implementation of all programs for older citizens; (7) public relations films and instructional materials for use by the immediate sources and oriented to employment of older workers should be promoted by every community.

We request support for AARP, NRTP and the National Council for Senior Citizens, and other organized groups for elderly Americans for equal employment opportunities for retired job seekers. We advocate expanding and adding to the part-time Federal employment programs, such as Green Thumb, Foster Grandparents, R.S.V.P., and others.

The following recommendations were drafted at the sectional meeting of the employment and retirement roles needs area at the Wyoming Governor's Conference in Casper, Wyoming, on August 13, 1971:

No. 1, that older job seekers who receive social security benefits may be permitted to earn, without penalty, more than \$1,680 annually currently established by law;

No. 2, that adult basic education be more readily accessible to those needing or desiring to enroll in the program, and that preventative counseling and educational services be designed to aid prospective dropouts;

No. 3, that preretirement counseling be encouraged in industrial and other employment fields for employees between the ages of 40 and the retirement age;

No. 4, that a nominal charge be made for educational and training courses established primarily to assist the older generation;

No. 5, that the relatively new ecology programs be designed to utilize the experience and knowledge of older citizens, and they are urged to use this resource;

No. 6, with the knowledge that a vast reservoir of skills accumulates and remains unmarketable in our retired population, it is recommended that each community develop an enrichment center where this knowledge may be shared with the general population. Such programs might

be in the area of recreation, history, archeology, ecology, and arts and crafts, among others.

The needs area in employment and retirement subcommittee members were: myself as chairman, Willard R. Beck, V. R. Frizzell, and Mrs. John Lucas, Jr. I can say they did a fine job and helped me work out this program.

Senator HANSEN. Those are very excellent recommendations.

Did you have any figure you would like to recommend in lieu of the \$1,680 one that you mentioned?

Mr. BECK. No; but I believe there has been a number of figures put out by some of the different organizations. They run all the way up to as much as \$3,000 and some cases of no limitation at all. It might be well to have the limitation, but still I personally have seen a number of figures presented, the AARP and NART have done that, and I know you will find it in their proposals.

Senator HANSEN. Thank you.

Mr. RHONE. Thank you, Mr. Beck, for your report.

Last to give a report will be on spiritual well-being by Mrs. Carolyn Ellis of Torrington, Wyo.

STATEMENT OF MRS. CAROLYN ELLIS, MEMBER, WYOMING STATE ADVISORY COMMITTEE ON AGING

Mrs. ELLIS. Mr. Chairman, your staff, all interested persons.

What do we mean by spiritual? Each of us would define spiritual a little differently, but whatever words we use to describe it, we all know in our hearts what it means. When we are in good spiritual health, life has value and meaning. When the spirit sickens, nothing else matters.

In the ideal life, all older people would have meaningful roles, and they would be assured of fulfillment and a satisfying old age. In the world as it is, maintaining spiritual well-being is particularly hard for older people. They suffer many losses, loss of loved ones, loss of roles and status, loss of income, and often loss of health.

Much of the accumulated wisdom of the elderly can no longer be used for guidance of the young. The world has changed too much. One consequence of the speed of change is that value, habits, and behavior learned in their youth are no longer the ones they are expected to have in the society in which they are now living. While each individual must acquire this for himself, the society he lives in influences his ability to do so.

Religion plays a big part in helping the aged to adjust to what seems like a whole new world. However, there is a distinction between religious and spiritual. A spiritual need may be met by a religious act, such as praying or receiving holy communion, but many spiritual needs are met by a warm and sympathetic relationship. Often a spiritual need is best met by dealing with a physical need. A member of the clergy may feel he is doing a good deed by using a prayer book and reading a chapter from the Bible, when what the person really needs is a heart-to-heart talk and listening to their needs and inner feelings.

MAKE SENIORS FEEL WANTED

Therefore, our thoughts turned to ways in which we as well-meaning citizens can help those in our own communities. First, we must

make them feel they are definitely still a part of society and must not shut themselves away from the public. In other words, we advise giving them jobs on local boards as well as State boards. I remember how thrilled I was when Governor Stan asked me to be on the advisory board. It just made me feel 10 years younger, and I think those things are a spiritual lift.

We must provide transportation so they may resume an active part in the church of their choice instead of having to attend the little church around the corner.

Telephone calls made daily to a shut-in will give an untold spiritual uplift. May I bring out a few of the suggestions that we have incorporated in our Golden Manor in Torrington?

As you know, this was a \$396,000 project, and we borrowed money from HUD in San Francisco at the time. Senator Hansen and Gov. Stan Hathaway were both very instrumental in helping us get our loan. We made a survey, of course, in our town, found that 700 questionnaires were returned, and 300 of them said that there was a definite need in Torrington for such an institution. I shouldn't call it an institution, such a project. The ministerial association has assumed the responsibility of holding a church service with music from the choir for those unable to get to church. Incidentally, we don't pass a collection plate at those meetings.

The public is invited to play bingo with the residents twice a month in the big social room with refreshments served afterwards. We have recently established an arts and crafts project for those who wish to paint and do fancy work.

Meals are available for those who are not able to—suppose a wife is sick and the husband doesn't cook for himself, he goes across the road and meals are available at the hospital cafeteria. They may take all three meals there. We have made arrangements for all three meals to be taken there if they choose.

Grocery delivery is made once a week. They call in their grocery list on Thursday morning; by Thursday afternoon it is delivered free of charge, and the manager takes the supplies to each person.

A group of 4-H girls planted 22 dozen red petunias around the manor.

The Eastern Wyoming College had a series of adult classes and over 50 people benefited from these. They did not all come from the Golden Manor, but about 50 people enrolled.

Let's all go back to our individual communities, look around to see what we can do to raise the spirits of some lonely elderly person who lives only in the memories of the past.

To shorten my talk, I would just like to leave this thought with you. Old people need a dream, not only a memory. Old people need a vision, not only recreation. It takes three things to attain a sense of significant being, God, a soul, and a moment, and the three things are always here. Just to be is a blessing; just to live is holy.

Thank you.

Senator HANSEN. I was wondering what you might say, Mrs. Ellis. Had I been assigned the topic to which you addressed yourself, I am not certain how I might have approached it, but let me say that yours was a most eloquent statement. I thank you very much.

Mrs. ELLIS. Thank you.

Senator HANSEN. At this time, and concluding the presentation by this panel, we will now hear from the chairman of the Wyoming State Advisory Committee on Aging, Mr. Rhone. He will discuss the needs among the black aged.

Mr. Rhone.

STATEMENT OF ROBERT "BUCK" RHONE, CHAIRMAN, WYOMING STATE ADVISORY COMMITTEE ON AGING

Mr. RHONE. Thank you, Senator.

I would like to preface my remarks by stating that I based my testimony on material prepared by Dr. Jacquelyne J. Jackson, Ph. D., of the Duke University Medical Center, Durham, N.C.

My topic is not very long, knowing that time is quite of essence here, but I am of the opinion that being both old and black places one in double jeopardy. To be old and black and female and poor, and a considerable number of black aged fall within that latter category, places one in quadruple jeopardy.

I believe strongly that much which needs to be done to improve the lot of many black aged falls within areas of strengthening considerably their retirement incomes, of strengthening far before retirement their wage and salary levels, of improving housing conditions, and abilities to purchase decent housing, and maintain it adequately over a period of years, of having greater access to available resources including those of health, and on being welcomed more freely into the larger American society. I believe that much more needs to be done than is being done, and that many problems confronting many, but not all, black aged are directly attributable to discrimination based on the basis of both race and age.

It is my considered belief that many black aged in their very late years may well be considered a highly elite group. They are more likely to be in somewhat better health than their non-black contemporaries. They are much more likely to have made better psychological adjustments to aging, and certainly could teach many of us a great deal about social adjustment, including budgeting adequately upon the basis of extremely limited funds.

Increasingly, however, with the advent of Medicare and other provisions tending to increase the probability of blacks living somewhat longer than they normally would, it is quite likely that we can anticipate changes in the health status of many older blacks. For example, although institutionalization among most blacks is extremely limited, it is likely that their rates of institutionalization in the years ahead may begin to approach those of whites. It may be that many types of housing programs and patterns set up for white aged may not be conducive to continued maintenance of the usually strong kinship ties found among American black aged and their families.

MANY BLACKS ARE CHILDLESS

I am not unmindful, too, of the fact that many black aged born around the turn of this century were childless, that is, that they had no children, and hence, in their later years do not have children to provide them with instrumental and expressive assistance. Still, I do know that, to the extent possible, most black aged still rely upon their families as

the first resource in time of need, and we know that most black family members respond.

We know that blacks tend to think of themselves as being older at an earlier chronological age than do whites. We know that blacks tend to die earlier than the whites. Recent data have also suggested that black males at least may experience earlier physical aging than do white males. For example, a black male at 60 years may have the physical body of a white male who is the age of 69 years.

From my experience in Wyoming, the black aged have not been faced with any problems that are of great value. For instance, nursing homes have been a haven for a few that know of and who are quite contented. Thank you very much.

Senator HANSEN. Let me compliment you, Mr. Rhone, on the final panel presentation. That was an excellent statement you made, and I know that it will be ready by the members of the committee with a great deal of interest.

Looking ahead in Wyoming aging activities, I would like first to call Dr. Audie Blevins, of Laramie, professor, Department of Sociology, from the University of Wyoming, to come forward and make his presentation.

Would Mr. Stanley Torvik also come up with Dr. Blevins.

Buck, before you leave here, let me extend a special thanks on the very good job you have done in organizing this panel. It has been very well handled, and I thank you, sir.

Mr. RHONE. Thank you, Senator Hansen. It has been a privilege to serve on this panel. I appreciate it to the highest. It is our first event in this field. I hope that you have overlooked what little minor mistakes we made, but we are working hard, and we will correct them as we go along.

Thank you.

Senator HANSEN. You are doing a great job.

Dr. Blevins.

**STATEMENT OF DR. AUDIE BLEVINS, ASSISTANT PROFESSOR,
DEPARTMENT OF SOCIOLOGY, UNIVERSITY OF WYOMING**

Dr. BLEVINS. Mr. Chairman, this is a report on a study that is just beginning now in the State of Wyoming. The social indicator survey for aging in Wyoming is a joint venture by the Department of Adult Education, Community Services, the Department of Sociology, and the Department of Social Work in the University of Wyoming. The project is being funded through the State Department of Social Services and Adult Education Division of the University of Wyoming. The study is part of a national effort to determine the current status as well as needs of older Americans. Data will be obtained through the use of a questionnaire developed by the Institute of Inner Disciplinary Studies of the American Rehabilitation Foundation.

The questionnaire development was funded by the Administration on Aging, Social and Rehabilitation Service of the U.S. Department of Health, Education, and Welfare. The questionnaire was pretested by Greenleigh Associates of New York. The survey will consist of about 1,000 interviews. Respondents will be selected on the basis of a

“weighted cluster” sample. The “weighted cluster” sample will guarantee that citizens of all counties of Wyoming will be included, at the same time will insure representatives across the State.

In addition, the study will utilize a somewhat unique methodology, the use of persons over 65 to interview other individuals over 65. Efforts are currently underway to recruit volunteer interviewers. Contacts have been made with the State’s retired teachers association as well as other associations of retired persons.

By the way, we would like to give our thanks for the good response that we have had today so far in recruiting interviewers. Interviewers will be paid a nominal fee of \$5 as well as transportation costs for interviews completed in rural areas.

The questionnaire is directed at the following informational areas: Housing, which will include such things as comfort, privacy, neighborhood desirability;

Second, social relations and activities;

Third, life satisfaction;

Fourth, health indicators;

Fifth, nutrition indicators;

Sixth, economic indicators; and

Finally, some measure of independence.

Questions are oriented at both objective and subjective conditions of needs of persons over 65. Additionally, the schedule provides demographic information.

PERSONS 65 OR OVER ON UPSWING

This study is important in Wyoming because persons 65 or over increased from 25,745 or 7.8 percent of the State’s population in 1960 to 30,199 or 9.1 percent of the State’s population in 1970. This indicates that the State as a whole grew about 0.7 percent from 1960 to 1970, but the proportion of individuals over 65 grew about 20 percent. Also, 15 counties lost population between 1960 to 1970, whereas only two counties lost populations of persons 65 or over from 1960 to 1970. Consequently it is vitally important to accurately determine the current status as well as future needs of a growing segment of the Wyoming population.

In summary, this study should provide an overview of the objective and subjective needs of older citizens in Wyoming. Also, the study should provide clues as to geographic areas in the State where certain needs are critical, that is, economic health, and so forth. This information along with information acquired by other States should provide a useful picture that pinpoints deficiencies and needs of persons 65 or over in the United States.

Thank you.

Senator HANSEN. Thank you very much, Dr. Blevins, a very excellent statement.

We will now hear from Mr. Stanley Torvik of Cheyenne. As I said, he is the director, adult services, Wyoming State Department of Health and Social Services.

Mr. Torvik.

**STATEMENT OF STANLEY TORVIK, DIRECTOR, ADULT SERVICES,
WYOMING STATE DEPARTMENT OF HEALTH AND SOCIAL
SERVICES**

Mr. TORVIK. Thank you, Mr. Chairman.

Inasmuch as the bulk of the testimony today has been devoted to the unmet needs of the senior citizens of the state, I would like to alter my presentation slightly and concentrate on the current activities of the aging program throughout the State.

TITLE III PROJECTS IN OPERATION

Community projects, funded in part by grants under title III of the Older Americans Act of 1965, are currently operating in eight of Wyoming's communities. Determination of the need for these projects was made in large part by senior citizens at the local level in hearings and other meetings in which the elderly were given the opportunity to speak out concerning the need for particular services at the local level.

In our State, meals projects are in operation in Laramie, Cheyenne, Casper, and the Saratoga encampment area. These projects provide food and social contact for those who would otherwise encounter considerable difficulty in providing meals for themselves.

Senior citizens centers of different types are operating presently in Sheridan, Rock Springs, Green River, and the five-county area served by the Northwestern Wyoming Community Action program which is headquartered in Thermopolis. Services provided at these centers, funded partially under title III, include recreational and social activities, needed transportation, visitation and telephone reassurance, hand crafts, information and referral services assistance with problems related to housing and other personal needs and various other services designed to meet needs that have been identified by senior citizens in each locality where a center operates.

The implementation of these projects during the first year of our program's operation, I believe, indicates two things, one, that a need indeed does exist in our State for more services for senior citizens, and two, that we do have an interest among the senior citizens themselves to develop and implement these programs.

As you are well aware, Senator, 75 percent of the funds for these programs is Federal money. The remaining 25 percent is community, local community money. In an area such as Wyoming with a large geographic area and a relatively sparse population, it is frequently very difficult to secure the 25 percent matching in order to implement a program of sufficient size to meet that need.

I would, therefore, recommend that regulations concerning title III of the Older Americans Act be altered if at all possible so that block grants of some type could be made to these areas of the country, or the in-kind matching provisions be altered so it would be easier to secure projects in these areas.

The State advisory committee on aging whose members were appointed in May of this year by Governor Hathaway has already responded to the opportunity to represent Wyoming's senior citizens on a statewide basis. The advisory committee represents all segments of Wyoming's elderly on a geographic as well as a social and ethnic basis

and serves to advise and direct programs provided for senior citizens.

Many needs have already been identified by our senior citizens in recent months among which are low income housing problems, lack of transportation, inadequate health care, and many others we heard about today.

INCLUDE DRUGS IN MEDICARE AND MEDICAID

I would like to mention very briefly one segment of the health care problem. In the recent years, it has become increasingly expensive to purchase prescription medications. Neither Medicare nor the Wyoming Medicaid program provides any assistance for purchasing prescription drugs. The only program that presently exists is operated through the county department of social services, and that is exclusively county and State money. I believe that Medicare and, if possible, Wyoming's Medicaid program should be expanded to include drugs.

We feel that through the strength that organization provides, the aging in Wyoming will continue to be heard and that programs to serve them will be developed to serve that need.

Thank you.

Senator HANSEN. Thank you very much, Mr. Torvik, and Dr. Blevins, for a very excellent presentation.

We have now heard from the scheduled witnesses, and it is time to hear from you in the audience. A microphone is being placed at the front of the aisle on your right. If you care to make a statement, please take a place now at that microphone.

While you who wish to make a statement move to the microphone, I would invite your attention again to these yellow forms that are at the back of the room.¹ If you prefer to write your observations, you may use that form. We do want very much to hear from each of you.

I might add that Dr. John W. Hanks, professor of the Department of Social Work at the University of Wyoming, has prepared a statement which will be included in the hearing record at this point.

(The statement referred to follows:)

PREPARED STATEMENT OF JOHN W. HANKS, PROFESSOR, DEPARTMENT OF SOCIAL WORK, UNIVERSITY OF WYOMING

Wyoming's senior citizens have a basic need and problem: their lack of political power as it might focus on the other basic needs of the aged.

This lack of influence specifically focussed on aging needs is sharply illustrated by the following fact: Wyoming was one of the last two states in the United States to implement a statewide planning agency under the provisions of the Older Americans Act.

Wyoming's senior citizens are undoubtedly active in both political parties. However, this statement is *not* addressed to partisan political activity. Rather, the need is for influence, on a non-partisan basis, in the political processes of both parties and on governmental operations at the community, state and federal levels.

Although Wyoming's senior citizens constitute only about 10 percent of the total state population—less than 40,000 individuals in a state of about 335,000 residents—their actual voting strength is much larger than this ratio. Assuming that they follow the national trends, their minimum *voting* strength is 15 percent of all voters who actually turn out to vote in elections.

Assuming that Wyoming's aged would vote solidly on any issue or candidate *directly* affecting their interest, their vote could easily determine any close or moderately close election and even most more widely divided elections.

¹ See appendix 3, p. —.

It is beyond the scope of this statement to suggest very specifically how Wyoming's senior citizens should make their political influence felt more effectively. It is obvious, however, that they should continue and should expand their participation in *both* political parties.

Wyoming's aged have many fundamental needs: income, medical care, housing, transportation, recreation, and protective and supportive services. However, none of these needs will be adequately met until the aged themselves are organized to make their political influence felt. Such influence is related specifically to the need for power in all major decision-making situations at all levels of community organization and governmental processes at local, state and federal levels.

The organizations of the aged in Wyoming must identify and support both issues and candidates that are clearly related to the aged's own interests. Then, and only then, will some of the basic problems of the aged begin to move toward concrete solutions. The aged need to gain organizational know-how and to overcome any inertia, apathy, or other resistance which now prevents having their full influence felt.

In achieving this goal, Wyoming's aged need the help of their political and community leaders, as well as their helping professionals.

Senator HANSEN. Those of you who have a statement to make will be heard. I would ask that you identify yourself for the record, and we will start with you, Mr. Edwards.

STATEMENT OF STANLEY EDWARDS, LARAMIE, WYO.

Mr. EDWARDS. My name is Stanley Edwards from Laramie.

Senator, just one suggestion I would like to make. I have discussed it with you. This suggestion I have also discussed with Governor Hathaway, and that is the problem of nursing homes (not rest homes), in the State of Wyoming. My suggestion is this, I hope that a suitable Federal investigation can be made either by your committee of the Senate or by certain people from Health, Education, and Welfare to eliminate and correct this situation whereby 10 of the 11 nursing homes in Wyoming are not certified federally, which means, in other words, that most of us here cannot use our Medicare for service in a nursing home.

NURSING HOMES SHOULD BE CERTIFIED

I can tell you a personal experience. A member of my family, not myself, was unable to use a nursing home because it was not certified. I request that something be done. These nursing homes, although privately owned, are not serving the public under this condition.

I have one other brief suggestion, and that is in these discussions concerning aid to the elderly citizens, there is the need for someone to take them to buy groceries. The very last person to speak said that in her town, they at least once a week, had delivery of food products. I should like to say that for over 50 years, I always have patronized a grocery that had delivery, simply for convenience. I will say to members of this committee and others that the groceryman, instead of worrying so much about competition with the big outfits that have moved into all our cities and towns, somebody should establish a reasonable delivery program, for all citizens as far as that is concerned, but especially for the elderly.

Thank you, Senator.

Senator HANSEN. Thank you very much, Mr. Edwards.

May I say that the President has expressed concern on numerous occasions over nursing homes, and I am certain that attention will be given to the interest that you have expressed.

Mr. GILBERT. Thank you, Senator Hansen, I appreciate this opportunity.

Senator HANSEN. Would you identify yourself for the record.

STATEMENT OF HAROLD GILBERT, SHERIDAN, WYO.

Mr. GILBERT. I will get around to that. I appreciate this opportunity to appear here.

My name is Harold Gilbert, and I am from Sheridan, Wyo. It is such a beautiful place and the environment is so fine that people seldom get old up there.

LONG, HARD LOOK AT FUTURE APPROPRIATIONS

I have been amazed at the report here of the need of welfare and the poverty that exists. The situation struck me as I was on this group on income where the welfare people are having so much trouble and so on, and, of course, with all of our groups, we are all asking for more, we want more, but we don't want any more taxes. As I pointed out there, you can't have your cake and eat it, too. If you are going to have more appropriations and more money, you are going to have to pay for taxes for them. We don't want any more taxes, so I have this suggestion, that the Senate and the House should think twice before they vote for such things as protection of Lockheed—and I am very happy that you voted down the SST—and that other enterprises of this nature should be very carefully thought out, to cut foreign aid to the very minimum, to weigh very carefully the value of more trips to the moon. Billions of dollars are being used, and we have been to the moon several times. We have poverty, and we have a great need in this country, so I think that more trips to the moon should be very carefully examined. Then curtail or eliminate some of the marginal programs that we now have and make sure that any bill has special merit. Look deep into the cake and cut out the frosting and all these extra things.

I think that inflation is the major problem facing senior citizens, there is no doubt in my mind. I can remember when our national debt was just \$17 billion, and when we didn't have to make out income tax, and I started to live then. Now the money that I have saved doesn't amount to much. I think that inflation should be stopped one way or another; if it takes price controls, let's have them.

Thank you very much.

Senator HANSEN. Thank you very much, Mr. Gilbert. You are a realist, and we appreciate your observations.

STATEMENT OF KENNETH MORGAN, ROCK SPRINGS, WYO.

Mr. MORGAN. Senator Hansen, members of the committee, ladies and gentlemen.

First I will inform you I am Kenneth Morgan from Rock Springs, Wyo. I am the operator of three nursing homes in this State. As of

this June, I am the president of the Wyoming Association of Licensed Nursing Homes.

I am most happy that Mr. Edwards brought up this point in regard to nursing homes. It is one I am very close to. Instead of it being 11 nursing homes not being certified by the Federal Government for Medicare, of the 20 nursing homes in the State, none of them are certified as extended care facilities. We have some six or seven facilities in the State that were certified at one time. Today there are none. The last three to be decertified was effective November 1, 1970, and these were the three facilities I operate. Prior to that, the one in Sheridan was decertified June 1, and the others all prior to that.

VOLUNTARY DECERTIFICATION OF NURSING HOMES

Might I say it was not as a result of Federal action or State action that these were decertified. These were all decertified for Medicare by voluntary action on the part of the operator. Again, it is the same as in any other business, you operate so long at a deficit and you either take action or you close your doors and you don't operate. Unfortunately, this is the case with Medicare. Medicare is a program passed by the Congress which had great ideals and it was a good program. Unfortunately there were greater costs than anticipated by the Federal Government. Of the patients transferred from the hospital to the nursing home for the purpose of receiving Federal benefits under the Medicare program, in my three facilities, and as far as the other operators in the State, their percentage ran about the same, but of those transferred from the hospital to the nursing home by the doctors for the purpose of receiving Medicare benefits, over 70 percent of these patients were turned down. They were not turned down by the facility, but they were turned down by the utilization review of the people who administer the program, that is, at the Federal level. The Blue Cross Association administers it in Wyoming, they are the ones responsible for payment. When the billing went in, they would come back for many forms. After about 3 months of waiting for the payment, then they would come back and inform us that this individual, in fact, was a custodial care patient and not in need of skilled nursing care. Many, many cases, unfortunately, this patient had died before we ever got the report back from the Blue Cross Association.

The cost of Medicare was so great to the nursing home people that they were forced financially to drop the program. They could not continue on with it. The only facility in the State today that does have ECF beds is Atronicani Hospital here in Casper. They have 20 beds certified as ECF. There are no nursing homes in this State. I held on better than 6 months beyond what I should have. It cost me a lot of money, but I felt there was a service that needed to be rendered to the community so I did retain Medicare.

Incidentally, during this time, the State individuals and the State health department urged me to drop it. In fact, some of the Federal people from the regional office in Denver urged me to drop it. They said it is not feasible for a nursing home to be in the extended care business. I understand there are plans to revamp the Medicare program, but until they do, I doubt if you will see any ECF's in the State of Wyoming in nursing homes.

MEDICARE DROPPED BY FLORIDA NURSING HOMES

Going even further, in the State of Florida, all of the nursing homes in the State of Florida that were certified as ECF's dropped Medicare at the same time, and this happened about 8 months ago. The American Nursing Home Association has encouraged all operators to further evaluate their participation in the Medicare program. This is something that is beyond the medicare or beyond the nursing home's purview.

As far as an investigation of the nursing homes in the State of Wyoming, believe me, as president of the association, I would welcome it and I would encourage it.

The President made some statements here some month and a half ago, I think, in regard to nursing homes. Our national association congratulated him on these statements, we agree; we agree 100 percent. If we are not policing our own industry, then I think somebody else should do it. We in Wyoming feel that we are quite fortunate. The oldest facility in Wyoming is some 8 or 9 years old. All nursing home facilities in the State of Wyoming were initially designed, engineered, and built for the sole purpose of a nursing home, that is the skilled nursing care facilities, not the personal care. We do not have any old rambling houses that have been converted or anything like this.

My three facilities and the majority of them in the State do, in fact, meet the criteria planned by safety, sanitation, staffing, the whole thing, where we could, in fact, qualify and be certified as extended care facilities, but it is not in the books today financially to get involved in this program. If a car dealer is selling cars below market price and at a loss, he is either going to change his tactics or he is going to not be operating his car business. A grocery store or anything else, the same thing applies to nursing homes. Unfortunately, it is sheer economics.

The other point I would like to bring up, Senator, is on the title XIX program. In fact, last July, I think it was, when I was back in Washington to visit with you at that time on old House bill 17550 which went by the wayside. Currently, House Rule 1, there is a section which has similar provisions to the old section 225. To give you an example and maybe some of the people here in this room who are not aware of it, today for welfare recipients in nursing homes, we, in fact, are receiving \$305 a month which is a few pennies more than \$10 a day. Our costs are like in any other business, they have gone up, they have spiraled. We, in the last, in 1967 I think it was, came under the Federal minimum wage. Every employee in a nursing home today is making at least \$1.60 an hour. There are bills in the House today, Representative Dent has one, there is also a Senate bill proposing \$1.80, another one \$2 with eventually \$2.40 an hour. Prior to 1967, the majority of the nursing homes and hospitals were paying their employees, their lay-type persons, \$1 an hour. We are paying \$1.60 today.

OPERATING EXPENSES GOING UP

In 1967, prior to the advent of Medicaid in Wyoming, we were receiving \$250 a month. Up until July 1 of this year when they raised it to \$305, we were receiving \$275 a month which is about a 6 percent

increase in the reimbursement rate. Our costs have gone up some 80 percent there, so it doesn't balance out.

Getting back to the welfare recipients I am speaking of, the average cost for caring for a nursing home patient today in the State of Wyoming is in excess of \$11 a day. These are not just my figures. To further clarify it, last June the State Welfare Department engaged Rouche & Gayman, a firm in Cheyenne, to audit all nursing homes. We laid our books completely wide open. The auditors audited us and came out with these costs. They were trying to devise a cost reimbursement system. Unfortunately, it didn't go through the legislature.

We today in the nursing home industry are subsidizing the welfare recipients, and I will go further and say, really, it isn't us, a dollar a day or better for their care, that is the reason I say it is not us, we have still, if we are going to keep our doors open and stay in business, we have to take some action. It is the private patient, and it is unfortunate, it is the private patient that we have had to raise their rates exorbitantly to offset the cost of caring for these welfare recipients. These programs have been developed through Federal and State coordination, they are excellent programs, they have standards that are being further enhanced every day, and I am for them. I think they are good standards, they are good requirements, but they do cost money. We have reached the point where the State no longer can meet all the financial requirements for this type care, and this is the reason for the deficit in the payment.

I would urgently request that, if possible, provisions of House Rule 1 be removed which limits title XIX care for skilled nursing care and skilled nursing homes.

Thank you, Senator.

Senator HANSEN. Thank you, Mr. Morgan.

STATEMENT OF ELTA KENNEDY, CHEYENNE, WYO.

Miss KENNEDY. Senator Hansen, I am Elta Kennedy from Cheyenne. I want to speak very briefly for a segment of the senior citizens who cannot be present to speak for themselves today. They are the older people who are sick and confined to their own homes.

I would urge that more home health services, particularly nursing care be made available to these older citizens in their own homes. Nursing and other home health services should be expanded to help the elderly stay at home as long as possible. When older patients have families who want to care for them at home, it is possible for many patients to have all their care needs met at home if home health services are available to help with the care.

In Home Health Services we are having the same problems as the nursing homes are having with Medicare. Payment is denied when Medicare people say the patient does not need skilled nursing under certain circumstances where we disagree, and we think we have proof that this is not true.

The philosophy of Medicare seems to be that older people like younger people get sick are given appropriate medical and nursing care and get well. That is a cure concept, not a care concept. The older people I am speaking for are the severely incapacitated who will never be cured, but who need care over long periods of time. They are the ones with severe incapacity and may have several different diag-

noses which require many potentially dangerous medications to keep them at their maximum level of existence, or they are incapacitated from paralysis following a stroke or from arthritis and have given up, or are given up to inactivity without external stimulation or internal motivation. Medicare says at this point if there are no technical treatments requiring the nurse to use her hands for some procedure, that custodial care is "usually" all that is required.

When medicine can do no more for these sick elderly it is the nurse's basic scientific knowledge of the human body in health and in disease at various ages that differentiates between custodial care and nursing care. With direction from the patient's physician, skilled nursing care and nursing management of the care given by others is vital to these patients. Home health agencies have many records to document this.

I believe one of the weaknesses in the Medicare program is that decisions on whether or not an individual patient required and received skilled nursing care is made by people who do not have the nursing expertise to make that determination. These decisions may be made by personnel people and accountants completely outside the health care professions or by individuals who are unfamiliar with the assessing, planning, teaching and management required in meeting 24 hour total care needs of the chronically ill who may be helped but not cured.

Thank you, sir.

Senator HANSEN. Thank you very much, Elta Kennedy.

Mr. RHONE. Senator, in my closing remarks, and I presume this is the close of the meeting, before we disperse, I want to thank my advisory committee. It was such a wonderful committee to work with, I adore these people because they are so congenial and they work, really, just like clockwork.

I still want to thank you, and I appreciate being part of your hearing.

Thank you so much.

Senator HANSEN. Thank you very much, Chairman Buck Rhone. I am sure the sentiments you have expressed are reciprocated by all of us and particularly by your committee.

I would like also to give a special thanks to Stanley Torvik, Wyoming director of adult services, and to Jim Hammer and Dorothy Fleisher, his assistants, for their work on the conference and their extremely valuable assistance to the committee in preparation for this hearing.

Let me say in closing that I have heard a number of witnesses in Washington. I know of no group that has been able better to represent its constituents than you have here today. I think you have done a great job in bringing to the attention of this committee and to all of us present what the concerns, needs, hopes, and aspirations of aging people are. I compliment you very much, and I would like simply to say that the best witnesses I know of are those who speak from the heart, who know the problem and who are genuine. You know, you can hire representatives, you can hire attorneys, they are a dime a dozen in Washington. They don't carry near the wallop that you people do.

I know that the committee will feel particularly grateful to have the opportunity to review, as they will, the comments and observations you have made here today.

If there is nothing further to come before this committee hearing, we will adjourn. As I said earlier, there will be a 30-day period during which anyone who wishes to may have submitted and have included in the hearing record any statement that he cares to make in writing.

Thank you all very much for coming.

(Whereupon, at 4:40 p.m., the subcommittee adjourned, subject to the call of the Chair.)

APPENDICES

Appendix 1

PRESENTATION ON WYOMING'S AGING PROGRAM BY MR. ROBERT "BUCK" RHONE, CHAIRMAN, WYOMING STATE ADVISORY COMMITTEE ON AGING, AT GOVERNOR'S CONFERENCE ON AGING, CASPER, WYO., AUGUST 13, 1971

This meeting takes on special significance in 1971, a year which will culminate with a White House Conference on Aging. State conferences, like today's Governor's conference, are adding to the momentum initiated by the elderly. Ten years ago when there was no "Older Americans Act," there were only a handful of State agencies on aging. Now there is an agency in every State in this Nation, and their influence can be a powerful force for an exciting and productive White House Conference on Aging.

Progress has been real. But 20 million older Americans out of a population of more than 200 million still face many serious problems. About one-fourth are poor. Nearly all feel a squeeze on their fixed incomes and with advancing years they must struggle, often in isolation, against multiplying problems in health, housing, transportation, employment and retirement.

The same problems challenge 42 million middle-aged Americans—more than 18 million aged 55-64 who will be tomorrow's older Americans, and 24 million, aged 45-54 who find themselves "old" in their labor market, caught in a conflict between the lengthening of life and the shortening of work careers.

Today's Governor's conference is an essential step in realizing the goal of giving the older people in Wyoming an opportunity to express their desires and needs. For those concerned citizens who have spent many months thinking about the problems of the elderly in Wyoming, today's conference gives them a chance to articulate their concerns. And today's conference will increase the general public's awareness of the needs of Wyoming's older people. Besides, the Governor's conference provides the opportunity for Wyoming's older citizens to develop broad principles, recommendations and plans for action, to present at the national White House Conference on Aging.

This afternoon Senator Clifford P. Hansen will hold a public hearing in which the State advisory committee on aging members will present ideas and information on the wishes and needs of Wyoming's elderly citizens. They have gathered this knowledge doing research during the past few months and from speaking with the senior citizens in the sectional meetings that will be held this morning.

The national White House Conference on Aging will be held November 29th through December 2nd in Washington, D.C. Dr. Arthur S. Fleming, the White House Conference Chairman, says the 1971 meeting will be governed by one word and one concept, namely, "action." The State advisory committee on aging members will represent Wyoming's senior citizens at the White House Conference. They will speak about the needs, ideas and desires of Wyoming's elderly. This White House Conference on Aging is to be more than just another occasion to talk about older people. It will outline new goals and new directions. And it will propose a plan of action for the 1970's. Thus, the goals of the national conference are:

First, to create a more realistic and comprehensive policy for older Americans. Second, to make the public more aware of and concerned for older people's needs. And, by increasing public awareness, the development of the potential of senior citizens as natural resources will be encouraged and promoted. Third, to devise better methods of developing and sustaining national, State and local efforts, both public and private, in the field of aging. And finally, to promote national action to strengthen the means of older people for independent living and the improved use of their talents and to lessen isolation and increase participation in family and community life.

Now, I have mentioned the State advisory committee on aging, and I would like to take the opportunity to introduce the members to you. Mrs. Carolyn Ellis, Torrington; Mrs. John Lucas, Jr., Rock Springs; Mrs. Kathryn K. Meloney, Basin; Mrs. Alice Hawken, Sundance; Mrs. Albert Tillman, Fort Washakie; Mrs. Hugh Duncan, Glenrock; Mrs. Arthur L. Buck, Cheyenne; Mrs. Nellie E. Frizzell, Kemmerer; Mr. Stanley Edwards, Laramie; Mr. Edward M. Jones, Evanston; Mr. Willard R. Beck, Sheridan; Mr. Clyde W. Kurtz, Powell; Mr. V. L. Herzeelle, Casper; Mr. Alfonso M. Sandoval, Rawlins.

All fifteen members of the advisory committee were appointed by the Governor, to represent all citizens age 55 and over in Wyoming. People of all social and ethnic groups are represented on this committee. The selection of the advisory committee members has an interesting history. Members were chosen from each of the seven judicial districts in Wyoming; one member was appointed for each judgeship in each of the districts. In addition, three at large members were appointed. The principle behind the selection of advisory committee members was to insure broad representation of all senior citizens throughout Wyoming. The advisory committee has several functions. The members participate in statewide planning and research activities related to aging. They act as a liaison with the general public, informing them of activities of the aging program. Also, advisory committee members act as a liaison between the local communities and the State agency on aging. And they review and make recommendations on new and existing community projects. In addition, they evaluate and make recommendations regarding program activities and future expansion.

I would now like to speak of the history of Wyoming's aging program. Its creation dates back to July 14, 1965, when the Older American's Act was signed into law. This new piece of legislation established the Administration on Aging which is the focal point for older people's interests within the Federal Government. And the legislation, under title III, also authorized funds for allotments to States for programs for older people. This section of the Older American's Act, provides the money to fund the various community projects that now exist in Wyoming. In fiscal year 1969 Congress authorized the funding for the provisions of the Older American's Act.

In 1970 the services provided under the title III program of the Older American's Act proved to be a prudent investment—not only for the individuals helped, but also for the Federal Government. Even with the limited funding available for these projects, more than 165,000 elderly people were helped to maintain independent living arrangements.

Wyoming's State aging program began operating July 1, 1970. The State aging program was established to encourage senior citizens to organize, discuss, and determine their needs at the local level. After needs have been determined and priorities established, the senior citizens propose programs to meet their needs. Local funds combined with available Federal monies may be used to finance local projects.

The Federal Government participates in funding the community projects up to three years. The Federal Government's funds are obligated on an annual basis, the Federal Government participates in the community project funding, at the rate of 75% the first year, 60% the second year, and 50% the third year. The remaining 25%, 40%, or 50% of the total project costs, has to come from private contributions, donations, or State funds.

For fiscal year 1972 there is \$94,909.00 in Federal funds available to help finance community projects.

To date eight community projects have been funded in Wyoming in the following locations: Sheridan, Rock Springs, Green River, Thermopolis, Laramie, Saratoga, Casper, and Cheyenne. We hope to fund several more projects before July 1972. The eight total project budgets amount to \$139,235.00 and of this \$86,050.00 represents the Federal Government's share and \$28,684.00 represents the grantees' share. The remainder of the project funds will be generated by the individual projects.

Five of the eight projects funded are presently in operation. Of the three remaining projects, one will begin program operations in September and the other two will begin in October.

Laramie, Cheyenne and Casper have meals-on-wheels programs. Saratoga plans a Sam's project, which is short for serve a meal to a senior. Although each of these programs have their own unique variations, the purpose and goals of all these programs are similar. These types of programs are designed for people who live at home and are convalescing from an illness, or who are aged or disabled. In many instances the program, together with other community health

and social services, helps to maintain the aged and disabled in their own familiar surroundings. This lessens the higher costs that would be involved in hospitalization. The specific service of these programs is to provide balanced meals to persons who would not otherwise have access to them. The meals-on-wheels projects use volunteers to deliver hot meals five days a week to subscribers. brief social contact is established which is especially welcomed by shut-ins who are isolated. In case of any problems such as illness, the person specified on the application form will be notified, for example, family, friend, physician.

The Sam's program uses volunteers to bring persons 55 and over together at a central location where they are served a hot, nutritious meal daily. Besides providing good nutrition, all programs plan to provide some companionship, including telephone reassurance to make sure all is well and friendly visitor service; recreation; education; help with transportation to doctors' offices, hospitals, super markets, laundromats, post offices, welfare offices, and so on. And, as each project develops and expands, they will also increase the range of services offered.

Cheyenne's project director is Mrs. Lorraine Westerfield, Laramie's project director is Mr. George Shelton, Saratoga's project director is Mrs. Rose Kannaday and Casper's project director is Mrs. Mabel Marvel.

The Sheridan project has a unique history. The Whittney Foundation assists in funding a YMCA and stipulated that persons of all age groups, regardless of race, religion or national origin were to be served. And so, Sheridan, even before the passage of the Older American's Act, was offering some services to its senior citizens. The fact the Sheridan project has received additional funding under the authority of title III of the Older American's Act is enabling them to expand their program. According to the project director, Edward J. Rohmann, a primary objective of the program is to improve the independence, mobility and general usefulness of older persons through an adequate and carefully planned program of physical exercise. Many needs and interests of older Sheridan residents are being met. These include the operation of a center for social and recreational activities, an information and referral center, transportation services for those in need, a telephone reassurance program, a friendly visitor service, in addition to the physical fitness and physical therapy program. And senior citizens are being enlisted as volunteers for services in the community.

The Green River project is providing funding for a senior citizens' center. Various services are being offered, including recreation, transportation, handicrafts, information and referral and counseling programs. The temporary director of the Green River project is Mrs. William Bramwell. The Rock Springs project is also providing funding for a senior citizens' center. Recreational and other social activities are being offered to senior citizens as well as a telephone reassurance program. Other activities will be scheduled by the committee. The temporary director of the Rock Springs project is Mr. Dwight Jones. The senior citizens of both Green River and Rock Springs are taking on the responsibility of establishing and maintaining their local centers. Both of these projects are providing senior citizens with an opportunity to engage in meaningful activity and to use their time creatively. Those senior citizens who are participating in the establishment, operation, and programs of these centers are finding a meaningful role in community affairs.

The Thermopolis project consists of nine multi-purpose senior citizens centers to be established in four counties—Big Horn, Fremont, Washakie and Hot Springs. These centers will provide a variety of services and activities. Counseling in financial, legal, medical, social security, food stamps, welfare, consumer buying and budgeting and employment is being offered. Transportation is being provided by volunteers to senior citizens who have no means of getting around. Referrals are being made in the event of problems—for example, someone suffering from malnutrition is immediately referred to emergency food and medical services. In essence, the project's objectives are to help senior citizens help themselves in alleviating many of the problems that contribute to poverty, malnutrition and the feeling of being isolated. The Thermopolis executive director is Betty Jean Zupan.

Various local agencies and organizations have been instrumental in helping these projects get started, and I would like to mention them: Northwestern Community Action Program of Wyoming, Inc.; Snowy Range Community Action Program; Vista Volunteers; Veterans of Foreign Wars; National Association of Retired Federal Employees; American Association of Retired Persons; National Retired Teachers Association; Public Welfare; Public Health Nursing; churches of all denominations throughout Wyoming; and women's clubs.

Throughout my presentation I have made mention of the needs of Wyoming's senior citizens. Yet, there is no empirical, comprehensive study on their needs. To rectify this, the University of Wyoming Special Projects Department, under the leadership of Dr. Hilton Power, will conduct a statewide study to identify the needs of the senior citizens in Wyoming. The results of such a study will lay the groundwork upon which future plans for the aging will be built. For this study, I am grateful. A sample of older persons throughout the State will be given a questionnaire that was developed and tested by the Federal Government. Senior citizens will be conducting the interviews which is new in the field of research. Usually college students or paid professionals are the interviewers.

I would like to conclude my talk with a plea for action. We urge all elements of American society to unite in a comprehensive effort to open new doors for participation by older Americans in the mainstream of national, community, and personal life. Both public and private sectors, nonprofit and profit oriented alike, should face up to the challenges created by the 20th century revolution in life patterns among persons past 65.

The goal should be reinforcement and strengthening of attitudes, opportunities and programs which recognize that past responses to the problems of aging often are inadequate to the needs older Americans have today and may have in the future.

Appendix 2

ADDITIONAL INFORMATION FROM WITNESSES

LETTER AND NEWSPAPER ARTICLE SUBMITTED BY A. M. SANDOVAL,
RAWLINS, WYO.

Community Action Programs (CAP) being harassed and destroyed. Evidence support the conclusion and plans are afoot, that plans to abolish Community Action, agencies and programs and directors across the country? Can you answer to this?

How have the budget for the Reorganization Plan #1, come about in the Senior Opportunities Program, been handled?

NOTE: Clipping is also question I ask as to the findings for such a worthy and proven cause is in jeopardy of being denied for the help of low income as well as on the Poverty Program.

[From the Catholic Register, Aug. 21, 1971]

BISHOP DEFENDS ANTI-POVERTY PROGRAM—UNDER ATTACK IN MISSISSIPPI

JACKSON, Miss.—(NC)—An anti-poverty program stands to lose its funding by the U.S. Office of Economic Opportunity unless Bishop Joseph B. Brunini can prove that the program is not inefficient as federal officials claim.

The OEO has charged that STAR, a diocesan-sponsored adult education and manpower training program, is inefficient and should not be funded past Aug. 31.

The bishop has denounced the charge, saying that the OEO regional office in Atlanta is biased against STAR. He has called for a hearing at the end of the month to set the record straight.

OEO, through its Atlanta office, levelled an attack against STAR in a seven-page letter outlining instructions leading to a shutdown of the program.

Firing back at the OEO decision, the bishop wrote that allegations against STAR "constitute an insult to the integrity and intelligence of both the staff and the board of STAR and reflect upon the judgment of the Catholic Church in continuing its sponsorship of the program.

"We categorically deny all the allegations contained in your letter as legitimate claim to refuse to fund our program," the bishop wrote. "We shall present a complete and detailed rebuttal, both in writing and orally as per the OEO regulations governing refusal to fund."

Bishop Brunini said he protested the hearing of the STAR case by the OEO regional office in Atlanta because "the manner in which this case has thus far been handled precludes confidence" in that office.

The OEO shutdown order of STAR, sponsored by the diocese since 1965, said investigators had concluded "that grant funds have been administered in an ineffective and inefficient manner in serious and persistent violation of OEO's administrative and programmatic requirements resulting in an inadequate level of services and benefits to the poor."

STAR had obtained \$14 million in federal funds since it began and was operating under a \$2.3 million grant this fiscal year. According to Mississippi Today, the diocesan newspaper, STAR had asked for another \$2.3 million for the fiscal year beginning Sept. 1.

Although no diocesan funds were used for STAR, Church facilities were provided rent-free. STAR centers are currently operating in Jackson, Meridian, Natchez, Greenwood, Greenville, Mount Bayou, Holly Springs, Biloxi and Canton.

Controversy over the program mounted about a year ago when civil rights forces claimed the program was not doing the job it should. Aaron Henry,

NAACP president from Clarksdale, asked the Atlanta office of OEO to investigate and called an unofficial hearing to gather testimony regarding STAR programs.

Bishop Brunini, in his letter to OEO in Atlanta, said, "We are persuaded that STAR has made a notable contribution to the lives of thousands of poor Mississippians.

"It is this conviction that forces us at this point to continue our initial resolve in the sponsorship of STAR. To speak of discontinuing STAR and possibly continuing its program in other forms is to engage in a game of bureaucratic chess with the poor the obvious losers.

"There is an insensitivity in your decision arising, I am sure," the bishop wrote, "from a lack of familiarity with STAR's program."

1) Regular physical examinations to discover weaknesses which can be corrected before extended hospitalization is needed.

2) Medicare payment for dental work. (Neglected teeth cause many of the nutritional deficiencies as well as other illnesses.) Vision and hearing assistance would be appreciated by many, but teeth are truly *needed* for health.

J. E. GOAR, SHERIDAN, WYO.

There is no present federal funding for construction of custodial type housing for elderly where living quarters consist of a room or two—common dining facilities and recreational quarters with rent supplement where necessary. This type of facility is badly needed for many single elderly people who do not want apartments of full housekeeping type. Legislation needs to be amended to include this.

If a single concern of the aging were to be selected as of most importance to the aging it would be control of inflation. Total responsibility for mounting and continuing inflation must rest with the federal government because of a lack of responsible fiscal and monetary management of federal budgets and financing and an abdication of responsibility on the part of *Congress* and the *administration* with regard to *extreme* pressure on Unions and Business management (short of price and wage controls) in the control of wages and prices which are becoming intolerable. Recent pronouncements on the part of various people in government concerning this are *far too late*.

Appendix 3

STATEMENTS SUBMITTED BY THE HEARING AUDIENCE

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

If there had been time for everyone to speak at the hearing on the White House Conference on Aging and related matters, in Casper, Wyo., on August 13, 1971, I would have said:

The following replies were received:

MRS. TILLMAN, FORT WASHAKIE

Older folks are forgotten people. Recently, I have discovered a problem that is probably very common among older people. A man I know has lived on the reservation in the same building for 83 years. That's how old he is. The house he lives in is 90 years old. It's a log house and mud holds the logs together. It has a dirt roof and only two windows. There was a fire inside the house a while ago and the inside got burnt. The ceiling is braced up to keep it from falling on him and there is plywood over the burnt out parts. We've been trying to get him a decent house. There are very few available. And this man does not want to move from the only place he knows.

Substandard housing is very common among the older people on the reservation. Another man I know lives in a garage. And I know of someone who lives in a house where there is no running water. And there is one old woman whose house has no bathroom. In the winter, when it's cold outside, she is out there getting water.

What is needed for these older people I have described is for someone to build a new home or to repair their existing home. New housing in a different location is not the solution. These people are unwilling to leave familiar surroundings.

MARSHALL ELLIOTT, CASPER, WYO.

National Highway Trust Fund—*Not* available except to build *more* interstate highways—.04 a gallon on all gasoline. Obligated thru 1976.

Need to change the law to allow States to use this 90%—10% funds for other kinds of transp.

Please Note: Mr. Elliott was in the work shop, held in Casper Ramada Inn but did not sign petition. Mr. Elliott is from Casper, Wyo.

KATHLEEN HENRY, CASPER, WYO.

Medicare's emphasis is upon hospitalization of the extremely ill. I feel that some money could be saved by preventative measures including:

(595)

