

Old age - Community programs ✓

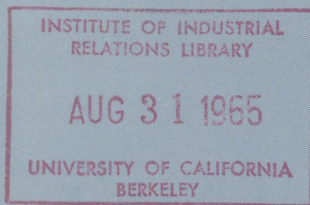
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How to Help Older Americans IN YOUR COMMUNITY

Your Guide to Organizing a Council on Aging

WHAT TO DO

HOW TO DO IT



U.S. PRESIDENT'S COUNCIL ON AGING
WASHINGTON, D. C. 20201

"Federal, State, and local governmental efforts, in partnership with private, voluntary organizations, can and should offer leadership and assistance in stimulating community action on behalf of older Americans ...

"... It is necessary, desirable, rewarding, and satisfying to help transform into realities the dreams that we have for our fathers, our mothers, and our other aging citizens."

LYNDON B. JOHNSON

April 10, 1965

"Today, in every American community, a growing number of older people need our attention and concern. They need health care, housing, recreation, a variety of social services, and opportunities to participate in community affairs.

"And we also need them. We need their wisdom and experience, their energies, and their love--the richness that they can give to our community life...

"Ask today what your community is doing for its older citizens. Where programs have been started, give them your support. Where they are lacking, help your community get them underway."

ANTHONY J. CELEBREZZE

Secretary of Health, Education,
and Welfare

Chairman, President's Council
on Aging

Why This Booklet?

In proclaiming the Month of May as Senior Citizens Month, President Johnson declared:

"I urge all Federal, State and local governmental agencies, as well as public and private organizations and all citizens, to give effective expression to the theme of this special month -- Meeting the Challenge of Aging Through Community Action for Older Americans."

This booklet has been prepared by the President's Council on Aging in response to that charge. It is based upon materials prepared by the Office of Aging, Welfare Administration, U.S. Department of Health, Education, and Welfare, and the Federal Extension Service, U.S. Department of Agriculture. Any contribution which this publication may make toward improving the added years granted to so many of our citizens stems from the wide experience and the deep understanding of community programs for the aged developed by these and other agencies contributing to the work of the President's Council on Aging.

Why Community Action?

America is being challenged by a uniquely modern development--a vastly expanding aging population.

A half century ago only three million Americans were 65 or older. By 1970 the number will top 25 million. We have discovered the secret of adding years to our life. Now we must apply our skill, ingenuity, knowledge, and resources to discovering how to add life to those years.

This is a challenge to the Federal Government with its vast responsibility for financing programs for the aged. This is a challenge to State Governments, with major responsibility for carrying out many of these programs. But it is ultimately a challenge to local communities throughout the Nation. For it is at this level that individuals and groups will decide what life will be like for the aged.

Our rapidly expanding society is ripping gaps in the social fabric between the generations. Modern industrial and urban living is changing the traditional family ties that existed between children, parents, grandparents. Local, State, and Federal governments can try to help fill the gaps. But they can't do it alone.

"As our population increases, as science and technology change our methods of doing things, as our wants multiply with the growth of our incomes, and as urbanization creates new problems, there is growing need for more public and private services," said President Johnson.

The ultimate force for improving American life is the American people in action--compassionate, bold, efficient action at the community level.

One Solution--Start a Council

One helpful course of action is to organize a council on aging in your community. There are fewer than 1,000 councils on aging now in existence in the United States. For the most part, they serve county jurisdictions. Since there are about 3,000 counties in the country, the unmet need is great. It is even greater from a community point of view, for the Census Bureau has identified some 6,000 urban communities and 13,000 rural communities in the United States.

How is such a council started? Organizational techniques are as varied as individual Americans. For example:

- In Maryland, the County Board of Commissioners names members to councils on aging.
- In many rural areas, councils may be set up by a Rural Area Development committee, or a township government.
- A council may also operate as part of another established group, such as a health and welfare council.
- In Minnesota, 11 nearby churches got together and formed a county council on aging.

- In Marin County, California, a planning group of county social agencies hired an expert to run a council on aging; the Board of Supervisors named an Advisory Committee to set policy and guarantee broad community support.

Broad Support Vital

Adequate representation throughout the community is one key to success. Perhaps 20 or 30 members may be needed to give the council such support. Representatives may include the following: county supervisors, municipal officials, businessmen, clergymen, educators, labor officials, social workers, county extension staff, and veteran, fraternal, and civic organization leaders, as well as local public welfare and health department directors.

Details Vary

Details of organizational technique may vary, but there are a few features that you should try to build into your council structure at the outset. Experience shows that they tend to make for long-term success.

1. Try to get official status. If the council is part of the local, municipal, or county government, so much the better. It makes for acceptance by the community, and eases the financial problems somewhat.
2. Put your ground rules in writing. Adopt a written constitution or simple by-laws, or working rules. It helps secure internal agreement and subsequent community understanding to make a public record of your rules.
3. Share the work load. Usually the council itself meets infrequently for policy decisions. An executive committee reporting to it will meet more often and regularly to carry out council

policies. This arrangement gives your community the benefit of wisdom and experience of top community leaders with very limited time.

Naturally there are exceptions. Some councils have been operating successfully without a rigid membership structure. Instead, their members are selected each year after a community's survey reveals the needs of the aged and the availability of people best suited to meet those needs. Other councils are effective without official status. So, if your council departs in any way from this outline, keep working. You may have hit upon a better way.

What is the Council's Major Job?

In one word--planning. A council on aging should be a planning organization. But make no mistake about it, planning is not an ivory tower occupation. On the contrary, it means getting involved actively, often personally, with the needs of senior citizens in the community. It means talking about such needs in council meetings. It means thinking about such needs and their solutions. It means factfinding, often through house-to-house, person-to-person surveys. A council's planning function would include identifying targets for community action. For example, if the council should decide that there is a need for a community nursing home program, it could appoint a committee on nursing homes. Such a committee would include members of the council and other well qualified individuals from the community. This newly created nursing committee would then look deeper into the kind and size of nursing home needed, how it might be financed, how it should be managed. Then it would report back to the council or its executive committee. Following a policy decision of the council, the nursing home committee would be given responsibility for taking the next steps, such as obtaining sponsorship, selecting a site, choosing an architect, arranging financing, and so on.

Sometimes a committee of the council might have responsibility that covers the entire county. Sometimes it would only cover a small area of the county. A friendly visiting program committee, for example, might find that it would have to limit individual programs to a small area that could be covered by its visitors. But an employment committee might find that it would have to cover the entire county to operate an efficient program.

Team Players--Not Stars

Team play--another word for it is "coordination"--is another essential ingredient of a successful council. A council and its committees should actively seek the cooperation of agencies already working in the field of aging in their community. These include: health departments, public welfare agencies, State employment services, United Funds and Community Chests, churches, hospitals, health and mental hygiene clinics, Social Security offices, public housing agencies, veterans organizations, business and labor groups, and the broad spectrum of social welfare voluntary agencies.

Maintain close liaison with your State commission on aging, and other State and local agencies active in the field. Where a council on aging exists, any new effort should be offered as a supplement. The rule is simple--if your community already has a council on aging, support it. If not, help establish one.

Who Will do the Job?

We have discussed membership of the council itself, but what about its committees? Here, too, aim for broad representation. Older Americans themselves can be valuable in every working group, but they should not be expected to carry the entire load. Try to get young people involved. They are enthusiastic, energetic, and altruistic. Moreover, they underscore

the fact that, while old age may be the present of senior citizens, it is the future of younger citizens.

Above all, try to recruit people who are active, interested, concerned, and convinced that community action can fill the needs of older Americans.

To Sum Up

To get your community council on aging off to a good start, base it on these principles:

1. Organize the entire community to meet the total needs of all of its older citizens.
2. Keep the organization flexible.
3. Enlist understanding support and participation of all citizens.
4. Win the cooperation of public and private agencies.

Targets for Community Action

There are at least thirteen areas where a council and its committees can do constructive work. But do not imagine for a moment that all thirteen should be attempted at once. It is better to zero in on one or two definite problem areas and develop projects that have a reasonable chance of success.

HOUSING

One out of three couples over 65 lives in dilapidated, deteriorated housing. In addition, many others live in housing which is too large, too expensive, too inefficient, too unsafe for the special needs that come with age. A survey was made of the housing of people receiving Social Security payments. It revealed that:

Forty-five percent were in need of better quarters.

Eighty percent were living in houses at least thirty years old.

Fifty percent were living in houses at least fifty-one years old.

By and large, those in the poorest health were living in the poorest housing.

An encouraging start is being made in the long neglected field of housing for older Americans. The Federal effort to attain a decent home and a suitable environment for every American family is being continued and expanded. The progress has been based upon cooperation between private groups and Government agencies. The emphasis is on local initiative and local action.

Communities or groups, both public and private, can participate in the major programs of the Housing and Home Finance Agency for housing older Americans. For rural areas, the Farmers Home Administration of the Department of Agriculture operates a similar program.

Perhaps every council should have a committee on housing to identify the needs and match up possible solutions to them. Relatively long experience in housing for the elderly in Massachusetts indicated that approximately 10 percent of the aged in any community needed specially designed, low-rent housing. In addition to Federal programs, a few State housing agencies are also active in the field. Private developers, religious, and labor groups are also building retirement villages. Religious groups are active in building residential facilities for the aged and have introduced the residence club or the large apartment type building. The retirement hotel is another recent development.

Despite the new trends and new progress, in most communities housing for the elderly is inadequate. The problem is a challenging one for any community council.

NURSING HOMES

The need for improved standards of nursing home care throughout the country is a major health problem. It raises many questions: how to relate nursing

homes to hospitals? how to handle patients who cannot afford to pay? how much and what kind of medical aid to provide? how to balance quality of service with cost? There are other questions too, but the Department of Health, Education, and Welfare has wide experience in the field and can furnish valuable guidance through the State Health Department or State Commission on Aging. A council on aging can appoint a committee on nursing homes to assess local needs and determine methods of raising necessary funds. The committee might also interest private enterprise and non-profit organizations, such as churches, to join with it in providing nursing care facilities.

Funds for construction are available through the Small Business Administration, the Area Redevelopment Administration, and the Federal Housing Administration. These are complex programs, but by asking for help from the State office of the Hill-Burton agency, from the U.S. Office of Aging, FHA field offices, or from such local groups as the Medical Society, or the County Department of Public Welfare, answers may be found to meet the needs of the community.

EMPLOYMENT

"It doesn't make sense," said Secretary of Labor W. Willard Wirtz, who is a member of the President's Council on Aging, "that our doctors and scientists can do so much more to extend life and to ease the physical pains of old age than we can do as citizen-statesmen to extend meaningful life and remove the economic pangs of advancing years." Age barriers in employment can be found long before normal retirement age--even at age 35 and 40. Workers who lose their jobs at this age find it difficult to become reemployed and often the reason is because they are "too old." Retired men in their 60's who want to remain active or who need the extra money a job will bring encounter rough going when it comes to finding a job.

To solve this community problem, the council on aging may well appoint a committee to find employment

for older workers. Here are some of the things this committee can do:

1. Determine the attitudes and practices in the hiring and utilization of older workers.
2. Accumulate facts regarding the skills and abilities of older workers in the community and determine the extent, nature, and scope of the problem they face.
3. Stimulate and cooperate in the work of all other agencies which are concerned with employment of older workers.
4. Sponsor group meetings to develop community understanding of the problems of older workers and employers.
5. Promote more adequate vocational and refresher training to meet current and prospective job needs.
6. Assist older workers to obtain help with physical, emotional, and other personal problems that may be interfering with successful employment.
7. Stimulate public support for needed services for older job seekers.
8. Enlist the support of press, radio, and television to focus public attention on the problem.

The committee on employment should work closely with State employment service officials and business groups. Veterans organizations should be included in this committee, because ex-servicemen constitute a large percentage of the older worker population. In Arkansas, a few years ago, a council on aging persuaded an adult education agency to start a training program for older workers. Over 1,500 elderly persons, some over age 70, enrolled. They took courses in 54 different vocational subjects, such as motel housekeeper, switchboard operator, floral designer, practical nurse. All were intended to prepare them for new jobs. And they did: 90 percent of the students were hired.

VOLUNTEER SERVICE

"The health of a democratic society may be measured by the quality of services performed by its citizen volunteers," said the late Professor Edward C. Lindeman of the New York School of Social Work. If so, the older Americans are making a valuable contribution. Their willingness to volunteer is a source of great strength to the community. At the same time, it provides the aged themselves with an awareness of belonging and participating in community affairs.

Moreover, the elderly offer a great reserve of highly developed skills. If given a chance, they can pass these on to young people, and so should work with them in many needed services of churches, schools, political parties, and civic projects. The community needs the elderly for its own sake and for the sake of the elderly.

They are particularly important to friendly visiting programs, pre-retirement counseling, and homemaker services. Their commitment shows other elderly people what they may accomplish once they become involved in volunteer activities.

The council on aging should maintain a list of older individuals--taken from its survey of older people--who would willingly volunteer. Their names should be kept in a separate card file, with notations of the activities in which they would like to serve. Older persons have contributed several million hours as VA hospital volunteers. They have devoted time to organizations such as the USO, the March of Dimes, the American Heart Association, the Crippled Children's Society, etc. In recent mass immunization campaigns to wipe out polio, senior citizen volunteers played a useful part.

THE SENIOR CITIZENS CLUB

A unique characteristic of our society is a large aged population with a great deal of time on its hands. Filling this leisure time in a satisfying and meaningful way is a great challenge. The Senior Citizens Club has demonstrated its effectiveness in meeting this challenge. For older persons, it has been successful in enhancing self-esteem, overcoming loneliness, and broadening social horizons.

Senior Citizens Clubs have seen great growth in the past decade. In Los Angeles alone there are 168 clubs with a membership of 35,000. The age range is from 50 upward with the average being about 70. Ten percent of the members are married couples. The overwhelming majority of club members, however, are women. Most clubs appeal to the older elderly. Being the loneliest, they naturally gravitate to the club.

One of the reasons for their growth is the fact that they can do much to keep aged persons active and interested in life. For example, some of the activities they provide include:

Dances	House parties
Picnics	Group singing
Bus trips	Lectures
Sightseeing tours	Theater and movie parties
Educational TV courses	Hobby groups

In addition to these activities, older persons get a great deal of satisfaction from just talking with each other, discussing mutual problems. This exchange of shared knowledge and common destiny can help dispel the fear and isolation of old age.

Clubs have been organized by professionals and by nonprofessionals. A meeting place for the club can be found almost anywhere -- a private home, a lodge, a veterans hall, a civic club, a church, a school, or even city hall.

A SENIOR CENTER

The senior center differs from the senior citizens club in several ways. Here is a working definition of a senior center:

It is open year round at least four hours a day, five days a week, and offers, under the direction of paid professional leaders, such services as recreation, adult education, health services, counselling, and other social services, information and referral services, or community and volunteer services.

Many communities already have centers. Some of them have well developed programs and are

highly successful. In Cleveland, Ohio, for example, a senior center is part of a public housing development, one of the first of its kind in the country. In St. Johns, Michigan, in the heart of a rural area, the senior center is housed in a two-story building in the business district. It has club rooms, a dining room, and a well-organized workshop.

However, the overwhelming majority of communities have no senior center of any type for their aged citizens.

Creating a senior center in your community will be hard work. But the support of civic groups can be most heartening. In Cleveland, for example, the Cedar Apartments Golden Age Center received its kitchen equipment from the City Restaurant Association, its lounge furniture from the Woman's City Club, and a fully-equipped workshop from the Rotary Club.

HEALTH

Older people are vitally interested in their health. A committee on health can be an effective aid to aged persons and their physicians. It can often work in cooperation with established agencies, such as county medical societies, boards of health, public health services, mental health services, or first aid and nursing programs. One of the most effective ways the committee on aging can help is to support mass screening and other preventive health programs for older persons. A physician can often detect an impending threat to health long before his patient is aware of it. Early diagnosis and treatment may remove the health menace completely. Delay might cause long-term and costly medical care, or might even rule out successful treatment completely. In Santa Cruz County, California, for example, older people are encouraged to have regular medical examinations. It was found that the hospital and nursing costs of these elderly persons decreased to one-tenth the average of those not on the program.

Here are three ways that a committee on health can serve its older citizens:

1. Stimulate the development by local health agencies and medical organizations of mass

screening programs, periodic health examinations, and injury prevention programs for older persons.

2. When established, assist in organizing the community and neighborhood to carry them out effectively.
3. Participate as health education aids in neighbor-to-neighbor meetings to explain, and urge support of, these mass screenings and other health programs available to the community's aged.

Another way the health needs of the elderly can be served is through meals-on-wheels service. While it may not normally be a function of the health committee, it is closely concerned with health. The local health department might be interested in working with a committee of volunteers to get such a program started in your community. Or the public welfare department, home for aged, or nursing home, might provide the meals if they could count on a strong volunteer group to deliver them, and visit with the persons being served. In San Francisco, when the meals-on-wheels service needed special trays to carry food from delivery truck to people who couldn't leave their homes, the San Francisco Senior Center wood-working shop solved the problem for them, and gave half a dozen retired men a feeling of accomplishment.

Another project for the committee on health is to encourage the training of enough practical nurses to meet community needs. In addition, it could see that there are classes on health education, that retired people may receive information on meal planning and grocery shopping, that they realize the importance of suitable exercise, that they know what physiological changes to expect in later years, and that they are informed on medical quackery and other frauds and are also aware of available health insurance coverage.

FRIENDLY VISITING

As the name implies, this program provides volunteers who visit aged shut-ins on a regular basis and for an extended period. One council on aging reported that older people have been enthusiastic about friendly

visiting, both as visitors and as the persons visited. The virtually complete acceptance of the visitors, it said, may be attributed to careful preparation of the persons to be visited and careful selection of visitors.

Here are some of the personality qualifications that go into making a successful friendly visitor: a warm and pleasing personality, warmth and interest in people, ability to be objective, sympathetic but not sentimental attitude, willingness to learn, ability to be a good listener. A committee on friendly visiting should first find out who needs this service. This can be done through a survey or by questioning health and welfare agencies. Second, it should find someone who will organize a corps of volunteers for this service. The person in charge must have great leadership ability. He must be able to recruit, select, supervise, and give encouragement to his corps of visitors.

It is always a good plan for the entire corps of friendly visitors to meet together once in awhile to discuss techniques. These meetings serve as a good opportunity to aid new visitors. They also provide a good opportunity to give recognition to the contribution of the old hands. Several effective friendly visiting programs are those which are co-sponsored by civic groups and public welfare departments or other social agencies.

INFORMATION AND REFERRAL CENTER

Because of the complexity of modern life, it is often difficult for professionals, let alone laymen, to keep track of what various community agencies are prepared to do for people. Too often helpless, bewildered elderly people are shunted from agency to another. Some of them may miss making contact for too long with agencies that can help them.

An effective information and referral service should provide a one-stop center where elderly persons and their relatives may get complete, up-to-date, and reliable information on various health, welfare, legal, educational, and recreational services and facilities.

An effective information and referral service draws on all available community resources for the aged. In

cities with coordinated health and welfare councils, the referral center for seniors may well be their responsibility. In smaller communities it may be staffed by volunteers; but a professional advisory committee should work with them to be sure that the information is accurate.

TRANSPORTATION

Perhaps more than any other age group, the elderly are dependent upon others for their transportation -- public or private. A survey in your own community may very well reveal needs which only a committee on transportation can meet. This committee may not be able to take all of the community's elderly to the places they want to go, but it can help. A husband and wife, for example, who normally shop on Friday evenings, may regularly pick up an older person who otherwise could not get to the store. Such arrangements could help other older people get to churches, movies, or medical clinics. In Los Angeles, senior citizens organizations were credited with obtaining reduced transit fares for older persons. It capped three years of effort on their part, which included: gathering information, winning support from local groups, writing letters to the metropolitan transit authorities, collecting petitions, winning the support of State legislators, testifying at county hearings, and other activities.

As its part of the bargain that resulted in lower transportation cost, senior citizens did the work of taking and processing applications for identification cards. The assignment was no small one. There are over 500,000 persons age 65 in Los Angeles County and women age 62 and over were also included. In addition to the age requirements, their cash income could not exceed \$200 a month or \$2400 a year for couples. Eligible senior citizens are entitled to a 10% reduction in the regular cash fare on all transit lines during off rush hours only.

ADULT EDUCATION

Psychologists report that people can go on learning well into their 70's and beyond. Such intellectual

activity is greatly desired by many senior citizens. In many communities the public school is the focal point for adult education. But senior citizens centers over the country have also done much adult education work.

In Coos County, New Hampshire, for example, the Home Economics Extension Leader has gained a wide reputation for her extensive teaching of handicrafts to older persons. Her students have sold tens of thousands of dollars worth of the products they learned to make in her classes.

Organizing such adult education activities is the work of the committee on education.

The subject matter for adult education courses covers the whole range of learning experiences from basic educational skills and simple forms of communication to the highest levels of complex knowledge. Fields of adult education include science, art, languages, history, literature, consumer education, and vocational preparation. Older persons are particularly interested in the study of music appreciation, international relations, creative writing, oil painting, history of religions, nutrition, self-care, and fashion design, to mention a few.

Leadership training for volunteer service, to become officers of senior citizens' groups is another potential area for this kind of educational effort.

HOMEMAKER SERVICE

As a general principle, it is more satisfactory for the individual and the community to make it possible for people to live in their own homes as long as possible. This is especially true of the elderly. They would rather live independent lives on their own than go into institutions. By the same token, elderly people are also able to leave hospitals and return to their homes much earlier with the assistance of a homemaker service, so that they are not left completely to their own devices.

Sometimes an individual or couple can almost manage to do the housework, but not quite. Then a "homemaker" can come in once, or even several times a week, and keep the house in shape—cleaning, shopping,

cooking, and repairing. This service can keep a household going which might otherwise fall apart.

Such a service might be provided by a committee on homemaker services, perhaps with the expense being met by those who receive this service, by their families, by a welfare agency, by donations, or by the Community Chest. Expenses could also be met by a combination of sources. Counties may get 75 percent reimbursement for this service through their State Welfare Agency for persons unable to meet the expense themselves.

PRERETIREMENT COUNSELLING

Retirement often comes as a shock. Many people close their minds to it until the very day of retirement. The impact then is often severe. They are left bewildered, they don't know what their income will be, much less their cost of living. They seldom anticipate readjustments that will be necessary in housing; they have only a vague idea of how they will spend their time; they aren't sure of their tax or social security situation; they don't know much about replanning their social relationships or working out health and educational programs.

Preretirement counselling can prevent a great deal of the hardship experienced by those who are unprepared for retirement. Many large employers have set up preretirement counselling programs. But for many other employees, such programs are rarely available.

A preretirement counselling committee could bring together ministers, lawyers, doctors, social workers, educators, labor leaders, and businessmen, who might be able to cope with the problem and fill the need.

Experience has shown that older persons often need counselling in the following areas: health, finances, housing, employment, and personal and family relationships.

As a start, it might be possible to work out a series of lectures held at the public library or in a public school with speakers from various agencies which already have preretirement counselling programs who might be willing to extend their know-how on an informal basis.

You are not Alone

Now you have some ideas, and now you are ready to start. One thing you can count on is the support of a good many public officials whose life's work is devoted to helping you. Here is how it was put by Wilbur J. Cohen, Under Secretary of the Department of Health, Education, and Welfare: "The advancement of approved community planning is a responsibility shared by all three levels of Government. Responsible community leaders should initiate and carry out vigorous action to solve social problems of highest priority in their own locality ... the urgent need is for action beginning at the community level to develop more and better services to assure the maximization of each citizen's potential ... there should be citizen participation at all levels in planning and coordinating community services to meet the changing needs of our people."

Where to get Help

The Office of Aging, U.S. Department of Health, Education, and Welfare, is an excellent place to go for help. One of its principal missions is to stimulate States and communities to develop councils on aging. Its nine regional representatives on aging will be glad to help you. Following is a list of their addresses:

REGION I: 120 Boylston St., Boston, Mass. 02116
(Conn., Maine, Mass., N.H., R.I., Vt.)

REGION II: Room 1200, 42 Broadway, New York, N. Y. 10004
(Dela., N.J., N.Y., Pa.)

REGION III: 700 East Jefferson St., Charlottesville, Va. 22901
(D.C., Ky., Md., N.C., Va., W.Va., Puerto Rico, Virgin Islands)

REGION IV: Room 164, 50 Seventh St., N.E., Atlanta, Ga. 30323
(Ala., Fla., Miss., S.C., Ga., Tenn.)

REGION V: Room 712, New P.O. Bldg., 433 West Van Buren, Chicago, Ill. 60607
(Ill., Ind., Mich., Ohio, Wisc.)

REGION VI: 560 Westport Road, Kansas City, Mo. 64111 (Iowa, Kans., Minn., Mo., Neb., N.D., S.D.)

REGION VII: 1114 Commerce St., Dallas, Texas 75202 (Ark., La., N.M., Okla., Tex.)

REGION VIII: Room 9017, Federal Office Bldg., 19th & Stout Sts., Denver, Colo. 80202 (Colo., Idaho, Mont., Utah, Wyoming)

REGION IX: 447 Federal Office Bldg., Civic Center, San Francisco, Calif. 94102 (Calif., Nev., Ore., Ariz., Wash., Alaska, Hawaii)

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In matters of housing, you might want to contact any of the regional offices of the HHFA, listed below:

REGION I: 346 Broadway, New York, N.Y. 10013 (Conn., Maine, Mass., N.H., N.Y., R.I., Vt.)

REGION II: 1004 Widener Bldg., Chestnut & Juniper Sts., Philadelphia, Pa. 19107 (Dela., D.C., Md., N.J., Pa., Va., W.Va.)

REGION III: 645 Peachtree, Seventh Bldg., Atlanta, Ga. 30323 (Ala., Fla., Ga., Ky., Miss., N.C., S.C., Tenn.)

REGION IV: Room 1500, 360 North Michigan Ave., Chicago, Ill. 60601 (Ill., Ind., Iowa, Mich., Minn., Neb., N.D., Ohio, S.D., Wis.)

REGION V: Federal Center, 300 West Vickery Blvd., Fort Worth, Tex. 76104 (Ark., Colo., Kans., La., Mo., N.M., Okla., Tex.)

REGION VI: 450 Golden Gate Ave., P.O. Box 36003, San Francisco, Calif. 94102 (Ariz., Calif., Guam, Hawaii, Nev., Southern Idaho, Utah, Wyoming) Area Office: 909 First Avenue, Seattle, Wash., 98104 (Alaska, Mont., Northern Idaho, Ore., Wash.)

REGION VII: 1608 Ponce De Leon Ave., P.O. Box 9093, 4th Floor Garratton Bldg., Santurce, Puerto Rico 00908 (Puerto Rico and The Virgin Islands)

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Most States have official units on aging. They, too, are listed below and are good sources of advice and guidance. If your State does not have one, make it one of your goals to get one.

State Commission on Aging
State Administrative Building
Montgomery, Alabama 36104

State Commission on Aging
Room 240, 7 Hunter Building
Atlanta, Georgia

Governor's Commission on
Aging
Office of the Governor
P.O. Box 2981
Little Rock, Arkansas

State Commission on Aging
1040 Ahiahi Street
Honolulu, Hawaii 96817

Citizens' Advisory Committee
on Aging
1209 Eighth Street
Sacramento, Calif. 95814

Advisory Council on the Im-
provement of the Economic
and Social Status of Older
People
203 State Office Building
Springfield, Illinois

Colorado Commission on Aging
c/o Denver Metropolitan Coun-
cil on Community Services
1325 Delaware Street
Denver, Colorado

Indiana State Commission on
Aging and Aged
State Office Bldg., Room 1015
Indianapolis, Indiana

Commission on Services for
Elderly Persons
State Office Building
165 Capitol Avenue
Hartford, Connecticut

Governor's Advisory Com-
mittee on the Aging
1215 M.W. B.B.
Cedar Rapids, Iowa

State of Delaware Division of
the Aging
P.O. Box 57
Smyrna, Delaware

State Interdepartmental Com-
mittee on Aging
State Capitol Building
Topeka, Kansas

D.C. Interdepartmental Com-
mittee on Aging
499 Pennsylvania Ave., N.W.
Room 300
Washington, D.C.

Kentucky Commission on Aging
State Office Building
600 West Cedar
Louisville, Kentucky

Florida Commission on Aging
107 West Gaines Street
Tallahassee, Florida

Louisiana Commission on the
Aging
P.O. Box 4282, Capitol Station
Baton Rouge, Louisiana

Maine Committee on Aging
11 Chapel Street
Vickery-Hill Building
Augusta, Maine

State Coordinating Commission
on Problems of the Aging
Room 402, State Office Bldg.
301 W. Preston St.
Baltimore, Md., 21201

Massachusetts Commission on
Aging
19 Milk Street,
Boston, Mass. 02109

Michigan Commission on Aging
230 N. Grand Avenue
Lansing, Michigan

Minnesota Governor's Citizens
Council on Aging
Centennial Office Building
658 Cedar
St. Paul, Minnesota

Mississippi Council on Aging
P.O. Box 1698
Jackson, Miss.

Nebraska Governor's Com-
mittee on Aging
1145 South Street
St. Elizabeth's Hospital
Lincoln, Nebraska 68502

New Hampshire Council on the
Aging
State House Annex
Department of Health and Wel-
fare
Concord, N. H. 03301

New Jersey State Division on
Aging
129 E. Hanover Street
Trenton, N. J. 08625

Citizens Advisory Committee
on Aging
New Mexico Department of Pub-
lic Welfare
408 Galisteo
Santa Fe, N. M.

New York State Office for the
Aging
112 State Street
Albany, New York 12201

Governor's Coordinating Com-
mittee on Aging
Education Building, Capitol
Square
Raleigh, North Carolina

Governor's Citizens Committee
on Aging
c/o State Department of Public
Welfare
Bismarck, North Dakota 58501

Special Unit on Aging
Oklahoma Department of Public
Welfare
P.O. Box 53161
State Capitol Station
Oklahoma City, Okla.

State Council on Aging
P.O. Box 5197
Eugene, Oregon 97403

Office for the Aging
Department of Public Welfare
Health and Welfare Bldg.
Harrisburg, Pa.

Puerto Rico Gericulture Com-
mission
Box 9342
Santurce, Puerto Rico

Rhode Island State Division on
Aging
25 Hayes Street
Providence, Rhode Island

Tennessee Commission on
Aging
C2-209 Central Services Bldg.
Nashville, Tenn.

Governor's Committee on Aging
Box 12125, Capitol Station
Austin, Texas

Utah Council on Aging
B-18 State Capitol Bldg.
Salt Lake City, Utah

Interdepartmental Council on
Aging
Department of Social Welfare
Riverside Building
Montpelier, Vermont 05602

Insular Department of Social
Welfare
P.O. Box 539
Charlotte Amalie, St. Thomas,
Virgin Islands 00802

Commission on the Aging
500 Virginia Building
Fifth & Main Streets
Richmond, Va.

Governor's Council on Aging
P.O. Box 1162
Olympia, Washington 98501

West Virginia Commission on
Aging
P.O. Box 727
Elkins, West Virginia

State Commission on Aging
State Capitol - 6 West
Madison, Wisconsin

In rural areas, you can also call upon your County Agent of the Cooperative Agricultural Extension Service for helpful informational material.

Remember--as was pointed out earlier--coordination with local and State agencies is an essential ingredient. Public agencies in health, welfare, education, employment, and other areas, and private voluntary agencies in these fields, can help you, encourage you, and work with you.

PRESIDENT'S COUNCIL ON AGING

Members: Anthony J. Celebrezze, Secretary of Health, Education, and Welfare (Chairman); Henry H. Fowler Secretary of the Treasury; Orville L. Freeman, Secretary of Agriculture; John T. Connor, Secretary of Commerce; W. Willard Wirtz, Secretary of Labor; Robert C. Weaver, Administrator, Housing and Home Finance Agency; John W. Macy, Jr., Chairman, Civil Service Commission; William J. Driver, Administrator of Veterans Affairs.

Background

To assist the Chief Executive meet the problems of aging, which are growing in size and complexity, and to coordinate the Federal programs on behalf of older Americans, the President's Council on Aging was established by Executive Order 11022 on May 14, 1962. Its members include those heads of Cabinet Departments and independent Agencies that administer the major Federal programs in aging. Last year, the Federal Government's cash expenditure for the aged was more than \$19 billion. There are 45 Federal programs for older Americans.

Council Functions

1. Maintain a continuing study of the overall responsibilities of the Federal Government to the problems of the aging, and make recommendations to the President concerning policies and programs required to meet Federal responsibilities, particularly on matters which do not fall within the jurisdiction of a single agency.
2. Identify matters which require coordinated action by two or more Federal agencies and make appropriate arrangements for joint or coordinated action, including, as appropriate, conferences, joint studies, and the development of recommendations to the President.
3. Promote the sharing and dissemination of information on the needs of the aging and policies and

programs relating to the aging, among Federal departments and agencies and between them and State, local, or private agencies and organizations having functions or interests in fields relating to the problems of the aging.

4. Prepare an annual consolidated report to the President concerning the activities of the Council and the several Federal departments and agencies having programs relating to the aging.

PARTNERS IN ACTION

DEPARTMENT OF AGRICULTURE

Office of Rural Area Development
Federal Extension Service
Farmers Home Administration
Economic Research Service
Agricultural Marketing Service
Agricultural Research Service

DEPARTMENT OF COMMERCE

Bureau of Census
Area Redevelopment Administration

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

Welfare Administration
Office of Aging
Bureau of Family Services
Social Security Administration
Vocational Rehabilitation Administration
Public Health Service
Bureau of State Services
National Institutes of Health
Office of Education
Food and Drug Administration
Saint Elizabeth's Hospital

DEPARTMENT OF LABOR

Office of Manpower, Automation and Training
Bureau of Employment Security
Bureau of Labor Statistics
Bureau of Labor Standards

TREASURY DEPARTMENT

Office of Tax Analysis
Internal Revenue Service

CIVIL SERVICE COMMISSION

Bureau of Retirement and Insurance

HOUSING AND HOME FINANCE AGENCY

Federal Housing Administration
Community Facilities Administration
Public Housing Administration

VETERANS ADMINISTRATION

Department of Medicine and Surgery
Department of Veterans Benefits

**DEPARTMENT OF
HEALTH, EDUCATION, AND WELFARE
WASHINGTON, D.C.**

OFFICIAL BUSINESS

**POSTAGE AND FEES PAID
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