

DOCUMENT RESUME

ED 123 539

CG 010 577

AUTHOR Randall, Ollie
 TITLE New Dimensions on Aging.
 PUB DATE Sep 75
 NOTE 7p.; Paper presented at the Annual Governor's Conference on Aging (7th, Glendive, Montana, September 11-12, 1975).

EDRS PRICE MF-\$0.83 HC-\$1.67 Plus Postage.
 DESCRIPTORS Age Differences; *Age Groups; *Economically Disadvantaged; Housing; Individual Characteristics; *Life Style; *Needs; *Older Adults; Regional Programs; Sex Differences; *Social Factors; Speeches

ABSTRACT

This brief presentation discusses various problems older adults face. First, older adults are described, and old age is defined. Old age starts after 50, and older adults should not be considered as a homogeneous group; they fall into many different categories which enrich rather than impoverish them as a group. The long experience they have had can contribute effectively to society; thus, they should not be isolated from people, but should be enlisted in volunteer programs to play a constructive role. The speaker urges government to provide inexpensive and varied types of housing and other sorely needed services for the older adults. The greatest priority for older adults, however, is the provision of opportunity to create a quality of life that is consonant with individual needs.
 (SE)

 * Documents acquired by ERIC include many informal unpublished *
 * materials not available from other sources. ERIC makes every effort *
 * to obtain the best copy available. Nevertheless, items of marginal *
 * reproducibility are often encountered and this affects the quality *
 * of the microfiche and hardcopy reproductions ERIC makes available *
 * via the ERIC Document Reproduction Service (EDRS). EDRS is not *
 * responsible for the quality of the original document. Reproductions *
 * supplied by EDRS are the best that can be made from the original. *

7TH ANNUAL GOVERNOR'S CONFERENCE ON AGING
Glendive, Montana
September 11 - 12, 1975

NEW DIMENSIONS ON AGING

by
Ollie Randall
National Council on Aging
Washington, D.C.

U.S. DEPARTMENT OF HEALTH,
EDUCATION & WELFARE
NATIONAL INSTITUTE OF
EDUCATION
THIS DOCUMENT HAS BEEN REPRO-
DUCED EXACTLY AS RECEIVED FROM
THE PERSON OR ORGANIZATION ORIGIN-
ATING IT. POINTS OF VIEW OR OPINIONS
STATED DO NOT NECESSARILY REPRESENT
OFFICIAL NATIONAL INSTITUTE OF
EDUCATION POSITION OR POLICY

We are, as everyone knows, in a serious recession - as severe in its effects on older people as were the days of the depression of the 30's, which some of us have lived through, while the response of our present government at all levels is not of the positive nature that it was in those horrendous years. We have all the problems of shortages in income, housing, health care, and service programs of all kinds, and these shortages are complicated by constantly rising inflation and an energy crisis that is adversely affecting the handicapped, the poor and the elderly. Although the situation of many elderly people, rich, middle income, and poor alike, has worsened, administrative units of federal, state and local government do not regard alleviating the plight of the elderly as a priority of great importance.

However, despite this gloomy outlook, we are here to discuss the dawning of a new era for older Americans - one which is not entirely rosy, but which, if we use it wisely, should be one in which we realize more fully our own potentials for living and for contributing to the common good and our own best interests. There are several new dimensions which should help us to believe more in our own capabilities than we have in the past. For instance, older people represent a greater proportion of the total and of the adult population than we ever have before and we can no longer be thought of as a minority. We must use our new found strength and realize that with our numbers we have the right and the responsibility to exercise the privilege of voting in our own best interests as well as that of the common good. We owe it to ourselves to use this right diligently and intelligently.

But, beyond our numbers we have the dimensions of length, in that we are living longer than any of us ever expected; we have depth - a new awareness of ourselves as people who count as members of society and given the opportunity, which was denied to most of us for far too long, we now know we can create for ourselves. We have diversity in the membership of the society called "older Americans". We have all races, creeds, colors and cultures to call upon. We also have a separateness which society itself brought into being and this gives us the right and the power to think and act independently in our own behalf. We accomplish this through many avenues of activity formerly denied to us because of our years. But most of all we have the dimension of experience in living through the radical changes of this century and discovering that we have the ability and flexibility to cope with change - with success. An eminent psychiatrist at a meeting recently asked whether older people can learn. The reply, "Of course we can, or how otherwise would we have survived at all!"

We hear much today of the new generation of the elderly - the "aging and the aged". This implies that we are a group, which we are not - for the phrase attributes the same characteristics to all of us. We are the most individualistic people alive today. We are no longer conformists as we were apt to be when we were younger. We are only as we are compelled to be by circumstances beyond our control. We are as different from one another as it is possible to be, even when we belong to the same family or the same culture. We are told by the eminent

scientist and author, Rene Dubos, in his book, The God Within, that we have further compounded this uniqueness by our individual reactions to the events of our lives. We are often reminded that we have at least our chronological age in common - but even this is no longer true. People are being retired from the labor market at 50, 55, and 60, and it is not unknown among people in their 40's. When one is retired one is immediately classified as "old" - for retirement in our society is equated with old age, with little regard for the ability or the capacity of the retirees.

We prefer to think of the "new generation" as a collection of generations - nominating them somewhat illogically, by decades. The very young old (50 - 60), the young old (60-70), the middle aged elderly (70-80), and the old old from (80-90) and very old old (90 - 100), and oldest old of all are those 100 and over, for we have well over 7000 centenarians with the number growing daily. Little imagination is needed to realize that in work with and for people in their 80's and upward that their past experiences differ vastly from those of the present younger generations. Life in the technical and industrial world has been very different for these people from that of those among us for whom education has been more readily available and for whom leisure has been available liberally. Opportunities for constructive use of this leisure time has been ours as resources and means for their use have improved. Thus despite the trauma of early retirement - and at 50 there must be some trauma - since retirement at that age is seldom voluntary except for health reasons, such retirees may be able to do more to better their status, with much greater resistance to society's tendency to ignore or to disregard older people. Surely we all realize that more of us in the later decades are the victims of chronic illness, of unsatisfactory and inadequate social and economic provisions; we are often poorly housed or inadequately cared for in nursing homes, lodging houses, hospitals - especially those for the mentally ill - homes for the aged when so many of us would rather be in our own homes with "in home care" were this available.

We must of course realize that we are not a homogeneous group in the fundamental meaning of that word, for we women do outlive men in the upper age groups. We have also found that many of the very oldest elders are apt to be black, housed with their own families or in a family setting. Studies in Rhode Island over a period of several years brought out the interesting fact that the 65 and older population of blacks includes an equal number of men and women!

With most of the women in their later years counted among those single either by preference or misfortune, divorced (presumably by preference), or widowed, we find a very real economic and social problem situation - some of which are shared by elderly couples. Many of them stem from former low salary status in the labor market or the types of positions open to women. Women are, of course, not alone in this dilemma of inadequate financial means, for we now have what the National Broadcasting Company has recently called "The New Poor". These are the people who until recently have been able to manage their affairs, albeit not luxuriously but at least comfortably, and whose resources are now threatened by rising unremitting inflation. We the elderly are not beneficiaries of much of the 400% profits of the industrial corporation.

So far, in the eastern part of the country, the chaotic and disastrous SSI program has done little to give the large numbers of needy older persons assurance that help will be forthcoming in a prompt and decent manner or insufficient in amount to meet the rising deficits in their budgets. So, again, "the new poor" as well as the long time poor have serious economic problems and doubtlessly social and emotional problems to boot. There is a need for organized advocacy for these people over and beyond what they can do for themselves. We constantly

hear the kind of statement that was made to us on the President's Task Force on Aging, "all old people who are poor today have always been poor!". This statement by a young economist was challenged - and it was suggested that he had not done sufficient home work in the field of aging to know the true facts. We believe that it is important that all of us remember that it is extremely difficult for most older people to accept and adjust to this shift, not only in economic status, but in social status as well.

We are of the opinion that as the federal administration undertakes to organize regional and county offices for the aging, these will function well only so long as there are enough older people who gather together to help clarify what is needed in their home territory and to communicate their positions with their local, state and national legislators; to keep them posted on their reactions as concerned voters when legislatures are in session and when the legislators are running for office. Now that we have numbers, these people will listen as they never have before.

The Dimension of Length

We have the dimension of length - in other words, longer than we once would have had to accomplish our ends. Nevertheless let us remember that not all of us have the same amount of time, and that for each of us time may have a very different value. In Dr. Carrel's book Man the Unknown, the author reminds us that each moment of time gains in relative value as the amount of time we have to live is shortened, since each moment becomes a greater proportion of what remains for us. Many of the things we know we need will not come for all of us, but let us work so that they will happen for more of us than if we did not work together for a common cause. For instance, we must all keep in mind that decisions in government are being made not for the purpose of actually alleviating burdensome situations for people, such as the lack of money, health services, transportation, choice of housing of the right sort, continuing education, recreation and the ability to use our parks and other resources, as well as the right food in the right amounts, and the ability to reach our churches or have them reach us. Rather decisions on programs are made over and over again with the sole aim of saving public dollars at the expense of the people for whom more dollars should be made available. Why in some states at this particular point in time is there still a large amount in the state budget for roads, but no addition to the funds for older people? This seems illogical since the needs of the elderly are increasing greatly, and presumably the needs for new roads may be reduced by the energy crises.

It is now that we must use our time constructively, and if there are clubs and centers for older people we may find that the memberships of these organizations are becoming central or activating forces for community action. It is essential however to know who are the "decision makers" in a community - whether it be a rural, suburban or urban - setting, and what resources exist that can be useful. The Urban Elderly Coalition is performing yeoman work for older people in cities throughout the country, and perhaps we should attempt to develop such coalitions for those of us who live in rural and farm areas.

The Dimension of Depth

The dimension of depth is our rather dramatic and developing new awareness of ourselves - of our ability to continue to do things that need to be done - our recognition that this ability is something that society now recognizes it needs. Much of this awareness among ourselves has come about through the rapid spread of the volunteer programs such as SERVE, RSVP, and VISTA. These have

been among the healthiest social developments of this half century. We have heard, ad nauseam, that we older people are the "greatest untapped reservoir of wisdom this country has". Certainly until recently we have been "untapped"! And as Dr. Felix Adler has commented, wisdom is merely the distillation of experience! Of that we have had a generous share - some of it good and some of it bad, but it is within our understanding to know which was which, and perhaps even why.

Nothing in the past decade has contributed more than the news media to the gradual recognition by our communities, and our families of the fact that we can count for something more than merely those who require service. We can actually demonstrate what the scientists tell us - that as the technological world makes the demand for human hands in the production of goods disappear, the place for our hands is in service to others. Again we are pioneering in social change. A few years ago we had difficulty in persuading an agency to use some older volunteers. That same agency now begs for this help. Dollars for philanthropic and public agencies today are in short supply and programs for the aging in many cases are not being funded, especially where revenue sharing is supposed to be the source for social programs. So RSVP to the rescue!

Many families which are 4 and 5 generation families but which usually live in 2 generation households - are discovering the values of older people. Having lost our grandparents in the home, we now have the synthetic foster grandparents program to replace the association and the value of intergenerational communication. This was lost when social security and welfare programs made it possible, if not essential, for many families to arrange for the generations to live apart. However we must now keep alert as to the future of the family for a recent number of the Bulletin from the Center for Democratic Institutions has an article seriously debating the question of whether we actually need the "family" as a unit in our society!

The Dimension of Diversity

Diversity is a strength that we must use for common or agreed upon goals and methods of gaining these ends. As we discuss programs in the field of aging we have yet to hear a single really new idea - but we are aware that we must "recycle" ideas on methods we must use - or is the word "systems"? Somehow our individuality seems to come to the surface most apparently in our needs for health services, physical and mental, for housing and in our search for recreational opportunities. Certainly we all want to keep as well as possible for as long as we can with the help of our doctors, if we are lucky enough to have one who knows us, through our annual check-ups, through our knowledge of resources that our Information and Referral service provides for us and through our newly provided HOT LINES, our understanding of our nutritional requirements, our appropriate exercise programs, supportive gadgets such as glasses, hearing aids, proper shoes, and podiatry as a help in getting us about as we get older. But again, each of us needs these in different proportions at different times. Some of us must have hospitalization, nursing home care and long term care the length of which we now know positively can often be reduced with proper social as well as health care. We have learned that many of the persons committed to hospitals for the mentally infirm were merely victims of a "social breakdown" or as the New York Times phrased it - "social maladjustment" rather than a mental breakdown - merely an inability to cope with the demands of daily living such as housekeeping, laundry and shopping - a situation which does not require hospitalization to remedy. Now that we are not

admitting so many of the elderly to our state hospitals, and are discharging many patients who have been erroneously admitted, we do have community problems in finding appropriate living arrangements for people who must have some protective or supportive help. Many of our communities will have none of the "half-way houses" for these former patients, even though well administered abroad these have been used successfully for years and have proved to be desirable plans for discharged individuals. This attitude reflects the age old concept that we all lose our wits as we get older - another so-called truism which is again far from the truth.

In housing again we must emphasize that we want choices - the option of remaining in our own homes, or of accepting what we prefer from among the types of arrangements open to us. We hear so much these days of home care as the alternative to institutional care, when institutional care has never been anything but the undesirable alternative to home care! Today the shortage of decent housing at rents or taxes which many older people can afford is a disaster for not only the elderly but for those who before long must join the ranks of older people. This was one of the major issues of the White House Conference on Aging in 1971 and about which almost nothing has been done despite the efforts of the Senate Committee on Aging to promote more equitable solutions to the shortage.

We believe that our diversity shows up in the order of our priorities as they shift in different geographical areas, in different cultures, in the differences in accessibility or availability of services and in different capacities for knowing and reaching the people who decide how public and philanthropic dollars are to be used. Certainly at a meeting at which Dr. Flemming issued a categorical list of national priorities, placing income maintenance at an adequate level as first and foremost, he was extremely surprised to hear a group representing the rural areas of the northwest differ with him vehemently, placing transportation as Number 1, for said they, "What is the use of money if you cannot get anywhere to use it?" And at the meeting of our statewide action group in New York State, transportation came out as the Number 1 priority for those attending the sessions.

Greatest Priority

The greatest priority for older people is the ability and opportunity to create a quality of living that is consonant with an individual's wishes. This takes more than money - and often does not require money at all. It takes understanding of that which gives satisfaction in being alive.

We are exceedingly weary of the current preoccupation with "Death and Dying" for as a result of some 60 years of work with many elderly people, most of them do not fear death so much as they dread the long drawn out process of dying that may be painful, lonely, or without hope of early release and without proper medical care, rather than the actual fear of death itself as the ultimate fact of the end of life.

The easiest way of meeting life's needs is the provision of the dollars essential to make it worthwhile. We hear constantly of the poverty of the elderly - and this is mainly "poverty of the purse". Yet "poverty of the spirit" is much more corrosive of our morale than poverty of the purse will ever be, and it is much more difficult to alleviate. So here we would suggest that we must turn to the spiritual leaders in our midst and appeal to them to attempt to do more for their elderly than some of them are now doing - extending their concern to their older neighbors as well. The church is historically the first social agency. When the procession of social work began to emerge quite properly the area of social service was left to that profession. However, most social workers

have until now not had very much concern for the elderly, and even when they have, they cannot fully substitute for the spiritual adviser who represents the faith of the individual or even that of another faith. What we ought to have is a better linkage between the two - as well as with the medical profession - so that the individual does not as one clergyman phrased it "fall between the cracks". But to return to that gift of life, that each of us must prize and use as fully and as independently as we are permitted to do or as we find new ways of doing - the life that is so precious that we cannot be selfish with it. As Normal Cousins wrote in "A Rendevous with Infinity".

"We justify the gift of life in many ways - by our awareness of its preciousness and its fragility; by developing to the fullest the sensitivities and potentialities that come with life; by putting the whole of our intelligence to work in sustaining and enhancing the conditions that make life possible; by cherishing the human habitat and shielding it from devastation and depletion; by removing the obstructions in our access to, and trust in, one another."

"The celebration of life is the most natural business on earth."

It is in this context that we older people can achieve the independence which the different dimensions of our part of our country's population do provide for us. If we undertake with business seriously in which we are all engaged, we shall have success and satisfaction in the use of our energies and experience for concerted action, on problems we all share, so that older persons of today and the new generations of tommorrow may indeed celebrate the long life that is now possible.