The major objectives of the Education for Senior Adults Leadership Development Institute were: (1) to give a deeper understanding of the characteristics of senior adults; (2) to give a sense of the richness and variety of activities that could be built into a program for the aging; (3) to provide help in problems of organizing and administering educational programs for the aging; and (4) to motivate participants to use what they learn when they return to their communities. Addresses covered: an overview of education on aging; sociological aspects of aging; recreation's contribution to education of older adults; physiology of aging; the role of the arts in the education of the aging; the place of the church in the continuing education of the aging; what it means to teach older adults; counseling of older adults; a comprehensive and coordinated community approach in planning education program for older persons; and use of the library and other community resources. A general section given on evaluation, emphasizes the relationship between evaluation and goals. This is followed by a copy of three evaluation forms used during the institute and a bibliography. (nl)
EDUCATION FOR SENIOR ADULTS
LEADERSHIP DEVELOPMENT INSTITUTE • FLORIDA STATE UNIVERSITY

Dr. Andrew Hendrickson,
Project Director

in cooperation with:
THE OFFICE OF CONTINUING EDUCATION
Florida State University

supported by:
THE FLORIDA COMMISSION ON AGING
The Florida Board of Regents (Title I Higher Education Act)

Department of Adult Education
Florida State University
Tallahassee, Florida
JUNE 1969
EDUCATION FOR SENIOR ADULTS

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Program Development

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FOREWORD

The Department of Adult Education of Florida State University is happy to have been able to hold the first informal institute on education for older persons to be offered by an institution of higher education in Florida. Other Florida universities have been active in this field for some time. The University of Florida, through its Institute of Gerontology, has for nearly two decades serviced professionals in the field by its Annual Southern Conferences on Gerontology and in other ways. Likewise, the University of South Florida has for a number of years carried on research in the field through its Institute on Aging. More recently it has developed a degree program to provide training for personnel in the field.

It has remained for Florida State University to make its contribution by initiating the first of what we hope will be a series of institutes or workshops offering intensive short-term training for those who entered the field with little preparation. The institute herein reported upon was made possible by grants from the Administration on Aging in Washington (administered through the Florida Commission on Aging) and Title I of the Higher Education Act of 1965 (administered by the Florida Board of Regents). If follow-up proposals which have been made to these agencies are funded, a second institute will be held in the summer of 1970.

Since the field is rather new, little is known about training needs of the mixture of professional, semi-professional and lay persons who have accepted staff responsibility in working with the aged. Therefore, certain assumptions were made about the type of program which would be most useful. An examination of the program outline in the Appendix will show a balance between presentation on content and opportunities for group discussion. The topics of the lectures also represent a balance between theory and practice. Liberal use was made of filmstrips and blackboard illustration, and one extensive field trip was provided for. Since the institute adjourned each day at 4:00 p.m., and since there were no weekend assignments, adequate time was available for participants to make use of the library of books and journals which had been assembled, and to examine the quantity of literature made available by participants in the form of program announcements, promotional literature, and pictorial material.

While this institute was an undoubted success we hope to improve on it if permitted to hold others in the future.

George F. Aker
Chairman
Department of Adult Education

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OBJECTIVES OF THE INSTITUTE

A. Major Objectives

1. To give you a deeper understanding than you already have of the characteristics of the clientele with whom you are dealing. This will include:
   a. The physiological aspects of aging.
   b. The social and psychological problems connected with aging.
   c. The learning capacities of the aging.

2. To give you a sense of the richness and variety of activities that could be built into a program for the aging.

3. To provide you with help in the practical problems of organizing and administering educational programs for the aging. These include determining needs, program planning, financing, coordination with other agencies, publicity and promotion, and similar matters.

4. To return you to your communities inspired and equipped to improve an already existing program or to start a new program.

B. Minor Objectives

1. To bring together a cross section of persons mainly from the non-public sector so they could become acquainted with what each other are doing, share ideas and stimulate each other’s thinking.

2. To provide the opportunity for each participant to study some aspect of our topic intensively and take home a document or documents which he can put to use in his own program.

3. To produce and distribute a monograph containing the results of the individual and group thinking which develops from this Institute.
Overview of Education on Aging

Dr. Thomas A. Rich, Director
Institute on Aging
University of South Florida

When I began to prepare for today's talk, I had the usual difficulty--where to begin? I decided that perhaps the most important thing that I could do would be to concentrate on you as representatives of the next two generations of older persons who will need continuing education and let the content of the rest of the program concentrate on today's aged person. I am going to talk about you and aging so I hope you will have a new perspective on the program. For some, this may be uncomfortable.

The following factors need to be evaluated to have an effective program for teaching older persons or for that matter, persons of any age.

1. A self-analysis of one's own attitudes towards aging both in other people and one's self.

2. The person and program flexibility to meet the constant change required in programs for older people as each new generation presents higher education levels and greater expectancies.

3. The flexibility to go to the class which might be a retirement home, a housing center or some other grouping, rather than having classes come to you.

4. The openness of mind to experiment with new methods of education, including automated and programmed instruction, with its possibilities for self-pacing and reinforcement and have not yet really been fully incorporated into the programming for older citizens.

5. The flexibility again, in self and programs, to recognize that the older person lives 24 hours a day and doesn't need just night programs or late afternoon programs but often is an early riser, up at 5 or 5:30 and might like 8-9-10 O'Clock programs.

Many of you have considered the above factors and have adjusted your programs. I am here to call your attention to the fact that they are real needs that all programs must consider. First, go back to a self-evaluation and think about your own stereotypes about the older person. Don't just shake your heads because I know that we all have our own pet stereotypes about any age group, children, juveniles, middle-aged adults or older
citizens. Most older people are not physically incapacitated, they are not disengaged from society, they are not ready to say that it's a young man's world and retire. In some cases, they may play these roles, but it is often because our society has provided no other possibilities and they are having difficulty becoming and staying engaged as active, participating members.

For example, there are many areas that we have little information about, including the dating behavior of older people. I use that example because it's least likely to have occurred to you but since over 7,000 people over age 75 will re-marry or marry for the first time this year, it is a subject that could bear some observation. We are much more likely to consider older adults as objects to be cared for in a sense of dependent children and forget that they are capable of carrying on their independent lives and meeting their own needs for affection through their own interaction with other older people and younger people on much the same basis that you and I accomplish this.

In this particular regard, I spent some time going through a book of limerics because I was curious to see if old age was considered a suitable topic for this form of humor. I did find one which seems to go along with the facts I just quoted above:

There once was an old man of lyme,
who married three wives at a time,
when asked why a third, replied,
one's absurd and bigamy, sir, is a crime.

Now that we have managed to introduce the topic of aging on a somewhat personal basis, I'd like for you to do something for me.

1. This is probably the most difficult, but turn to the person by you and smile. Introduce yourself and then tell them your age, without evasion, stammering, stuttering, or otherwise showing reservations. You can evaluate your own little block in doing this as an index of how you feel about age. After you have done that, talk to each other for a minute, come up with a few relevant comments about how you feel about growing older and suggest to each other what you are doing to offset this process.

While I couldn't hear your comments, I know that if you were being honest about it, you were engaging in describing what many authors have talked about as self- or body-monitoring and it is a good index of your own evaluation of aging and change. The first peak of body-monitoring comes around adolescence because there is dramatic change and you can all think back and remember yourselves or your children, how every little incoordination or assumed distortion of a nose or an ear or body, assumed gigantic proportions. This seems to get lost somewhere in the process of late adolescence and doesn't reappear until somewhere
around middle age. As an aside, I might say that as a clinical psychologist, when we find males or females who still show the adolescent reactions to some of their features, it becomes a fair index of their lack of emotional growth in those intervening years. However, back to middle age. There are many ways in which you begin to do your body monitoring. I can list a few of the areas which you probably haven't considered as technical approaches and haven't thought that researchers have already observed you. (1) You check your skin to see if it's dry and companies make billions of dollars so that the young ladies will have the dewy, moist, glowing skin that they had the day that they were born, at least for awhile. (2) Hair, both sexes, increasing use of hair stylist for men and women, hair pieces, checking to see if it is getting a little thinner, etc. (3) Teeth--taking a long look at the teeth in the morning is a part of the waking up process, somehow invoking some magic to make sure they are all there and youthful looking. (4) Concern with vision--do I see as well, do I need bifocals, can I hide it by getting contacts, or will contacts simply be more efficient. (5) Hearing--is it just a little harder somehow to keep up with the conversation or do too many people talk at once and create static and irritate me. (6) Joints and muscles--do I feel a little stiffer here and there after I have exercised--I wonder what causes that? Probably not getting any older, just haven't had enough exercise lately. (7) Weight--increased tendency to step on the scales every morning and then rationalize about whether one is carrying extra body fluids that really don't count as weight today, or the scales are a little off and then checking again that night to see if they still look that way. (9) Distribution of weight--it's not only the amount of weight, but the distribution. Is there a bit more around the middle, or a bit more around the sitatal??? or wherever we don't want it to be. (10) An increase in physical exams as recommended, but also showing that we have taken cognizance of the fact that there might be some changes, we don't really want to go. (11) Concern with things that somehow once were not so important and that's insurance, retirement plans and savings. (12) One of the major crises of middle age is in acceptance of mortality, death, not being. We have all adjusted with some ease to the process of becoming, the process of being, but now suddenly, we have the process of not being and this involves a whole range of new things which must be considered. What are we going to do about all the high goals that we had in our life, are we meeting them, are we achieving what we set out to do. A somewhat positive answer can lead to further growth and acceptance of one's self, a negative answer often leads to loss of motivation and irritability and sometimes, extreme depression. What happens to our time perspective, and this is one of the best indices that we have discovered for you. When did you start counting how many years you have left instead of how many you have lived. This happens to most people between 35 and 45. Think about it for a minute for yourselves.
I've been asking you to review your own life processes, life cycle, because you are the tool, the implement for teaching people who have done this very same thing or have lived through it and your own self-awareness of the process of aging as it is taking place in you, will make you a more effective worker in dealing with older people and understanding the things that they have had to adjust to. If you solve all of these tasks, can maintain your body-monitoring without becoming a hypochondriac, can adjust your achievement goals without becoming depressed, then you are still becoming and growing more mature. To the extent which you deny that these processes are taking place, refuse to consider that they exist at all, then you are not continuing your progress toward maturity. Perhaps the best statement, although a bit pessimistic, that I have ever seen about man's place in this world is a quote by Pascal, about 1600, beginning:

"When I consider the short duration of my life, swallowed up in the eternity before and after, the little space which I fill and even can see, engulfed in the infinite immensity of space of which I am ignorant and which knows me not, I am frightened and astonished, being here rather than there, why now, rather than then."

A second major factor that I mentioned earlier in the talk, is a need for you to change constantly to meet the changing educational levels and other changing expectancies, things that are taking place in areas such as housing, educational progress and to incorporate these in the programs for older people. This requires flexibility on your part. Some of you probably have already rejected automated teaching because you weren't taught that way. I know this is true because we have people on our own faculty at the University who say that their students don't like automated learning and invariably it is the person who announced before he started to use it that he didn't like it either.

Your problems in this area change almost daily, since there has been a considerable decline over twenty years in the percentage of adults who had no schooling and there is a rapidly increasing number of persons who have completed high school and a little later of those who have completed four years of college who will be coming to you for further education and this is quite different from the problem presented, say in 1940, when the median number of school years completed was about eight years. In addition, you have to be a demographer and break down such figures that are thrown at you by people like myself or government bulletins and realize as you do that when you talk about high school or educational achievement for white vs. non-white, Latin or immigrant populations, or rural vs. urban, you come up with different figures, which means that you have to adjust your own expectancies for these students. We are in the process, at present, of surveying the junior colleges around the state
and we will be getting information from centers such as the one you come from to find out precisely what kinds of programs are being offered for older people in the State of Florida. Courses range from ceramics to Greek mythology and from courses designed specifically for the aged to a general acceptance of the older student into any class. There is much more activity going on in the State of Florida than I would have guessed without beginning this survey. Many of you are contributing to or are probably doing much of this education that’s taking place.

As a psychologist, I can’t leave this topic without commenting on the psychological data that has been collected. Like most of the data, from all of our fields, it is not extremely useful and represents only a beginning. When data is collected and applied in an eco-system, based on functionality, then it will have more meaning for you and for me in our work. It’s one thing to report levels of visual loss in the laboratory, and this is quite important as a beginning. The next point is what does this visual loss mean and where are the critical points in terms of reading stop signs, seeing a traffic light change, and what simple changes in the environment might offset this so-called loss and make it simply a change. If I lower my voice those of you in the back of the room have a hearing loss, if I raise my voice, on a functional or behavioral basis, you no longer have a hearing loss. Again, so there is change, how do we convert this change into positive use in modifying our environment so that it is not a handicap for the older person. It is a change which is met by a parallel environmental change, so his learning is not impaired, his perception is not impaired except as that as compared to a two year old or a twenty year old. Let me very briefly review several areas where I think many stereotypes are to be found.

The first area that I have just alluded to is change in psychomotor behavior. There is a steady decline in psychomotor capacity with increased age and there is some evidence that there is a need for greater time for processing information. As I said above, the timing on a street light may be simply inadequate for the older person and perhaps the speed of an escalator, or the slope of stairs and yet these can be offset by relatively simple changes in environment.

Changes in Intelligence: General intelligence may not suffer in old age, when activity is maintained. Studies suggest that the higher the educational level, the less the change in later learning ability. Maintaining learning seems to keep the proper set for learning and very little loss is noted in older subjects who have been active in learning situations throughout their life. Older subjects also often show a rise in measured intelligence when environmental conditions are improved. Sharp drops in intelligence appear to be related to general decline and death. Motivation to learn is highly questionable with some
kinds of teaching approaches and certainly has complicated our evaluation of learning ability in older people.

As a result of some of these changes, that have been well documented in laboratories, some of these older people do begin to see the world as rejecting and dangerous, because it is rejecting and dangerous and as I have repeated throughout this paper, one of our major problems as professionals in any of our fields, is to help adapt this world to the needs of the older person, rather than continuing to view him as handicapped.

In summary, one might say today that I have begun the question or the case of the aged citizen as student vs. the state. The charge has been aging, loss of memory, decreased judgement, idleness, vagrancy, at least based on labor department statistics on income level, poor health, etc. The defendant has been 20 million Americans over 65, the witnesses who are to appear or who have appeared, let's say for the moment, would be a physician aged 35, who is impressed by the increased number of ill persons who come in his office and therefore tends to think of the older person as chronically ill, although about 80 percent of them are able to lead effective, independent lives. The next witness for the prosecution is a 35 year old sociologist and he is concerned with the disengagement, the lack of interest shown by the older person and adds evidence there, although he does, perhaps, consider the fact that society is not structured for many older people to be engaged. The next witness for the prosecution is a psychologist aged 35, who has demonstrated the losses in sensory and cognitive systems, when measured in the laboratory. He also recognizes that these are in comparison to some other age standard and hasn't quite been able to relate them to the real world outside the lab where the older person lives. The next and possibly the last witness for the prosecution is the educator who is still reading the literature of the 30's or remembers what was printed about it when it was indicated that there was a sharp decrease in learning ability, somewhere after one reached the peak of manhood somewhere in the 20's and rarely is it worthwhile to concentrate on education for the elderly. I only ask that this case be carried over for 35 years so that I may call the witnesses for the defense before any decision is made. This is an unusual request for delay in a hearing because I'd like to call back that physician who still maintains practice very likely, when he is now 70, and that sociologist who has just been retired because he is past the retirement years, but he is still writing a book that he would like printed because it represents his life's work and that psychologist who has also just been retired because he is also over the magic age of 70, but he is in the middle of some research in teaching that he is able to do most effectively and that educator who's been gently let out of the system who would like to continue to learn something about his own field and finds that he's viewed perhaps as an old crock. I'm not sure the judge will grant me a delay
in this case of 35 years, but I think my point can be well made if you will consider how the witnesses for the prosecution might testify 35 years from now, or, how you might testify 25 or 35 years from now.

I will now end by borrowing from, as I frequently do, some material from a term paper from one of our graduate students in the Institute on Aging at the University of South Florida. For those of you who would like to be around when this court case I have described comes up for the final hearing in 35 years, I would like to read this description to you that came out in 1963 by Kinch, et al., on what kind of person you should be, based on his summary of the literature of 1963, in order to live to an old age and enjoy these benefits I have been describing. Some of you may have heard this; it won't hurt you to hear it again. Your best chances, apparently, would be summarizing all of the multi-faceted research that has come out if you are an...

"...effeminate municipal worker or embalmer, (perhaps educator) would fit here, completely lacking in physical and mental alertness and without drive, ambition or competitive spirit, who has never attempted to meet a deadline of any kind, a man with poor appetite, subsisting on fruit and vegetables, laced with corn and whale oils, detesting tobacco, spurning ownership of radio, TV, or motor car, with a full head of hair and scrappy and unathletic in appearance, yet constantly straining his puny muscles by exercise, low in income, blood pressure, blood sugar, uric acid and cholesterol, who has been taking nicotinic acid, pyridoxine and long term anticoagulant therapy ever since his propylatic castration."
Paul Weiss, a Yale professor of philosophy, has written a book called "Sport: A Philosophic Inquiry." Out of this book, I have taken a definition which is significant to athletes and to the aging population. The word defined is rhythm. "Rhythm", for Professor Weiss, "includes the interlacing of movements with rest...it keeps abreast of changes in what is being used and what is being faced. In effect, therefore, it is a sign of the degree of harmonization that has been achieved by oneself and expressed in activity."

And what is a more significant living example of this definition than life itself with its creation, growth, united living, procreation, achievement, interspersed joy and eventual aging.

For the purpose of this paper, I would like to pick up life at the time the young couple has just been married. It's a time of happiness, a time of looking forward, a time of movement toward change and the understanding of what is being faced. It is the excitement of a satisfying job, the purchase of a house and filling it with furniture. And eventually when a degree of harmonization has been achieved, then there is the creation and the formation of a happy family. And so the rhythm of family living goes on for the next ten or fifteen years: promotions, increased responsibilities at home and at work, growing achievement, periods of rest and growth of the family with its success and small disappointments. This is a happy time for the whole family for there is unity amongst its members. There is a bond that keep the family strong and happy. The parents, too, have a happy, secure feeling for after all, they have achieved a certain status in their community. They had produced a happy brood of children and had provided a standard of living for them. The man of the house also has received further satisfaction because of his advancement in business or in his work. And, he feels this pleasant rhythm of life will continue forever.

Then the first blow falls which almost shatters this happy life. And what shatters this happiness? The daughter or son leaving for college, or the eldest son being drafted into the military service, or the teen-age daughter getting married. Once the magic family unity has been broken, it can never be repaired again. The father begins to realize that a great deal of time has passed and that the years had piled up on him. As the next ten years pass, there is a repetition of graduations, marriages, and anniversaries. With years racing toward the 55th birthday and in clear view of the 65th, the man of the house becomes to feel vulnerable. His work production has peaked and the younger
members of the company are giving him more competition. The once lovely house looks a little dated and the rooms that had been so crowded are now ever so large and empty.

These are the small, cumulative emotional blows that fall upon the father as he reaches 65 and the most difficult blow of all falls with retirement. It should be noted that our American society does not look very favorably at those who are not engaged in productive work. Those who work, who produce, those who achieve, these are the admired people. So a man who had been the head of a large corporation, who had responsibility for thousands of employees and millions of dollars - after retirement finds himself in an unenviable position as being just retired. One day he had the ability and resources to direct a huge enterprise, the next day he retires and he's just another person who had passed his retirement date.

Along with the aging process just described, there is another phenomenon at work and that is change. And the change that has occurred in the last twenty years has affected all of us individually. The man who is sixty-five today was probably born in a small town. During his early life, he walked to school, walked to church, and walked to the grocer, the butcher and the cobbler. For entertainment he and his companions had the open fields, the woods and the streams. As he left school at an early age, he found employment in a local business or factory. He also walked to work which began at 6:00 a.m. and returned home at 6:00 p.m., often carrying discarded packing case lumber for his wife's wood-burning stove. He also worked six days a week. On the seventh day he relaxed with his family or visited with friends. His entertainment revolved around the lodge, the firemen's picnic, the church social and an occasional stage play put on by itinerant actors. The movies were just beginning. He read about Marconi and the radio and TV was an unknown word. If the family wanted to visit relatives in the large city, the mode of transportation was the train. To tell his relatives that the family was coming he telegraphed, the telephone was still only in limited use. The automobile was just beginning to be seen on the dusty roads. Horse-drawn vehicles were more popular.

In the home, the housewife had to contend with a water pump, coal stove, ice box, and hand laundry. There were no convenience foods or boxed cakes. No detergents or synthetic fabrics to make wash day easy. She was a housewife in the true sense of the word tending to her brood, cooking, washing, and cleaning. Her social life revolved around her neighbors, relatives, and church.

What I'm trying to emphasize here is the relatively simple life that prevailed in the years prior to 1925. The tempo and rhythm were slower and easier. Although here I must say that life in every period had its crises and excitement and that making a living and providing for a family was never easy or simple. Gradually the tempo of life picked up and roared to a prosperity
that was never known before in the United States. The Great Depression brought to the head of the household great caution which even in the present prosperous years he was unable to shed.

The greatest change in our life came during and directly after World War II. There has been more progress in the last twenty years than in all the prior years of our civilization.

The elderly breadwinner at the time of reaching his golden years of retirement is caught up in this tremendous change. Often he doesn't understand it and seldom can he change to keep up with it. Adjustment to the present tempo of life is difficult for him, and what complicates his later years more is the life process. He and his wife find themselves alone, their children married or living in the big city, their friends dying or moving to the suburbs, while strangers with strange accents move into his old neighborhood. His church, which he knew so well, has also changed or moved to the suburbs, too. The familiar shops and shopkeepers have also gone and in their place the glittering but impersonal supermarket. The streets that once bore leisurely moving traffic of horse-drawn vehicles, bicycles and early vintage autos are now filled with shiny, speedy, high-powered sports cars. It is the era of the young and sporty generation. The emphasis is on youth. No one ever mentions the elderly or the old and no one ever thinks of dying.

So the elderly person, as he reaches his retirement years, has to contend with the blows put upon him by life in the rearing of his family. Simultaneously, he has to contend with the complicated and quickly increased tempo of daily living. And, as he reaches his "golden years" he finds that no one really wants to be old--the important thing is to be young.

One other important development which troubles our elderly people, that is, the changing attitudes of the young people towards authority, marriage, sex, and the use of drugs. They can't quite understand the mini-skirted girls and the bearded, long-haired men demonstrating on college campuses. They can't understand the pot parties, use of drugs, or the happenings in which young people participate. What were the older man's thoughts when he saw on T.V. the Harvard University Commencement Exercise interrupted by a member of SDS who harangued the audience? (What were your thoughts?)

There are some things that modern technology has developed for the benefit of our aging population. Modern technology and production methods have made available better nutrition and excellent medical facilities so that older people are in relatively good health. And a thoughtful government has seen to it that most retired workers have some income, if they had a little more income they could manage financially very well. And despite the fact that this is a youthful generation, the young people do have a concern for the old.
As the elderly person is faced with a multitude of adjustments to his advancing age, his growing needs are becoming known to every segment of our society and to every echelon of our government. The elderly, their relatives, their friends and concerned citizens are looking to the community—whether a city, village or town—to provide the resources to meet their needs so that they can live their retirement years in happiness.

I often ask my young students what do they want out of life? The answer: security, status, a happy social environment. When I tell them to be more specific they answer: a good paying job, education, marriage, a home, furniture, children, travel, leisure time, new automobile, clothes, good health, spiritual enrichment, companions, and friends. Some mention giving leadership in doing good deeds, some mention concern for the welfare of all people. Some want to be involved in making this a better world to live in.

Then, I ask them what do old people want out of life? And as they answer they begin to realize that the older, too, want a good home, furniture, financial security, clothing, good health, an opportunity to worship God, an opportunity to help others in the community, in fact they want everything that the young people except for one thing and that is children. And even there they can meet this want by being foster parents. As the young people seek happiness so do the old people but somehow it is more difficult for the Senior citizens to find this happiness.

When I take my young students to convalescent homes, old folks homes, and the geriatric wards of the State Hospital, they are often appalled and upset at what they see. Their hearts go out to the old institutionalized person. They come back to the classroom filled with questions. Why do the older people have to spend their remaining years in idle waiting? And this is the question we have to ask ourselves. What can we do to provide for the needs of our older citizens? Their needs are: activities for leisure time, social living, employment, education, good housing, legal information, companionship, good medical care, social work and vocational counseling and often financial aid. Meeting some of these needs for the aged person means the difference between living a happy, useful life and existing in idleness in the State Hospital or nursing home.

In providing for the needs of the elderly we can help them keep abreast of the changes in what is being used and what they have to face so that they can effect a degree of harmonization in themselves and express it in their activity.

So far this presentation has discussed the successful working man who has been able to provide satisfactory financial support to his family. In retirement his social security payments combined with savings and a pension provide him with financial
security. His education and his social and cultural contacts have somewhat prepared him for retirement. But what of the culturally deprived minority? What of the poorly educated? The poorly paid? What about the elderly who have never been able to accumulate savings and even now are living on marginal income? What about those who are ill and can not afford medical attention? Is it too late to open the books for them and help them acquire a new skill so that they can work and participate in the new prosperity? Is it too late to help this group develop creative art skills? Shouldn't this segment of our society have decent housing, adequate medical care and an income that will provide their needs?

The answer is resoundingly YES! and responsible individuals in every community should give support to the social and educational institutions so that this minority can also find contentment and happiness in their retirement years.

I would like to conclude my address by offering some suggestions on keeping young. These suggestions have come out of many discussions with young people on the subject of being classified as old. To stay young you have to have an open mind to change, and to be able to change ones ideas, concepts and taboos. You have to keep abreast of the current events and be able to relate to them. You have to feel and think young, be pleasant, be enthusiastic and keep in style. You and your agencies can help many senior citizens stay young and in the process you will stay young too.
Today I would like to deal in the realm of ideas and attitudes toward Recreation and hope that these ideas will percolate and keep reappearing at other times during your time on campus. I hope they bear some relationship to other presentations because we are talking about people and although I will present ideas concerning a special portion of life, Recreation; man functions as a total being.

Let's make sure we are all talking about the same thing. I don't want to over-emphasize semantics but I do find a great many people interpreting the term recreation as a momentary, frivolous, physical activity that really has no purpose other than to fill in time or keep a person busy. I also find the term leisure categorized in a similar way. I would like to have you reject this interpretation and consider Recreation as any purposeful experience participated in during leisure. I would further underline and emphasize the words purposeful and participate. The value systems that people adopt and live by are reflections of our cultural heritage which in turn is determined by the choices we make during our leisure. I guess it is the old hen and egg story and whether culture reflects recreation or recreation affects culture, but each is dependent upon the other.

I am vitally interested in life patterns, in Recreation. It is my belief that people pass through very similar patterns of living and these patterns are reflections of a person's needs and desires although these needs and desires are not necessarily congruent. Most of society recognizes and studies the stages of development of humans from birth to adulthood (0 - 21 years) then we say we are adults and treat everyone over 21 alike. Everyone thinks of 40 as over the hill so we may recognize a change at this point of life. Social Security made us aware that 62 and 65 were magic numbers and so it is that gradually we are accepting the idea that life and development is on a continuum and it truly has very recognizable features at particular times.

Each age has its peculiarities. We talk glibly and in considerable detail about the 16 year old and we are beginning to talk about the 55 year old but with far less detailed information available. May I press this idea of continuous development and indicate some of the critical years of transfer from one stage to another. Let us list certain ages and associate particular developmental patterns that occur at that time with a large number of people. Six months (first tooth) - 9 months (walk) -
2 years (talk) - 6 years -(first grade) many new things are open to six year olds - 13 years (Bar Mitzvah)- 16 years (driver licenses) - 18 years (graduation from high school) - 21 years (legal age to drink) - 25 years (?) now you're getting stuck. Maybe it's married, divorced, first child, change jobs, out of the Army, or a host of other items, but the idea is that there is an important change in people and their life patterns at key ages.

From age 21 and upward I usually have to put the emphasis on the changes and attach an age range that accommodates the majority of people. This is most unscientific and needs a great deal of study but think of the important things that have occurred in your life. Getting your first job; marriage; first child; when the last child entered first grade, mama's life changes. When are the critical years in marriage that divorce occurs? When do we first have the feeling that retirement isn't really far away? The idea is that man follows a fairly predictable path of development. You fill in the epochs and detail. I challenge you to know yourself and the epoch your approaching.

Another idea associated with this pattern of development is that man can't wait to grow up and strives to postpone growing old. Little girls with lipstick and formal dances at the ripe age of nine and grandma in her mini skirt.

Another idea associated with this development pattern is that the key factors in motivation change. You readily can see that motivation is keyed to what "bugs" people. The most susceptible buyer of a hot sports car is really not the 18 year old but the 50 year old male who is fighting old age. Of course, his answer for all to hear is I'm buying this for my 20 year old son. If you don't believe this go to a convention where mama is not present and observe papa while he is out with the "boys".

How often do we change our patterns of life? There are so many factors that affect these changes that it is hard to predict. We have observed a general rule that the rate of change is such that in children we often group two ages together without too much difficulty. First and second graders could respond favorably and likewise ninth and tenth graders. I believe that as we grow older we could group people in five year intervals and have fairly homogeneous groups. Please understand I'm more experienced in Recreation groups and do find many factors that are more effective than age in grouping people. It is my belief that people tend to stay active and interested in an activity for about five years before they seek new challenges. Average active membership in civic, social or fraternal clubs is approximately five years. You will notice business changing personnel to affect growth and production of employees about this length of time. Hobbies last about this long.
This heads me to another idea and that is if the life patterns of people have not planned changes in the work or religious aspects, these changes are going to have to be affected in the Recreation (leisure) life of people.

Our Recreation programs fall flat many times because we didn’t use the motivation that puts real purpose into the activity. Let's face it, people at 60 years of age today have strong value systems based on this concept. Man needs to continually be challenged. This is a learning process. I have indicated that our interest change every five years and this may be due to the learning plateau or lack of challenge with which the activity is endowed. One can readily see that to master the game of checkers is not as challenging or involved as that of chess. This is due to the nature of the game. Our Recreation activities are much the same. We constantly seek to learn new, different skills and knowledges. It is of utmost importance that we have Recreation leaders who recognize that man needs the challenge of learning the success of accomplishment, and that he program progressive activities or tasks and not stagnate. The Recreation Program is becoming the place in our society where man can find the outlet for his needs and desires that were formerly met by work.

I have not emphasized the changes in our society and the vast differences in attitudes and ideas that are pointed out in today’s remarks about "generation gaps." Today we face an even more volatile change from an industrial centered society to a leisure centered society, and I am loth to guess at the life pattern changes this will bring.
The Physiology of Aging

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What determines functional span and life span? Is it primarily due to some unknown factor such as a chemical or a hormone? Is it due to disease or a series of diseases?

This paper will include a discussion of both the physiology and pathology of aging with some thoughts on how the aging process can be postponed and how the individual can remain functional and productive for a longer period of time. Let me describe what I mean by the term aging. Aging is not so much a matter of chronology as it is a matter of functional status. Aging is characterized by the decline or loss of physical and mental capacities on account of a variety of factors such as heredity, experience, external and internal environment. There is some decline in mental agility, in ability to remain oriented, in facility for remembering events in the past or present. These losses reflect some decrease in brain cells, one of the important contributions to aging and to mental and emotional disorders.

What are the factors in the aging process? Heredity is probably the most important factor in determining aging, functional span and life span. Those who believe environment is the most important factor have difficulty in affirming this. Environment is of considerable importance although it is not the dominant factor. Let us consider environment as it affects the aging process since we can to a degree alter environment.

The life span of man now measures about seventy years. Few people live more than 100 years. In 1900 the average person lived 47 years. The increase of life span is largely due to the control of disease.

The length of life of animals seems predetermined. The cat lives about 15 years, a dog about 13 years, a horse, 25 years, blue jay 4 years, pigeon 35 years, dog fish 2 years, sturgeon 50 years, turtle 125 years. I give these examples to show the influence of heredity on aging.

The life expectancy in various countries varies considerably. In Africa, in most areas, the average life span is about 35 years. In South Africa the white population averages about 68 years while the black population averages about 46 years. This difference could be explained in the type of medical care and nutrition the two groups receive. In the U.S. the average is 70 years. Norway and Sweden seem to have the best average, which is about 72 years. The decrease in infant mortality, improved nutrition, and excellent medical care is credited with the great increase in life span.
After birth we slowly become functional individuals. In a highly civilized and complex society where educational requirements are great, an individual may not be productive until the 20's or 30's. In a primitive society an individual can become productive in his teens. An individual remains productive until some disease causes a functional impairment that prevents work activity. Some function through the 60's and 70's. Some are old and impaired at 40. A teacher or physician is young at 35 but a football player is old at 35.

At the present time I consider aging to be due to a disease or several diseases which gradually or suddenly cause a loss of functional capacity. I will explore some of the diseases.

The eyes frequently show changes at age 35 to 45. There is a decrease of the elasticity of the lens and ability to accommodate for near vision. Glasses correct this problem very well. It is interesting to note that Benjamin Franklin invented the bifocals. Cataracts are another problem that occurs with aging. These are usually easily removed but the eye with the removed lens has some functional impairment. Glaucoma is another problem that can be controlled if detected in the early state. Older people need more light and sharper contrasts to help their visual problems.

Deafness normally begins at age 55. When this factor is added to the loss caused by our noisy society we can have a considerable problem. People living under quiet primitive conditions usually have acute hearing up to the 7th and 8th decade. Our noisy society (traffic noise, music, guns, machines, dish washers, lawn mowers, jet airplanes) frequently cause hearing loss. The partially deaf have difficulty hearing a speaker or telephone conversation if there is much background noise. The partially deaf need someone to speak distinctly and directly so they can utilize lip reading in addition. In an auditorium the deaf should sit close to the speaker. Hearing aids are helpful.

An important part of the senior citizen's life and all persons lives is sexual activity and the reaction to his sexual drive or lack of drive. At age 25 about 0.4% of the male population are impotent. At 35, 1% are impotent, and at age 80, 80% are impotent. Loss of sexual ability is frequently associated with anxiety and depression.

Some of the causes of impotency are psychogenic factors such as depression, pituitary failure, hypothyroidism, diabetes mellitus, low testosterone production, male climacteric, alcoholism, dependence on drugs, excess work pressure and demands, fear of aggravating an illness such as heart disease, and a rejecting or ill wife. My urological friends tell me that hormonal therapy is helpful at times. Adequate control of diabetes helps, cessation of alcoholism or drug abuse and correction of hypothyroidism is also worthwhile. Diminishing an excessive work load may also help. Treating and clearing up a depression can help.
The female also has sexual problem in late life. There are alterations in the menstrual cycle, loss of ability to conceive, changes in the skin and breast contour and changes in the vaginal tissues due to estrogen failure. The vagina that was once so distensible that it could allow a baby's head to emerge may become the size of a small garden hose causing painful sexual activity. The ability to conceive, whether a child is wanted or not, is at least an unconscious motivation of the libido of women. For those women in whom this is the overwhelming incentive to sexuality, the knowledge that pregnancy is no longer possible may negatively influence their desire for sexuality. Depression is also common in the middle and older age female and causes a loss of sexual drive. What can the physician do? He should point out that the need for sexual gratification is normal and not reserved for the young, and that maturity can enhance the sexual experience. The fear of aging should be dispelled. Medical problems, depressions and ovarian failure should be corrected. Female hormones are of help because they prevent atrophy of the female reproductive tract.

I went to the Social Security agency to find out the leading causes of disability. Another way of saying loss of functional capacity and aging. They came in the following order: (1) heart disease, (2) emphysema, (3) mental illness, (4) hypertension, (5) osteoarthritis, (6) pulmonary Tbc, (7) rheumatoid arthritis, (8) diabetes, (9 & 10) strokes.

It is interesting that of these, the leading cause was vascular disease as were two of the other top ten. The fundamental problem in all of these is atherosclerosis.

Atherosclerosis is a lining of the vessels with a yellow material that finally closes an artery or partially obstructs an artery. This disease causes a lack of O₂ and nutrition to the involved tissues such as the brain, heart, kidneys, and legs. This situation is analogous to the irrigation ditch nourishing a field. If it is obstructed at a point everything beyond dies for lack of nourishment. Atherosclerosis in this fashion causes strokes, heart attacks, kidney disease, and disease of the vessels in the legs. If an individual has two or more etiologic factors he is likely to get some manifestation of atherosclerotic disease.

The etiologic factors, or factors causing atherosclerotic disease, are heredity, age, hypertension, blood lipides, diabetes, exercise, smoking, obesity, diet, and some feel that emotional stress may be important. Theoretically many of the factors can be altered by education, drugs, and using preventive medical techniques. There has been tremendous strides in recent years in heart disease with the coronary care units eliminating death in heart attacks due to irregular heart action. Also, the prevention of crippling and fatal strokes has been improved. Prior to strokes many get warnings such as dimness of vision in an eye and numbness of weakness of the extremities in the opposite side. Frequently this is due to a
narrowing of a vessel in the neck. Some feel that 50% of strokes are caused by disease of neck vessels. The pulsation of the vessel is decreased and a flowing sound can be heard by the doctor over the diseased vessel in the neck. This is easily corrected surgically and results in prevention of strokes and a good prognosis. This disease also attacks the vessels in the legs and these vessels can be approached the same way.

The prevention of atherosclerosis through dietary changes, drugs, cessation of smoking, exercise, control of diabetes and hypertension, can probably be effected by changing one's life long habits. Atherosclerosis is the greatest cause of aging and functional loss, and this can be prevented.

Parkinson's disease manifested by tremor, rigidity, and lack of movement has been found to be associated with a decreased chemical (dopamine) in parts of the brain. The use of a chemical called L-dopa has greatly improved many cases. This drug is now experimental but will probably be in general use soon, eliminating a serious cause of loss of function and aging. It is estimated that there are one million with Parkinsonism in this country. These are largely in the older age groups.

Arthritic diseases are not fully understood but with drugs and new procedures the control of this problem has been improved.

Emphysema can be largely prevented by the cessation or prevention of smoking. Some headway is being made in educating the public.

Psychological changes of aging is one of the most important of all of the factors. There is more decrease in ability to learn with aging but in many this is not really great. Desire to learn is the greatest aid to learning. No one is ever too old to learn. If minds are kept active through the exercise of intellectual and creative imagination outstanding accomplishments can occur in the 7th and 8th decade. Liking for occupation usually decreases with age. However, a survey of people out of work showed 70% felt they would be happier if they had a job.

The environment is very important from a psychological standpoint. An important part of our environment is the political system under which we live. As far as I know there has never been any study to determine under what type political system people do better as measured by hard facts such as incidence of suicide, tendency to be pathologically dependent, admission to state mental hospitals, functional and life span, crime rate, incidence of emotional illness, degree of narcotic and drug addiction, alcoholism and general standard of living. The choice of political systems in a free society depends not on objective thinking but on emotional factors, individual experience, and dependency needs. The socialized system with its multiple rules and regulations offers much for the older citizen; however, it tends to produce pathological dependency.
states. Many who reach a given age cease to work and function because they can regress and be cared for by their pensions and social security. The government cares for them quite the same as a child is cared for by its parents. I know of no solution to this problem since there are many who have normal dependency states that are not self-induced or pathological and these people need help. To force all into this state may be unwarranted. To cut off Social Security and pensions because of work activity is probably wrong and not reasonable to those with desire and motivation. To work they need praise, self satisfaction, and some monetary return. If one is rewarded as well while not working, a big part of the motivation for work is lost. Those who seek retirement are many times those who never liked their job in the first place. They also may have excessive dependency needs and a desire to regress and be cared for prematurely. These people frequently become depressed, despondent and lose mental acuity. These are unhappy, unproductive people who don't feel wanted and have nothing to live for. This is the same situation that occurs in the middle aged woman who no longer feels needed because her children have grown up and become independent. Frequently a job or some civic duties will cure this situation.

Depression is very common in the elderly. They have lost their children, jobs, youth, ability to reproduce, sexual drives, looks, physical capacities and no longer get pleasure from anticipation of the future. Some of the symptoms of depression are fatigue, lack of ambition, crying, loss of mental acuity, inability to make decisions, insomnia, preoccupation with bodily functions, loss of sexual desire, suicide, and loss of interest. We now have chemicals that can alter the depressive state; however, this is of little value unless the environment and activities are changed. These changes include work activities, studying and learning, hobbies, participation in community affairs, exercise both mental and physical, and the realization that the individual is still worthwhile to society.

I have touched the surface of some of the problems of aging. Medically we are making progress and I feel sure the life span and functional span will continue to increase. I am not sure that we are approaching the psychological areas correctly. I am against mandatory retirement when a person is capable and willing to work. I am opposed to pension plans that penalize those who work. I don't like the cultural tendency to reject the aged.

I feel that earned Social Security and earned pensions should be allowed at a given age and not held back if the individual works, for this is a penalty for being productive. Chronological aging should not determine retirement dates.

We should do all we can to prevent pathological dependency states that are so self destructive. Medicine should do its job by continuing to inform the public on how to prevent disease. We should be oriented more to prevention. We should
not stand back and later attack the catastrophies such as strokes and heart attacks after they have occurred. Many times there is not much to salvage.

Medicine should do all it can to become generally available and keep people productive. We need more nursing homes and general living quarters especially designed for the aged. Perhaps these should be built by the government such as state mental hospitals are at this time. We now have 20 million people over 65 and much needs to be done for this group.
The Role of the Arts in the Education of the Aging

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Recently I was struck by the similarity of emphasis in two widely divergent authorities as they discussed the arts. Both Alfred North Whitehead and Lawrence Durrell refer to art and energy in one voice. It is my feeling that if we were to try to condense the concern with education for the aging of those here present, we could characterize it by this same term: energy. This idea is succinctly expressed by an activity day center for the older citizen in Dallas, Texas on their statement of purpose as "adding life to the years." So I am speaking of something much more broad than a subject for education. I would present art as a process for ordering energy.

In Aims of Education Whitehead says,

Art and literature have not merely an indirect effect on the main energies of life. Directly they give vision. The world spreads wide beyond the deliverances of material sense, with the subtleties of reaction and with pulses of emotion. Vision is the necessary antidote to control and direction. In the contest of races which in its final issues will be decided in the workshops and not on the battlefield, the victory will belong to those who are masters of stores of trained nervous energy, working under conditions favorable to growth. One such essential condition is Art. (p.68)

The second reference is to Lawrence Durrell whose newest book, Spirit of Place is said to be to quote, "...a splendid consequence of the new esthetic" in which

...the artist--private, personal man--offers us his unique image, for life itself, the tight cage of his art that is always at the point or just past the point of breaking open. Beneath the stretched forms of his craft something bulges that throbs, that transforms itself, that miraculously becomes visible to us only because it is momentarily contained enough to be available in one small space.

This new esthetic may very well see art not in terms of an arrangement of things but rather in terms of intersecting fields of energy. The work may emerge...not as an object to be isolated for study but rather as a continuing dialogue between the shaping artist and his inventive audience, both of them necessary to create the device that is their communication.

Here we have the essence of what I shall try to explore with you. I will try to provide the means to think about a social-psychological or bio-social approach to the arts as an essential condition for vitality and relevance in the human endeavor.

Art was an integral part of culture before the cave paintings in France and Spain described needs and met purposes for these prehistoric hunter peoples. In all likelihood these paintings served to educate. So the topic we are here to discuss is not a new one. Our focus upon adult education in the arts is, however, new in light of the necessity for art to be continuously re-evaluated in relation to current forces and needs. The non-cumulative, personal nature of art makes this topic a timely one. Art today serves a different function than in any period in the past. It is a different entity. People relate to it differently. They take different values and understandings from it. This is, to use an illustration from your keynote speaker, a matter of the readability of signs: an appropriateness of the objects and symbols we must deal with daily. We must know something about the many languages of communication if we are to do anything with them. Thus, mature members of twentieth century societies may find it necessary to take on the abilities of creativity and the capacity to encode and decode signs and symbols characteristic of the artist in order to deal with their technologically changing environment and with their own living.

For a moment let's survey some of the characteristics of our time. More often than not they are identified as problems. This in itself is significant in describing our orientation. There is, for instance, the changing transient quality of events and man's alienation from his environment. Authorities in human development have stated that a sensitive awareness of the nuances of one's environment is necessary in order to relate to it. Population increase and urban anonymity places more responsibility upon the individual to find meanings for himself. As extended ties diminish with geographic and social mobility, there is an increase in the casualness of interaction and a reduced personal feedback which results in psychological isolation. Isolation, brought to the older adult through the particular circumstances of physical and emotional separation from family and friends and from the set routines of employment, is in different ways a real problem for all adults. The lack of relatedness tends to affect the kind and amount of responsibility felt by individuals. There is often a corresponding reduction of sensitivity to aesthetic qualities. Mass control of visual communication in rapidly changing sequences presents pressures which demand response and cause tensions. To these conditions are added increased time for personal activities to be undertaken at the individual's choice; the opportunity for free, innovative, and creative activity becomes a pressure to express. A corresponding need follows to translate responses into communicable form. Pressures toward relatedness, that is toward the irrelevance of isolation, is magnified by instant electronic
communication to the individual from the mainstream of society. In order to relate, this individual must express. The older adult is faced with terminal events of many kinds; but a close look at our times tells us that all people are facing the same situation. More and more have several occupations during their life time, more live in different communities, more change interests. Our society today provides multitudes of human ecology contacts which provide plug-in or latch-on points of continuing service instead of terminal products. Limitations lie in the capacity of the individual to plug-in or latch-on to these contact points. In a world where the development of new means becomes limitless, the premium is upon individual effort and accomplishment rather than upon extra-human conditions. Rather than viewing these characteristics as problems, it would seem more appropriate as educators for us to view them as opportunities different from any we have faced before. This, it seems to me, is basic to most of the positions I have heard in regard to working with older adult.

In our present state of affairs, with possession of more visual information caused by the unprecedented experience acceleration of electromagnetic TV communications, there is, then, considerable pressure to formulate this information conceptually. The artist and his skills become extremely important in such a society. Every individual, not just the artist, is finding it necessary to develop an increasingly complex decoding and coding capacity.

My reference to art in this way may seem strange to you. It may seem like I am talking more about psychology or about sociology than about art. This is because the esthetic of our recent past, which is the language we use to read meanings about art, has made it into an object-centered phenomenon - things done by others rather than events experienced by ourselves. This is the change that has come about in this century to our concepts about art, and it is causing a revolutionary transformation of the role of the arts in our country. Evidences of this shift are everywhere. Perhaps some statistics will help to make my point. Between 70,000 and 80,000 persons go through the Metropolitan Museum of Art on a single weekend. In the course of a year it attracts three to four times as many visitors as Yankee Stadium. Moreover museum attendance throughout the country far outstrips the growth of our population. And there are more men than women among the visitors. Record crowds are turning out for classical music. The American Music Conference estimates that the number of amateur musicians in the U.S. is now more than 35,000,000. Business profits from the sale of art materials is in the millions. Five repertory theaters are producing top level plays when a few years ago we had none. Despite the enormous raise in the price of tickets, Broadway sales are greater than ever. Amateur theater, too, is a most active area. I could go on and on.
If art is coming to be accepted as a more normal part of ordinary existence in this country, what accounts for the change? Why does art now confer status when a decade or two ago it marked one as an oddball? There appears to be a connection felt between the arts, what they can offer; and the character of our current social situation. Leaders of our social institutions -- educators, sociologists, etc.--have been much more slow to recognize this than have the rest of the populace. A problem which we as educators must face is recognition of this change, and the need to provide bridges for continuity between traditional culture and the emergent contemporary cultural situation. This would be to provide fields of energy rather than arrangements of things; and the means to use (or plug into) the opportunities present rather than to be isolated from them.

Out of the diverse demands of our society the great variety of programs in the arts have grown side by side, often oblivious to each other, sometimes aiding and sometimes obstructing individual developments. We have the educational programs of museums and libraries; those under the auspices of formal educational institutions like colleges, universities and the public schools; the recreational facilities of trade and professional unions; recreation departments; special purpose community centers; as well as men's and women's social and civic groups. The mass media: magazines, radio, television, Sunday supplements, and so forth, consistently involve one in the visual and performing arts. These diverse opportunities result in the variety and amount of attention focused on the arts by American adults. In some instances a very brief or casual contact is made. At the other extreme an entire commitment implicates the individual in art experiencing. Further, the nature of the involvement ranges from production to appreciation; and from active to passive responses. The recent development of arts councils may be looked upon as an effort toward greater coordination of endeavors. It is interesting to note, however, that the greatest advancement in coordination has occurred between groups devoted to the many arts rather than among those concerned primarily with the visual arts.

One of the difficulties in development of programs in the arts for adults has been that more often than not the arts, as peripheral to the primary purposes of the social agency sponsoring the program, have not been programmed in a manner that would allow bridging the specific activity with connections to that primary purpose. It is my position that unless the intrinsic nature of the art experience, based as it is upon creative dynamic, is given an opportunity to establish balance with the social context and purpose in which it is located there will be a comparable lessening of its potential for development of the human being toward self-actualization. The creative function is a dominant characteristic of the arts. To the extent that the individual is engaged at the level of creative transformation of his experiences he is engaged in the making of life -- the adding of life to the years -- mentioned earlier.
If, as I have just suggested, consideration of the intrinsic nature of the arts is essential to appropriate choices in programming, we need to look more deeply into them. The arts are intimately bound to sensory capacity. Through what the senses tell us, we come to know the shifting relationships of the world around us. By sorting, separating and eliminating the many different objects that we see, we identify them in order to use them. We eliminate that which is not important to us and relate what is left to our purpose. Doing this kind of choice-making in the context of the arts brings it to the level of consciousness in a manner that enables it to be made again when desired. When we expand our purposes beyond use to a knowledge of why we use things, we are dealing in understandings. Sometimes we put what we experience together into meaning. Learning to put together in a way which will relate is a prerequisite for creative art action. The unity which results represents the aesthetic quality in our response. When art experiencing consistently strives for re-integration of means with meaning we approach the qualifications of development leading to excellence. This is true whether the criteria is applied to the beginner or to a professional, whether our primary purpose lies in development of the individual or the production of a product.

This point can be illustrated by reference to forms which commonly repeat surface responses. There are many productions by workers who gain a skill and repeat it over and over, thereby emptying the proliferation of meaning: as a mountain scene in a painting, or vase made from either a mold or turned by hand, or a song sung. I have seen and heard hundreds of these empty productions and I am sure you have, too. My emphasis here is on the words proliferation and repetition. Certainly, the content as such should carry no implication of value or lack of it. Of themselves a mountain, a vase, or a song can not be called empty forms. They become empty when they do not represent continuous development on the part of the doer. It is this same atrophy of development that workers with older people must face. Professional artists, as well as amateurs, sometimes fall into profitless repetition of successes. It takes a dedicated and disciplined professional attitude in the performing arts, for instance the theater or concert hall, to maintain a level of creative vitality after the repetition of several performances. To do this the performer must re-create the piece anew for himself at each performance. Amateur theater and musical groups change their programs often to accommodate this deadening feature. The vitality shown in original effort is an excellent indice to the quality of the art being experienced. Development is a criteria for the art experience because art requires a non-repetitive original re-establishment of the relationship between the self and the media in each succeeding production. There must always be a new and unsolved problem before one.
Maturity or development in the arts has a pattern which programmers can use as a guide. It moves, as do most developmental phenomena, from the simple to complex, from one's person to others, from the concrete to the abstract, from the specific to the general. Based on the processes of behavior necessary for the experiencing of art, I would like to discuss a three-fold sequence of development. The first has to do with awareness, the second involves imagination and manipulation, and the third is interpretation and communication. Surface responses to the visual stimuli of color and form in the objects around us may be likened to a casual response to the keys of a piano. To gently touch and to place in sequence these keys is to explore the fact of their being available to experience. The direct looking and visual placement by the individual of his surroundings is a similarly exploratory experience. Exploring and discovering are valid and necessary beginnings. They constitute ways of becoming aware. Awareness is the act of taking notice. It is the development of a sensitivity to the physical world, and how things are made. It was understanding the self at the level of awareness that your keynote speaker so amused you with in his address.

From this beginning should come the capacity to pick and choose sounds or shapes according to desired and required purposes. The technician in artistic media—the learner of the language of artistic form—must come to realize that to enter the realm of art he must reformulate through choice and synthesis the many stimuli that come under his awareness. As one inter-relates and connects through manipulation of his choices, he may increase his reservoir of knowledge and exercise his imagination. Choice-making and experimentation based on the ideas and values he holds involve him in ever-increasing depth of experience with the world of the arts and with the translation of images into it. Art can provide a structure in which to objectify awareness through exploration; as well as the deliberate choice, juxtaposition, and experimentation used to develop imaginative and manipulative abilities.

From these experiences the individual can move into a more mature experiencing of the arts. Judgements of a discriminating nature dominate. Through them re-evaluation and interpretation can take place. A synthesis and possible aberration will occur which results in communication.

It is appropriate, therefore, that adult educators look at the production of their students and the responses of audiences for evidence of growth. There is much too much evidence of beginnings going nowhere. Criteria is needed to build programs in such a manner that they will result in development of increasing sensitivity and capacity on the part of individuals. We need to analyze the developmental status of the group with which we are working to determine the place or places in the continuum of artistic maturity which would be most profitable for it. This has nothing to do with age. The responses of
adults regardless of age very often indicate a stoppage in their development of arts experiencing. This is especially true in the U.S. due to the cultural attitudes of the recent past. It will undoubtedly be more true of the older adult now than of this age group in the near future. The revolution I spoke about earlier will educate informally even if our leaders continue to ignore the impetus of the movement. Thus, the art content of the process of involvement would be the same if we were dealing with beginners of seven or seventy years. What would differ would be the way we would handle the timing of the experience and the kinds of relationships to other experiencing which we would bring to bear. What I am saying is that art has a body of content to be learned quite separate from the historical incidence of its form; and that this body of content can be divided into the three levels of process involvement just discussed.

The effectiveness of art activities for adults is dependent upon the relationship these activities have with the personal and social aspects of their lives. Programming for the adult should provide for relevance to the social roles of the individual and for the extent of his desired involvement in art. Obviously he has a well established living space within which all of his activities tend to fit. The importance of this concept has developed adult education philosophy in the direction of student rather than subject focus. Adult educators have as a result concentrated on the student's personal needs as a step to broader involvement. This approach, like any other, will be more effective if placed in a context of a variety of foci and re-evaluated regularly. There is danger when student initiated goals make no overt reference to mainstream activity. This, too, it seems to me is characteristic of all kinds of activities of the older adult especially, not just of art. But let's talk about this idea in relation to art.

I began by speaking about art and energy in one voice. Energy and vitality are closely related, one being the result of the other. Art as an educational tool is often justified on the basis of the vitality which can come to individuals by involvement in art experiencing. This has a two-fold cause: (1) the personal-emotional nature of the art process whether it be production or appreciation, and (2) the dynamic contained in an activity that is centered in or is the same as the biting edge of civilization. The latter makes it necessary for the adult art program to be related to the mainstream of concern of our time. Just any kind of art activity will not carry with it this dynamic energy. On the other hand, the individual may not himself be concerned in the field of art with the biting edge or pioneering front. If this is a peripheral area of his interest, he is much more likely to be concerned with historically established considerations of art which coincide with the maturity he has accomplished as a person in regard to art. Thus we have, for example, the work of French Impressionists and
their immediate followers of almost a century ago mistakenly cited as modern or contemporary. What the work of men like Renoir, Degas, Van Gogh and Cezanne really represent is the place where dynamic energy exists for those individuals who have not been aware of recent developments in the field of art. These works contain resolution of time/space problems which are common cultural presences: fragmentation, individual freedom for independent choice, scientific analysis, automation, etc. These are not the biting edge. They are not the frontier problems. They are the constant core of personal emotional problem solving. Thus they represent a comfortable position from which to relate to art. Current mainstream or biting edge dynamics are concerned with man himself as the object, not with something else as the object. This is illustrated by events which can not be repeated again in music and theater and by the importance of cinema, happenings and momentary forms in the visual arts. The concern is also with alienation, value distortion and inappropriateness; as well as a precision never before necessary and new dimensions for time. There is danger in the involvement of people in obsolete processes, and ideas. There is great value in presenting these processes to them in their historical context. We would then not be trying to get the speed out of a horse we expect from an automobile. If we are interested in vital individuals, they must be in the mainstream of life or they must not think that they are when they are not.

I hope the examples I have given of art as an energy producing process and of how this process may be made to work, will suggest new ways to think about activities for the people with whom you work. I would like to close with a story by Franz Wildenhain, one of America's leading ceramicists. "Two frogs fell into a barrel of milk. One frog said, 'You know, we have to get out of this. At some point we need land and air.' But the other frog said, 'I die. I die. I die.' This frog died. The other frog said, 'I will not die, I will not die, I will not die.' And the whole night he is saying he will not die and working his arms and legs; and in the morning he is sitting on a lump of butter."

Art is the other fellow's magic. Or is it?
I come as a pinch-hitter, having been invited to make this talk just about a week ago, and of course, I come without having done research. I don't have a manuscript with those long quotations from other people's books and footnotes giving proper credit. I haven't had time to find a ghost-writer to prepare a quick speech for me. I haven't even had time to lift one that somebody else had written. So I had only one thing left to do—merely draw on my own personal resources. These resources come from about thirty-seven years of experience as a pastor of churches in which there have been people of all ages. I don't come with what some call "expertise". And I have another confession to make to you. I have had, in my years in the pastorate, some difficulty in learning to love older people.

I feel like the student who wrote a term paper at school and in the introduction said, "This subject could be discussed from either a personal or social point of view." Then, in parenthesis, said, "Now then, Mr. Professor, I'll bet you can't guess which one I'm going to tackle first!" So I would like to draw first of all from my own experiences and observation and then I would like to say something about the church facing changing conditions. For a good pastor, who is a good shepherd of the flock, ministers to all ages of people, from infants in baptism, all the way to terminal cases of the aged.

There are some general observations that I should like to make that are more or less off the cuff. One is that today we're very likely to lose the individual in our larger categories, and to forget the variation in personality and situation among people. As, for instance, to lump the aging or the retirees into one general group and to forget that they are different people with different backgrounds, and have widely varied personal needs and responses to programs. I suppose that I am now beginning the period of life where, though I am not yet ready to be called aged, I might be called one who is beginning to experience the aging process. I don't mind your knowing that I am 62 years old. I find in myself as a person becoming older, certain strong drives toward individualism; toward a desire for opportunities to be left alone; toward a desire not to be regimented. My wife and I were downstate the other day, and went to visit one of those large luxurious retirement homes in the St. Petersburg area which was quite impressive to us. We both drew a very strong negative toward living
there because we would lose much of our individuality although we would have security and protection of our creature comforts. We didn't want that Social Director trying to enrich our personality by seeing that we went to the workshop at proper times; or trying to get us in a chorus whether we could sing or not. I may have a hang-up at this point, but I find a growing desire not to have other people program my life.

I think that older people are the group in a church that are most likely to be neglected. Some of us are especially interested in the children and the young people, and if we are not careful we will be giving unbalanced time, attention, budget and program to the children and youth.

I used to be very much irritated by my mother when she visited us in her later years; after I returned from meetings she besieged me with questions about what I had been doing. I was very impatient with this until I realized that there was a certain emptiness in her life; that she was not active in various groups, and that she was experiencing vicarious participation. Once I realized that this, which I thought was an unseeming curiosity, was actually a vicarious living an active life through me, I became more sympathetic, not only with my own mother but with other older people who are likely to engage in this particular practice.

Now, all of you know, that older people need attention. I visited the State Hospital not so long ago to see the six to eight members of my parish who were there, and as I visited two elderly women I was very much impressed with one fact. They were not so much interested in having me visit with them and talk with them as they were to be able to announce to all of the other people in their ward, "I have a visitor. I have a visitor." One of them, in fact, seemed quite glad to see me but didn't seem to want me to stay very long. She wanted to go back and brag about having had a visitor. This is really something to make you a bit sad because these people not only want attention, but they desperately, desperately need attention. And I think it is a pastoral service, a religious service, a community service to provide this for them.

I suppose, since you're concerned with education of adults, I ought to talk a little bit about some intellectual problems of aging which I have observed as a pastor. The first thing that we find is that older people are very likely to be rigid in their basic patterns of thought, in their general philosophy of life, and to have suffered a loss of openness to the expanding, vital new world. And this is, very easy for us to understand. I'm quite sure that some of us find ourselves becoming somewhat more conservative as we grow older. Even now,
while we're still active, we find ourselves not quite as ready to jump into new things as we were a few years ago. I think this conservatism can be counteracted by self-interest. I believe that in the national election of 1964--although in Pinellas County the people are conservative--they didn't vote for Mr. Goldwater because their Social Security was threatened by him. So you find these counteracting influences in people's lives which indicates a sad fact about us—that there is a certain economic determinism of our general point of view about life. This is something that ought not to be. We say that we do not live by bread alone, but our concern for this is, I think, determinative oftentimes in our political philosophy and in our general outlook on life. I often say that in former years, we were offering people heaven itself, and pie-in-the-sky in the by and by, but nowadays people have substituted comfortable retirement for eternal comfort. You no longer appeal to them by pie-in-the-sky in the by and by; what they're primarily interested in now is steak-in-the-plate at sixty-eight.

I visit a very conservative elderly man from time to time. I suppose the general patterns of his thinking would have to be in the range of 1890-1910, probably stuck somewhere around 1898. He's never been brought into the Twentieth Century. But he said an interesting thing—"you know, you talk about things going on in the world; if things keep going the way they are going now, pretty soon won't be nobody better'n anybody else!" This particular social philosophy goes all the way back to Plato where some sort of hierarchical arrangement of human society is assumed to be best. He was a man who didn't even know who Plato was, yet he had in his mind this old, old idea that you've got to keep levels of worth to maintain order in human society.

Here's an instance of a man who had a very severe theological problem. One of the religious problems that people have today is that our space image of the nature of things has been torn down. This is a very serious problem for some. We have the old idea of the three-story world, the Ptolemaic idea, which is still in the minds of most lay people, I'm afraid. Heaven is up here and earth is here and hell is down there. Some people have a lot of emotional investment in this little image of a three-story world. They want to keep their neat little heaven so they and their friends and relatives and people in their denomination can go there; they also want to keep their hot little hell in which they can throw those people who disagree with them. When you take away from them, as modern science does, the easiness with which you hold in mind this picture of the world, many people suffer a real loss. I suppose you will find hundreds of college students, who were brought up in a conservative religious background holding on to all of this. The Bible, of course, was written within this picture,
so you've got to—we have a word for it nowadays—demythologize. You have to try to remove the essential spiritual and moral message of the Bible out of the context of this, I call it scaffolding, and yet preserve the essential message which is intended. In Fort Lauderdale I was teaching a class in Christian beliefs in which there was a man past seventy who was very much bothered by this particular problem, i.e., the spatial orientation of his religious faith. He was a fairly intelligent man, but he could not quite jump over or through the demythologizing process into the new expansive understanding of the nature of the universe, the majesty and greatness of it, which actually has more religious value once you move over into it. So he kept raising the problem throughout the week. "Somebody took away my heaven and somebody took away my hell." And the next night, "Who is it that took away my heaven and took away my hell?" He bothered me so much about this that before the week was over, I devoutly wished he had one of them back.

Now in this same parish, down the state, I enjoyed some of the experiences I had with elderly people. I was visiting a man who was in his mid-eighties, who, as do many older people, liked to tell you about their ills. This man had given me a long list of his ills and afflictions and thinking that he's come to the end of the list, I breathed a sigh of relief. Then he said, "And you know, pastor, I've just about lost all the mind I ever had!" I suppose I reacted with some consternation, which he observed so he quickly reassured his pastor, "But, you know, I don't miss it much!"

This same man had a very severe theological problem. A very brilliant daughter of his in her thirties, had died. This, of course, was for him a very great problem. He wanted me, as his pastor and counselor, to justify the ways of God to men. He said one day, "When you come back again, I want to ask you some questions; I'll make a list of them, and I want to have a discussion, a theological discussion." I more or less anticipated the kind of questions that he was going to ask, and went back in about two weeks, somewhat prepared. But he didn't ask me the questions at all. We had only a small-talk conversation and when I was leaving, I said, "Well, I came more or less prepared for a theological discussion today and had anticipated some of the questions you were going to ask me, but I notice that you haven't brought the subject up at all." He said, "Well, I'll tell you brother, between the time you were here before and now, I got to thinking about it, and considering that I'm eighty-four years old, I just decided not to mess with them."

We have a great range of opinion in the church now on many subjects, especially social subjects. I've said to some people, "Well, now, you wouldn't expect me to try to change his mind, would you? He's seventy-five, eighty-five years old. I know
he's mistaken, I know he's filled with prejudices, I know he has all the limitations of his background and that it would be practically impossible for me to change his mind. I'm perfectly willing for him to go on to heaven or wherever his destiny is, in pretty much the same shape he is now.

You find some exceptions to this kind of rigidity and unchanging thinking. I recall one particular exception to it. A retired insurance man came to Florida to die. He had had several serious troubles, but after coming to Florida he regained his health, and he got married again; that always makes some difference. Although he was a conservative person basically, he became very much interested in an organization that we have over the state and over the country now, called the United Nations Association. Some of you may belong to that. It's an association that seeks to educate people to appreciate the work and activities of the United Nations. He became president of the local group and was the chief defender of the organization in letters to the newspaper and in public gatherings everywhere. This man experienced in that community a very fine new life for himself and went into a really expansive, new kind of world. His basic business and conservative orientations were dissolved and he went into this new general orientation of his life, and had a fine experience and made a very fine contribution to the community itself.

One of my friends who was in educational work professionally, retired, went to West Palm Beach to live and later told me of a very interesting experience that he had there. He organized a one-man university. If you knew him, you could see that he occupied a lot of chairs! He operated this private school in rented quarters in a downtown building and taught humanities, especially philosophy, to retired businessmen, many of them highly successful. Many such men were coming to him in groups and privately, for instruction in philosophy. He reported a eagerness, an idealism which had been below the surface, a real hunger for a life-understanding and appreciation was coming forth. These people were feeling that they had neglected an area of their lives that was very important and now they were desperately trying to catch up. I wonder if, in the whole field of educating people or helping them to new and expansive understandings of life, if there isn't a very wide field here among people who are really intelligent and have been quite successful and yet know in themselves that in a religious, philosophical, and a basic human sense, they have lived their lives at levels that were somewhat less than the potential of real human self-actualization.

The pastor, of course, has a role in relation to the aging that is perhaps more in the nature of counseling than it is educational. In this relationship one finds instances of guilt coming out in quite old people or people who are in a terminal
illness. When I was quite young and in my first pastorate, I received word one day to come to a certain home, where I found an elderly man on his death bed. He sent all the people out, and said he wanted to talk to me. He told me that twenty-five years preceding that time he had been in a church dispute and that although he felt at that time that he was wrong he had withdrawn from the church. "And now", he said, "the doctor tells me I have only a few days to live and I know that I was wrong. I wonder if you would administer the vows of church membership to me over again so that I can die as a member of the church which I left twenty-five years ago." Well, of course I did this and he found some comfort in the experience. I hesitate to tell you the rest of the story which sort of takes away the punch of it. He didn't die. And not only did he not die—he didn't come to church!

I had another instance where I went into a hospital room, where the wife of a man who had terminal cancer introduced me to him as the new minister. As soon as he understood who I was he burst out crying and said, "I knew I ought to have given a bigger pledge to that building fund at the church!" Guilt in older people is something you might not expect. But it is there, and oftentimes it's something that's been eating on them for a long, long time.

Some older people are very garrulous and repetitive. They say that the older you get the better your memory is, and you like to tell about your experiences. I was in one of the retirement colonies in St. Petersburg talking to the man who sells the houses and he said, "There is a man over there I try to avoid. Every time he sees me, he has to tell me the story of how he worked up from office boy to be the president of the bank." A psychologist would say, "The reason is obvious. Here's a man, retired, no longer president of the bank; he no longer has status, and this eats on him a little bit. He hasn't found any positive orientation for his life so he relives his former achievements. If he'd just go quietly into his room, sit in his big rocking chair and relive them for his own benefit this would be wonderful. But he can't do that, of course. He's got to relive them to you so that you will not think that he is a nobody, you must think he is somebody. He desperately needs for you to know this. He desperately needs to be continually reassured of this."

You find in counseling with people a serious problem of retirement adjustment. Oftentimes they have not made real plans for their new experiences. A fairly well-to-do retiree had moved to southeast Florida to live. Soon after settling in their new home the wife had become very much emotionally upset. At his request I went to see her in one of the luxury sections of Fort Lauderdale. Their home was a very modern Florida house, with a lot of glass—you know how they make the houses
merge into the out-of-doors and all this sort of thing. Soon
she said, "I just hate this house. I can't stand it here."
I asked her to describe her home back in Detroit. She de-
scribed a very big, old-fashioned two-story house, with massive
oak furniture. I saw instantly the contrast between those two
houses. Those two shelter situations were so different that
she was having a real problem adjusting herself. I finally
came up with a suggestion that actually worked. Not always
do our suggestions work. I said, "Why don't you go back up
there and stay in your old house for a few weeks." She and
her husband went back and visited the old house for a few
weeks, but she didn't like the old house as well as she
thought, and was happy to return to her Florida home. This
was very simple direct counseling, but was pretty good therapy
for her. We preachers do a lot of direct counseling. We read
Rogers on non-directive counseling, agree with him, and then
go on directing people.

Ministers have interesting experiences when older people re-
marry. One older brother who met his fiancee on the shuffle-
board court said, "Well, I'll tell you, preacher, we decided
to get married. We talked about it a long time, and she's got
a house and I've got a pension and we just decided to put my
pension and her house together and make a go of it." Most
pastors have a rule that we won't perform a wedding ceremony
without at least meeting the couple and interviewing them. When
an old gentleman called to make arrangements for his wedding,
I requested an interview, he asked why, and when I explained
its general purpose, he replied, "I ain't coming, Son, I've
been married three times already and I don't think you can
teach me nothing." I gave up and performed the ceremony with-
out instruction.

Now let me talk a bit about the church and increasing respon-
sibility for the aged. I haven't made any survey, I haven't
read any sociology books, I don't have any footnotes, I've
just been watching while I run. And I think that there is
some recognition among pastors and church people of the
changing situation and our need to adapt to it. I suppose
along with all society, we are too geared to the age sixty-
five as the time for retirement. We have sixty-five in our
Church as the permissive time for retirement, with a mandatory
retirement of seventy-two. I fear that too many of our men
in the ministry with pensions, plus their social security, are
retiring at sixty-five or sixty-six, a little too early. Of
course, I'm already at sixty-two beginning to think about this
and to talk with my wife about what we shall do. The law of
diminishing returns begins to operate as you grow older because
the bigger churches want a younger pastor. One of our older
men at the time he was retiring said in his valedictory,
"Bishop, I tell you, I've still got a lot of mileage left on
my old carcass and I can still do good work. But nowadays those
committees go to the Bishop and say 'Bishop give us a kid that
We might make merry with our friends." He had decided to let the kids have it. Variations in temperament, health, economic conditions, etc. are not properly taken into consideration by employing agencies, including the church.

The fact of this large number of people living so long says a great deal to the church. I don't think we have listened carefully enough to hear all that it does say. It speaks from the standpoint of the church's advantage; it also speaks from the standpoint of the church's opportunity. I have had some interesting experiences with older people who had a lot of time on their hands, in good health, doing good work. As I went to a church to serve, the pastor whom I was succeeding said, "You'll have to get rid of old Brother so-and-so. He is obsessed with visiting the hospital, and haunts the hospital daily. He will probably cause you trouble." Well it's pretty hard to get rid of an old boy with an obsession to do a particular thing so I decided to take a positive attitude toward the matter. I began to observe his work in the hospital and discovered he really was obsessed with it, remaining there all of each day. Well, among the things I had to find out was, how did the nurses accept him? Did he get in their way? I found that this man was rendering a tremendous service, the nurses all loved him and called him Dad; the patients loved him and were glad to see him; and instead of getting in my way, he gave me daily, a list of the people I should visit.

In two instances retired men became volunteer superintendents of the church buildings and grounds. They both gave years of service, and they just loved it. One of them had been chairman of the board of trustees. He had said, "When I retire I'm going to give practically full time to this church." And he did it. This was a tremendous thing for the church and for him. Of one of these men someone said, "He is worth ten thousand dollars a year to us."

There is a great deal of talent lying around unused, in the lives of retired persons. I read in the St. Petersburg Times that some of the small business people there have brought highly trained retired businessmen into an advisory committee, to advise people going into a small business how to avoid some of the pitfalls. We could do something like that in the church.

There is an ego drive in some retirees which can be an irritation. We had a man in a church one time who wanted to give a dinner for the ushers and the choir. We thought—well, he's just a rich Yankee who has a lot of money to spend and he wants to do this because he loves this church. We all accepted his invitation and in the church Fellowship Hall they prepared a very fine dinner at his expense. You know what he had done? He had bought himself a captive audience in order to read about forty-five minutes of poetry he wrote. What he called poetry
was just pure drivel, it was terrible. Although this was bothersome to us, we have to consider from the human standpoint how much ego need this man had to have to spend such a great amount of money to insure a captive audience for himself.

How far should we extend the educational work of the church into the realm of the aging? I think as far as we're able in staff and otherwise, with the realization that there is a considerable variation in the needs of people. Some people don't want expansive, new understandings of life, but some do.

Recently, a church group of women made a survey among their women as to increasing their activity in a Christian way. One of the women wrote, "I just want to go on doing nothing, just like I've been doing always." But there are many who want to do something. You can't just say, well, we're going to have this old ladies' class, or we're going to have this old gentlemen's class. No, you sift them, and among them, some of them, you'll find quite intellectually aware, who want to read theology and philosophy. Let's give them an opportunity to do that. You'd be surprised what contributions they will make.

I think that what needs to be done in a community, not only in education, but in health and welfare and so on, the church ought to do, until it converts the community to doing it. I served one church which sponsored an unusual group for elderly women called the Quilters, which has been going on for thirty years. They meet weekly, bringing their lunch; and quilt for about six hours, doing very expert work under skilled supervision. When I last inquired they had five years' quilting scheduled. Practically all the women there were at a minimum age of sixty-five. When they're around the quilting frame people get closer and closer together as work progresses. Now here's a group without anybody saying "C'mon now, let's make a group." Surely it's a better group when you can have it without being obvious about it.

Some of the churches in St. Petersburg have something going on all the time. I know that one church runs kind of a lyceum-like program having not only entertainment, but lectures on various subjects; health, pensions, investments, etc. This is again illustrating that what needs to be done the church will do. But eventually we convert the community, create a social awareness, then the church withdraws and takes up other fronts and moves on out and pioneers in new areas.

I'm going to stop here. My time is up and I realize this is something of an inconclusive talk, but intentionally so, because we live in an inconclusive world and some of us are in the midst of inconclusive responsibilities. We're on our way and some of us have a general idea of where we're going. We sing the hymn, "I do not ask to see the distant scene, one step is enough for me." If we just know what to do today and do it, tomorrow's opportunities and tasks will open to us.
I was asked to discuss with you this afternoon the topic, "What it Means to Teach Older Adults".

The topic implies that older adults are somehow different, as learners, from young adults or children. Are they different? If so, it would seem to behoove us as teachers who work with them in organized learning situations to know how they are different—and what accounts for the differences.

I submit that the older adult learner is different; that as an older person he has certain distinctive characteristics which influence the way he learns and the way he should be taught.

Between childhood and old age there are changes of various kinds which inevitably and continuously take place. Some of these are physiological in nature—some are psychological. Some of both kinds of these changes influence learning habits, attitudes and abilities. Thus, an adult learner, particularly an older adult learner, exhibits certain characteristics which distinguish him from a child learner. As teachers we should recognize these characteristic differences so that we can take them into consideration in our teaching.

First, let us talk briefly about some of the physical changes that occur in the normal aging process, particularly those which more directly influence our learning characteristics:

**Changes in Vision**

As we grow older our vision changes—it loses more and more of its sharpness. Since vision is one of the senses that very directly influence what we learn and the way we learn, let us examine more precisely what actually happens to our vision in the normal aging process: Our vision normally attains its maximum efficiency at about eighteen (18) years of age and declines continuously thereafter. There is a gradual but steady decline from about age eighteen to forty-five, and a decrease in the rate of decline beyond fifty-five.

Researchers have discovered some other things about visual changes which are relevant to our purposes. For example, it has been demonstrated that aged eyes suffer a greater proportionate loss of visual acuity in dim light than do younger eyes. Clinical studies have shown that at age thirty-five and above there is a distinct preference (and need) for more light for reading. This tendency is especially marked in persons between thirty-five and
fifty, probably because the eyes are changing more rapidly in their refractive condition during that period than at any other period in the entire life span.

Other studies have found that as we grow older there is a gradual narrowing of the visual field (peripheral vision) and a slowing down of the dark adaptation process. It takes older eyes longer to adapt to sudden changes from light to dark surroundings. And they don't see as well those things that are outside the point of the central focus.

It has also been established that as age progresses the rate of color blindness rises. This occurs to a greater degree among men than women. In fact, in one study made on 565 men and 446 women it was found that at age seventy, defective color vision occurs in forty-two percent of men and eighteen percent of women.

Changes in Hearing

Another kind of physical change that takes place as age progresses, and which directly affects learning is in our Hearing.

Sir Francis Galton's data show that maximum audio acuity (or hearing efficiency) is attained between ten and fifteen years of age, very gradually but consistently declines thereafter to about sixty-five, and then tends to level off.

U. S. National Health Survey studies on hearing ability show that 85 percent of people five to fourteen years of age have clinically normal hearing, but that only 12 percent of people sixty-five and older have normal hearing. Stated another way, hearing disability sufficient to prevent understanding of ordinary speech originating at a distance two or three feet directly in front, or to prevent using a telephone, increased from an incidence of 7 percent among five to fourteen year olds to about 64 percent among those sixty-five and older.

In these same health survey studies, two other significant findings were made regarding hearing changes. First, it was demonstrated that in the normal aging process women lose acuity for low pitches, while men lose acuity for high pitches. This is a progressive loss, essentially paralleling the general loss in hearing efficiency from about age twenty on to old age. Someone has said that this is nature's way of shielding men from the screams of their wives.

The other kind of hearing change in the U. S. National Health survey studies revealed was that in addition to, or apart from, the loss of hearing efficiency as age progresses, there is also a slowing down in the central auditory processes. Our reaction time increases, which means that we slow up in our response to auditory stimuli as we grow older. Many aged people find it difficult to follow rapid speech in spite of little or no hearing loss.
Some of the physiological changes that occur between youth and old age and which may have a less direct effect on human learning may also be worth our remembering. For example, various studies have revealed gradually restricted powers of adjustment to both high and low external temperatures as age progresses. The ability of our body to adapt and compensate for external temperature changes becomes more limited, particularly beyond sixty years of age. Thus, older people become uncomfortable more quickly when exposed to abnormal external temperatures, either high or low. Heat prostration is much more frequent among people over sixty than those under sixty. This is known as a loss in powers of homeostatic adjustment.

As we move from youth to old age, the speed with which our body repairs itself after injury also slows down. Convalescence time increases up to twelve times as long for a person seventy years of age as for a youth of fifteen. We also have less tolerance for stresses, for over-eating, starvation, dehydration, and salt-depletion as we grow older.

The capacity for physical work declines with age—as those of us beyond forty well know. On experimental clinical studies it has been found that at age seventy the capacity for physical work is about 50 percent of what it is at age forty. An interesting side-light on this particular characteristic is that one study showed that among people between fifty-seven and sixty-eight years of age, their work-score was 3.5 percent higher in the afternoon than in the morning. Thus, while our overall work-capacity falls off as we grow older, we apparently work better in the afternoon than in the morning, once we pass the mid-fifties.

Studies made at the Harvard Fatigue Laboratory indicate that the quality of work does not decline rapidly after age forty-five. They point out that there is considerable evidence to show the age at which eminent people do their best work does not coincide with physiological prime. For example, they point out that of the 100 most important inventions, 37 were made by men over forty and sixteen were made by men over sixty.

Implication of Physiological Changes

What do such physiological changes between childhood and old age imply for those of us who teach and work with adults in organized learning activities? What influence should they have on our teaching procedures and materials?

First to compensate for less acute vision, the following implications seem apparent:

1. Use good illumination. Older adults must have not only better light, they must have MORE light. Do not have audience face the light. Never have a flickering light.
2. Arrange seating so that people are close to the speaker and to the materials used in class demonstrations.

3. Arrange equipment which will enable the audience to see all parts of demonstrations easily and clearly. In addition:
   a. Have a neutral background.
   b. Use sharp contrasts of color.
   c. Use large charts, diagrams, and pictures.
   d. Use large, legible writing or printing.
   e. Remove everything from the blackboard except those items which pertain to the subject under discussion.

4. Make sure that all typewritten and duplicated materials for student use are done with pica type and double spacing.

The loss of hearing efficiency also has some important implications for teachers, particularly for those who teach older adults. Some of the more readily apparent ones are the following:

1. Speak more slowly and distinctly as the age of the group advances.

2. Stand still, or relatively so, so that those who depend to some extent, consciously or unconsciously, on lip reading will be aided in understanding what is being said.

3. Unusual words, unfamiliar names, numbers, and the like should be enunciated clearly and then printed on the blackboard.

4. Study the faces of members of the group to see whether they are hearing.

5. Use simple, well-chosen words that are clear and meaningful; avoid the use of words that are lengthy and difficult to understand.

6. Use the blackboard freely; vision will supplement poor hearing.

7. Talk directly to the group; don't turn aside or away from the group while speaking, as this prevents those who depend to some extent on lip reading from understanding what is being said.

8. Be especially observant and eliminate inside or outside noises that tend to interfere with the hearing of the group.

9. Questions directed to the teacher by members of the group should be repeated for the benefit of the entire group before the questions are answered.
10. Ask someone in the back of the room to call attention when any member of the group cannot hear.

We said earlier that adults, particularly middle aged and older adults, have somewhat slower reaction time—that their general physical tempo was slower and their limits of internal body adjustment to external conditions are narrower. What does this tell us as teachers? It tells us several things, I think.

1. Older adults must be permitted to choose their own work tempo. They should be encouraged and stimulated, but not rushed.

2. It tells us to be particularly attentive to the physical comfort of older adults; to maintain classroom heat and ventilation within proper limits; and to arrange for use of the most suitable furniture available.

3. We should arrange for an accessible meeting place for older adults, one which requires a minimum of stair climbing.

4. Arrange the schedule of meetings insofar as possible to best suit the group.

5. Maintain a pleasant social atmosphere in the classroom.

6. Do not hold meetings overtime.

7. At the appropriate time we should emphasize the importance of their avoiding environmental extremes and conditions of stress.

Psychological Changes

In the psychological realm there are three (3) primary areas in which changes with age may influence learning most directly:

1. Ability (intellectual power)
2. Interests
3. Attitudes

In the absence of injury or disease, does the aging process itself change our ability to learn, or the way we learn?

A study of the multiplicity of research in this field shows that psychologists differ considerably as to the effects of age upon the intellectual capacity, or the ability of the individual to learn. Edward L. Thorndike, who dominated this field for many years prior to World War II concluded that the peak of one's ability to learn is reached at some point between 20 and 25 years of age; that the capacity for learning declines
from this point at a rate of a bit less than one percent per year until about age forty-two or a total decline of from 13 to 15 percent. Thorndike's findings were supported by the research of a number of other psychologists, notably the American teams of Jones and Conrad, and Walter and Catherine Miles; also the imminent British team of Foulds and Raven.

The findings of much subsequent research however, notably that of Irving Lorge, differed with Thorndike's by pointing out that if the speed factor is removed from learning tasks, the differences between young and older learners, insofar as their power to learn, become very much smaller. After extensive research and testing of people at various ages, using both timed and untimed intelligence tests, Lorge concluded that there is a decline in rate of learning as age progresses, but that intellectual power in and of itself does not change from about twenty to beyond sixty. He attributes the decline in rate of learning to the losses we sustain in our vision, our hearing and reaction time primarily. The increased fear of failure, and a general reluctance toward learning on the part of older adults were also mentioned as possible factors.

In recent years, there has been rather widespread acceptance of Lorge's thesis that the real change occurring in one's learning as he grows older is one of RATE and not of ability (or power) to learn. An interesting article appeared in Time Magazine some months ago entitled "Are There Changes in Mental Function Due Solely to Age?" Psychologists Willard A. Keer of the Illinois Institute of Technology and Ward C. Halstead of the University of Chicago were researching this question. They wanted to find out whether a man's mental ability necessarily declines with age.

They selected 424 healthy business executives, all of whom had demonstrated their ability to get ahead in highly competitive fields. The average age of the group was 52 years—many were a good deal older. These men had pushed their separate ways up the ladder of success in their chosen, competitive professions. The question was: Were they now slipping or were they still mentally sharp, and capable of organizational leadership?

Each executive was given a variety of tests which seemed, at first glance, to have nothing to do with mental ability. They were asked to show how steady they could hold their hands, how fast they could wiggle their index fingers, how fast a light could flicker before they saw it as a steady beam, etc. Such tests were designed to show how well the nervous system was functioning at the physiological level.
There were other tests that dealt with reactions to abstract patterns; that graded the individuals on their ability to understand and remember what they had heard and read. Results of these various tests gave clues to each man's ability to absorb new ideas and deal with new words. The tests as a whole were designed to show actual mental impairment, if any, that could be traced or attributed solely to advancing age.

Among the men in their 50's, they found no changes that were inevitable. Some of the men in their 60's and 70's showed some loss of memory, reasoning, and decision-making powers, but many did not. Most of the 424 aging executives, according to this report, showed as much mental agility as a group of medical students averaging 25 years of age.

The researchers concluded that any decline of mental powers with age is more likely to result from the brain getting too little rather than too much work—that the capacity is still there, the same as it ever was, if it is kept active and alert. This seems to confirm Lorge's findings that intellectual power remains essentially unchanged. It also seems to confirm the contention of Wilma Donahue, the noted Gerontologist from the University of Michigan, who says that evidence convinces her that exercise of the mind retards deterioration of intellectual processes. She says that if minds are kept active through exercise of intellectual and creative imagination, outstanding achievements in fields not involving physical powers are possible in the seventh and perhaps even in the eighth decade.

The second type of change that occurs in the psychological realm as age progresses has to do with interests. What happens to our interests as we move from childhood to old age? Do they narrow in scope or lessen in intensity to a degree which significantly reduces our learning capabilities?

Edward K. Strong, Jr. of Stanford University did extensive research on the changes of interests with age—as did Thorndike before him.

Their conclusions may be summarized as follows:

1. There is a slight decrease in the total volume of interests between age twenty-five and fifty-five. The decrease is restricted largely to the physical activities. About 50% of the total changes that do occur within the thirty-year period do so between age twenty-five and thirty-five. There is little or no change in volume of interests between age fifty-five and sixty-five.

2. Items suggesting physical skill and daring show the greatest change of all.
3. In general, the things we like most at twenty-five years of age are liked better and better with increasing age, and the things we like least at twenty-five are liked less and less.

4. The interests needed to support adult learning show no decrease. In them there is no steady, unavoidable decline or "drying up."

5. Interests can be modified. Likes and dislikes can be learned by older adults as truly as names or dates.

6. Learning without interest of some sort does not occur to any appreciable degree.

7. Whatever difference exists between young adults and old adults as to willingness to learn, interest, and ability to apply their minds are moderate in amount, and will not prevent the older group doing at forty-five or above, on a somewhat reduced scale, almost anything they could have done at twenty-five.

8. On the whole, the older adult is more influenced than the young adult by uselessness and harmfulness of the material to be learned.

9. The old suffer greater reduction in the amount learned under conditions of mild bodily discomfort than do the young.

10. The old suffer more than the young from being frustrated by deprivation of success.

How does advancing age affect our attitudes—our outlook on life? In a study of attitudes and adjustments among recipients of old age assistance in New York State, Christine Morgan reached the following conclusions:

1. Men had better health than women, and a close correlation exists between health and happiness.

2. Forty percent of the happiest people had more than an elementary education, while only 24 percent of the unhappiest ones had more than elementary schooling.

3. Seventy percent of them said they would be much happier if they had a job.

4. Work and social responsibilities were the sources of greatest happiness.
5. Women find it easier to occupy themselves. Thirty percent more women than men reported they had plenty to keep them busy.

6. Finances, concern for spouse, and poor health were, in that order, reported as sources of greatest worry.

7. There are no aged characteristics as such; traits exhibited by the old are as varied as those shown by a group of young people, and are determined by the same factors—cultural, educational, economic, and sex differences.

**Miscellaneous Psychological Changes**

The following are miscellaneous facts and conclusions regarding the psychological aspects of aging, reported by various researchers:

1. Frequently the fear of aging, rather than the aging process itself, induces mental deterioration. This is the result of social pressures in our society and calls for a better understanding of the place of the aged in the picture of the full life span.

2. A study of over 700 people whose mean age was 85.5 years and who lay at the two extremes of wealth and poverty revealed the following formula for longevity:

   An increase of life duration is favored by marriage, descent from healthy long-lived parents and grandparents, breast feeding, moderation and regularity in the conduct of life, cheerfulness and occupation till a ripe old age, and retardment of retirement.

3. It is important to remember that (in aging) all changes are not necessarily in the direction of decline. For example, although muscular strength, vigor, and speed of reaction decline with advancing years, skills tend to increase with long practice. Though there may be less intense emotional drive or ambition, there occurs an increasing loyalty and calmness, with clearer definition of purpose of living upon further maturation.

4. Older adults are proverbially less ready to adopt new ways, or even to try new ways, than adolescents or young adults.

5. Older workers are:
   
a. Steadier in their jobs, require less frequent replacement, and are less expensive in training.

   b. More careful with equipment, less wasteful of materials, and have fewer industrial accidents in relation to hours worked.
c. Less distracted by social interests and tend to develop a strong sense of loyalty and responsibility.

d. Sick more often, and require longer to recover from illness or accident, but they show greater caution and have a lower accident rate.

Implications of Psychological Changes in Aging

Implications for teachers of adults as indicated by these psychological changes with aging seem to fall into three categories:

First, the general tone of the research shows that there is a substantial retention of the POWER to learn, but a slowing up in the RATE of learning as we grow older. The implications for teachers in this and related facts developed in the research would seem to include the following:

1. Expect quality from adult learners, but remember that it will take longer to produce it as age advances.

2. The scope of lessons must be planned with due regard for speed capabilities of members of the group.

3. Present new material in the most logical sequence, step by step, and relate it to what is already known. Short units of work will tend to give older adults a feeling of success and mastery, and this is highly important.

4. Utilize various instructional aids to help establish important concepts and relationships. Write things on the blackboard as they are explained. Double exposure (sight and hearing) will help solidify learning.

5. To help compensate for slower correlation of ideas, select the central idea or principle, then plan class demonstrations, explanations, and discussion so as to develop and reinforce the basic, central idea.

6. Repeat important points frequently.

7. Summarize often.

8. Because of the widespread existence of negative attitudes regarding the ability of older adults to learn, the teacher must make a special effort to reassure adults on this point; he must overcome their feelings of insecurity and fear of competition with younger adults and give them a new sense of security and mastery.

9. In laying out tasks to be performed in the learning process, the teacher must make sure that the older adult sees the relationship of the tasks at hand to his ultimate objective.
10. Since learning flows primarily from the consequences of satisfaction and reward, every opportunity should be utilized with adults particularly older adults to praise good work. By the same token, errors should be minimized and all kinds of punishment (including sarcasm and ridicule) avoided. Accent the positive (success), not the negative (failure).

11. Do not forget the importance of short recesses (or breaks) for adults.

12. Often the urgency and seriousness of his purpose results in a drive for achievement which itself can become a source of discouragement. He may expect more rapid achievement than he is capable of producing. The teacher must be keenly observant for signs and symptoms of this difficulty, because if not detected and proper counsel and encouragement given, the individual will drop out with a feeling of disappointment and frustration.

Secondly, the wide range of individual differences in age, ability, previous education, and interests that we find among older adults would seem to hold the following implications for teachers:

1. Remember that every member of the group is a voluntary participant. As such, each one is there because he wants something. One of the most difficult and important jobs the teacher faces is that of finding out what each person's particular interest or need is. Unless the adult gets what he is coming for, he will soon stop coming.

2. Every group of adults has a wide assortment of talents, and these constitute rich resources for the group. To identify these resources, there should be an early effort made in every group to get acquainted all around. The teacher has a particularly important responsibility here in studying the background, interests, needs, and capabilities of each member of the group, so as to plan the work for the group and utilize to the optimum degree the talents of each member for the benefit of the group as a whole.

3. Do not give older people "busy-work" to do. Engage them in useful, challenging and meaningful activity, according to their particular interest.

4. Make everyone feel that his opinions, needs and thoughts are important.

5. Encourage everyone to share in group activities. This will give older adults the feeling of belonging often times needed to allay their fears about returning to school.
6. Remember that the adult brings with him much of the vocabulary and stored knowledge which will facilitate and give depth to new learnings.

7. In learning new skills, older adults often have to "unset" old patterns, long established. This may be frustrating in extreme cases. It is time consuming in all cases. Teachers can soften the effect of this experience for the older learner by explaining that this is a common problem, not at all peculiar to him; merely something that all "grown-ups" have to contend with.

**Brief Summary**

In summary, we have said:

- Adult learners, particularly older adults, are different--that

- In the process of normal aging changes do occur which affect learning--and make the older adult a different kind of student from the child or young adult learner.

- Perhaps the most important conclusion to be drawn from our analysis of these changes is that, "adults, regardless of age, can still learn".

Finally, and I hope you agree with me, if we as teachers can be constantly mindful of the unique characteristics of adult learners--characteristics which result from these developments during the aging process--we are likely to be much more effective as their leaders and teachers.
I am happy to be given this opportunity to have a part on your program. For the many years I've been professionally associated with the Florida Department of Public Welfare, I have felt there needed to be increasing emphasis on services to the older adults in our society. I need not recite to you the statistics establishing the longer life span and increasing numbers of older adults living in retirement or semi-retirement. Neither will I dwell on the fallacy that "old age" begins at any specified chronological age. I am assuming that we are today concerned with those people who are past middle age and, for whatever reason, are needing to plan for less active lives—yet retaining a significant, meaningful, and satisfying place in society.

In considering techniques for counseling older adults, there is no standard set—1, 2, or 3—series of "do's and don'ts". You are relating to individuals with distinct and separate personalities. In general, we can say most of these have been people who in earlier years have achieved a degree of success, small or large, who have been able to cope with their problems with some degree of maturity and satisfaction, but because of declining years, find it increasingly difficult to handle the pressures that face them.

We can say that how a person was able to make the "shift" to accommodate changes in earlier life experiences and styles will affect their ability to cope with the pressures and problems facing them in the later years of life. It therefore follows that your service plans with your aging client must take into account a careful analysis of the individual's own personality and the clues you get about his means of coping with his problems from childhood to where he is now, as well as his feelings about, and how he views his future.

The prime requisite for counseling, I believe, is to be a person with a sincere liking and concern for people; a person who feels comfortable with older people and feels a commitment toward the provision of service that will help the aging client have a happy, active life with the feeling he has maintained his sense of individual worth and dignity. You must be able to use your own personality in such a way as will allow your clients to see you as a person whom they can trust and on whom they can depend. You must be the kind of person who can accept your client as he is, being non-judgmental in approach, neither threatening or overly authoritarian in method. This calls for the counselor to
be very careful in the examination of his own values and prejudices that can interfere with the willingness to fully use himself in the giving of needed help. Does he really believe the older adults in our society can and must be utilized as important members of society, or does he view it just from a purely humanitarian standpoint of making life more comfortable for them, to ease society's conscience? I note that you have already had discussions on the physiological and sociological aspects of aging. We know that as we grow older our physical and mental processes begin to slow down. Again, this varies widely from individual to individual, depending on his heritage and environmental influences on physical and mental health through previous life stages. Nevertheless, the reality factors, such as degenerative changes of the brain and other organs of the body as the aging process progresses must be taken into account. Thus, there will be some slowing down in thinking and responding. As the individual's resistance to physical ailments becomes less effective, he may become over-anxious about his physical health. If circumstances force him into retirement and disengagement from former pursuits, before he is prepared for this, he will likely be frustrated and angry, which causes the problems of the aging person to be more complex than the direct effects of senile decay alone. This is further compounded by the disturbing effects of socio-economic and cultural change all of which gives the aging person every reason to feel insecure. You will need to help him deal with these feelings. A recent article I read had an example of this business of handling our feelings. A woman approaching the "senior citizen" age could not accept a suggestion of participating in a Golden Age Club, but might consider a "Silver Age" Club which she had heard might be organized in the community.

We know that many studies have been made that support the theory that successful aging is greatly dependent on the retention of autonomy and independence by the aging person. Thus, it is of extreme importance that programs planned for older people be based on the concepts of ego supports, self-determination, creative contribution, and the need to feel needed, useful, and respected.

I like to use the comparison of opening doors versus closing doors when considering what happens to people's feelings of being needed and useful. From infancy to middle age, we are continually going through opening doors--learning to walk, talk, start school, courtship, marriage, jobs, children--these are experiences that are a series of opening doors for us. After middle age, we begin to see more doors closing, such as children grown and leaving home; no more need for PTA, Cub Scouts, little league, etc. And so it progresses as we leave jobs and connections with business associates, many activities that are now proving too strenuous and demanding; loss of mate; finally perhaps leaving our home for more protected living arrangements.
Now, how do we determine what kind of personality we are working with, in order to know what procedures to follow? We have already said you must begin to build a trusting relationship from the outset. In general, the first step then is to let your client tell you about himself. Usually this isn't difficult if you have been able to convey to your client that you are sincerely interested, will treat information given with respect for confidential aspects, and your interest is not for the sake of prying into his personal life. Most older people enjoy recounting their life experiences, and indeed they need to share these experiences with others. I would certainly hope we never shut out this source of great wisdom that comes from having lived for 50, 60, 70, 80, 90, or 100 years. Furthermore, his feeling of self-worth is enhanced by your recognition of what he has achieved in the past and what he can do now in spite of adversity.

Listening is one of the most important skills you use in any counseling situation. What your client tells you, verbal and non-verbal, is your main source of clues as to what kind of person he is, how well he has been able to cope with his problems in the past, what kinds of activities have had the most significance for him in the past, what kind of preparation has been made for useful, satisfying living in retirement years, what economic, social, and emotional resources does he have to depend on, how flexible has he been in prior life that will put him in good stead for the adjustment ahead.

After getting this background information, there must be formed a careful analysis and evaluation of the things you've learned from your client. This needs to be thoughtfully weighed with information gained through collateral contacts--relatives, friends, and others who are significant to your client. As far as your client is capable, he needs to be actively involved in the decisions affecting him. If you are dealing with a person who has been an independent person accustomed to having considerable control over the direction of his life, then your counseling needs to be directed in ways that will help him arrive at a solution compatible with his need to retain his sense of self-determination.

We also need to keep in mind that older people may be temporarily hindered in their ability for self-determination by some crisis. Watch for the place he begins to regain his ability to function. You then begin to shift your role from that of allowing and encouraging him to lean on your strength and guidance, to that of supporting him in a return to a greater share of the decision making as it affects him, and to the full extent of his competence for self-determination.
Now, let us consider some of the decisions most aging people must come to grips with:

1. Working--if his greatest interest in adult years has been work oriented, the chances are he places the greatest value on this and may need help in planning for some part-time, and less demanding work. On the other hand, you may find that while work has been his chief concern up to here, in reality, the work was secondary to his chief aim of getting financial security in order to afford a more leisurely life for the pursuit of activities he had to postpone during the years of financial responsibility to the family.

He then may need guidance in selecting realistic activities that will fulfill some of those expectations. Maybe he always had a "yen" for being an artist, but could never have time or money to pursue this, while being a plumber as a means of meeting financial need.

The careful analysis of what he tells you, and the feeling he manifests when he tells you of his wants and needs as you work together will serve as your guide as your counsel with him about what kind of future activity will help him retain his sense of being a worthwhile, contributing member of society--a position where he can enjoy a rightful measure of respect.

2. Social and Spiritual--again, the older adult is more likely to follow the pattern of involvement and interest in spiritual and social activities as has been his practice in prior life periods. If he has enjoyed church and social affairs in the past, chances are he can use your help and encouragement to return to these kinds of activity.

3. Family Involvement--Ethel Shanas in her study of family relationships of older people, published in 1961\(^1\), found that despite some ideas to the contrary, there continues to be strong affectual and other ties which bind families together, but that to be dependent on adult children for financial support poses a considerable threat to the aging relative. Shanas concluded that what most older people want from their children is love and affection, and to be financially dependent on them would threaten this affectional relationship.

I personally feel that all persons engaged in a helping relationship with aging people need to give very careful attention to their own attitude and bias with reference to family responsibility to aging relatives.
In services to the elderly that indicate involvement of adult children two main categories are to be considered: (1) Those who have responsible adult children (or other close relatives) with whom there are sound familial ties, but who need help from outside the family because of a temporary crisis or inability to cope with all elements of the problem; (2) Those whose relationships with adult children are faulty, but by supportive services the relationships can be strengthened to the point of supplying the elderly person with the necessary supplies of family love and worth as a family member. In the second category there can be two sub-categories: (a) Those adult children where there is no serious faulty parent-child relationship throughout the earlier developmental periods, but who do have some guilt feelings about having "failed" the parent by not being able to do more for them, thus creating a block to free communication between them. This would also include those situations where the adult children do not understand some of the physical and psychological changes that have occurred, resulting in behavioral or other personality changes in the elderly parent. (b) The second sub-category would include those adult children where there has been more serious parent-child relationship faults in earlier developmental periods, but who can be helped to provide emotional supports within his capacity. That is, the provision of those things he can do for his aged parent that contributes to the necessary emotional supplies, yet does not place on him the kinds of demands that stir up anxiety, guilt, and resultant hostile feelings caused by problems from the earlier information must be assimilated to determine what quality relationship exists between the children and their aged parent, between the various responsible children, and within the nuclear family of each child.

As pointed out by Boyer, in her book, The Gerontician: A Study in Method, the reaction of children to a crisis related to the aged parent will be affected by the quality of their relationship in the past. Furthermore, if the past relations have been bad, children sometime respond to their guilt feelings by the display of much greater concerns for their aged parent to the extent of insisting the aged parent move into a closer living arrangement. Boyer points out that such an arrangement will not work in the long run any better than it did in the past; the result being the aged person is likely to decline in ego stability and resort to uses of withdrawal methods as a defense. The counselor needs to be able to recognize this and guide the planning toward other alternatives, where possible.

The counselor must be capable in all instances of understanding the "why" of the relationships and approach the problem from the standpoint of creating a balance between the aged parent, the adult children, and the counselor whereby the need of both aged parent and the children are supported, but at the same time being careful to focus on the goal of a plan that is
satisfying to both the aged parent and the children. In such a situation, the counselor must not lose sight of the goal of help to the elderly client. If this focus is lost, and the counselor becomes too involved in treatment directed at the adult child's problem, the adult child will not be able to respond to the needs of the aged parent while so involved in his own feelings.

If his individual problem calls for this kind of intense service, then this should be treated as a separate case until such time as he is able enough to contribute to a more meaningful and mutually satisfying relationship in relation to his aged parent's problem.

In all cases, services should be directed toward making it possible for the older person to remain in his home where he is happy and in an environment to which he is accustomed. Full use of such services as housekeeper, visiting nurse service, friendly visitors, ministerial visits when appropriate, and necessary medical treatment must be encouraged and planned for. The counselor can be of great value in helping the aged person and his family understand the importance of these services and how they can be made available. In this same area, the counselor's knowledge and understanding of changing behavior associated with the decline of physical and emotional health in elderly people can be of value in helping the adult children understand, accept and react positively to such changes.

If and when the circumstances require a move into a retirement home, nursing home, or some other type protective living arrangement, the counselor will try to help the elderly person and his family understand and accept the reality of it. Here it is important that the counselor not be the one to force the decision. This should be left to the elderly client and his family when possible. Where there is no available responsible family member and the aged client is not competent to make the decision, it is advisable to have some other person with authority, such as a legal guardian, take the necessary action. This then leaves the counselor in a position to continue services to the elderly client focused on helping him make a satisfactory adjustment to the changed living arrangement. The client will not then be likely to think the counselor has betrayed him.

In all cases of planning services to the elderly, it is very important that the client be allowed his right to make decisions concerning the solution to his problem. His capacity to make rational decisions may vary according to the condition of his health, but it is just as important that he be involved in goal setting and decision making within his capacity as it is with any younger client. Feldman and Scherz hold that "...it is important to recall that responsibility for himself
and solutions to his problems lie with the aged person first, then his family, then the agency that represents the community's interest and concern, and then the worker— in that order.\(^3\) When responsibility is ranked in this order, the elderly person is free to make his choices about whether to live alone, with family members, or in any other arrangement he feels best suits his particular needs.

In this connection, the counselor's value in connection with relating to the adult children can be seen. Sometime adult children have a misconception about what is best for the elderly person. In all good faith, they sometimes have the idea that the elderly parent should give up many activities in the belief that he has "earned" the right to "rest" and relief from responsibilities— that to continue in many of his usual pursuits will weaken and shorten his life. Thus, they become too protective. The counselor can help the family understand that a person who has led an active life may be most unhappy to "sit and rock". The worker can also enlist the help of the family members in encouraging and helping the aged parent make plans for continued creative work and play. Whether the aged parent is living with adult children or separately, the children can help the parent feel needed and useful by having them participate in family duties to the extent the elderly parents wants to participate. Duties such as sewing for the grandchildren and other family members, providing vegetables and/or flowers from his own garden, household duties he enjoys, running errands, and such activities gives the aged person a feeling of usefulness in the family circle.

All the literature supports the contention that older people need to remain in the stream of community life. They need companionship, religious affiliation, and a sense of contribution to the well-being of their society. The family can be encouraged to help the elderly parent arrange to participate in such activities. One point that bears discussion here is the understanding that elderly people need companionship with the opposite sex as much now as they did in younger days. Adult children are sometimes less likely to understand and accept this emotional need by their aging parent. If this is an issue in the relationship between elderly parent and children, the counselor can try to help the children understand and appreciate it, rather than having the attitude that having a gentleman or lady friend is not a "silly return to second childhood," and should not be considered as unbecoming or inappropriate just because the person has reached old age.

In summary, elderly people need to have familial ties that give them a sense of having value in a family system. Recent studies support the idea that these inter-generational ties have not lessened in strength, and that adult children, or other younger generation relatives have affection and concern for the well-being
of their aged relatives. When social services are being offered, the counselor needs to have as a goal the maintenance and strengthening of these family ties. The approach should be guided by the dynamics of preceding family interrelationships. The counselor must be able to determine what the family cultural and other value systems have been, what the family communication patterns have been, and what the strengths and problems are within the nuclear and extended family system.

Another area of needed information is that of community resources. The counselor needs to know what there is in the community that can be utilized for the benefit of his client, such as:

1. Sources of financial help -
   
   Is he eligible for Social Security benefits, Public Welfare, Veterans benefits, any retirement funds possibly available as a result of a deceased spouse's credits?

2. Sources of health care -
   
   1. Public Clinics
   2. Visiting Nurse Services
   3. Access to private sources of health care
   4. Hospitalization programs
   5. Availability and costs of nursing home, foster homes for aged, etc.

3. Recreation programs for adults
   
   1. Arts and Crafts
   2. Social Clubs
   3. Education programs for further works opportunity and/or other creative pursuits.

4. Spiritual participation:
   
   1. Access to church of choice
   2. Other church sponsored activities for older people

5. Opportunities for older people being involved in volunteer services within their interest and ability.
To summarize, in all relationships with the older client and his family, the effective worker is a person of genuine warmth, concern, and personal commitment in helping the aged client have a happy, active life with the feeling he has maintained his sense of individual worth and dignity. The counselor uses his personality and professional skill to give the elderly client the assurance that the relationship is something on which he can depend for the kind of help that is within the function of the agency represented by the counselor. The counselor is careful to communicate to the client and his family the nature of the services he can offer, what his function will be in helping the client avail himself of the services being offered; this interpretation being done in a professional way that is understandable to all concerned.

Beyond the authority of the agency being represented by the counselor, he does not act in an authoritarian manner. This does not mean he does not have to sometimes set the rules and limitations. Where this is necessary, this is done in a kind way that conveys to the elderly client that he is still liked by the counselor, but his behavior is that which is not liked. The fact that the counselor may represent authority, to the extent of representing the authority of his agency, can be a positive and reassuring element for the elderly client, in that the client can feel assurance that the authority is there to back up the services being offered. Nevertheless, the counselor does not individually assume a role of authority which will be threatening to the elderly client or his family. This calls for the counselor to be very careful in the examination of his own values and prejudices that can interfere with the willingness to fully use himself in giving the needed help.

Finally, the counselor must be able to create and maintain a good balance in the relationship that allows the elderly client to be as active as possible in the solution to his problem, yet be able to feel comfortable in leaning on the strengths of the helping person and other family members. This is the balance between being over-protective and the giving of love, support, and comfort directed toward utilizing and building on the strengths that are still present.

References


A Comprehensive and Coordinated Community Approach

In Planning Educational Programs for Older Persons

Glen McKibben, Executive Director
Senior Centers of Dade County, Inc.

As a practitioner and administrator in the field of aging, I have had the opportunity to be involved in both the direct delivery of services to the elderly, together with the creation of the systems to provide the necessary services to meet the expressed needs and interests of the older person.

I am sure you, who have been participating in this Institute, have already gained insight into the characteristics of the older person - psychological, physiological, and social, and the concomitant importance of these factors when planning programs which will reflect total involvement of the community and its resources.

"Comprehensive" is defined in Webster's Collegiate Dictionary as meaning - "including much, inclusive, having the power to comprehend many things, of wide mental grasp." In a rapidly changing world with all its complexities and diversities, the term "comprehensive" has gained greater significance, respect, and usage, in our everyday vocabulary as a private citizen, as well as among the social scientists and professional community planners. Today, no one institution, be it educational, social recreational, health, religious, etc., can afford to function in a vacuum which results in costly fragmentation and duplication of services to the individual. Therefore, you as practitioners and activists in the field of aging have a special responsibility to become knowledgeable about the community resources which exist in your community, and their function. In this way, you will be better able to assess the inventory of services available to the elderly, and what impact these services have upon the older person, as well as gaps in services and the most appropriate approach or means of bridging these service gaps.

I realize that each of you represents a neighborhood, community or area which has its own uniqueness and individuality and therefore defies any attempt I might offer through examples to provide answers to the problems which are peculiar to your area. In your community, the vehicle best suited for the delivery of services to senior persons must be custom built to the community's specifications - it must reflect your knowledge of the community, the special needs of its elderly, and the number and rate of growth of the older group. "Facts about Older Americans," published in 1966 by the U.S. Department of Health, Education, and Welfare, answers a number of basic questions on numbers, income, living arrangements, employment, etc.
However, I believe certain examples posed here might prove to be beneficial in relating ourselves to comprehensive planning. For example, those of you who represent a church group, and through this Institute earnestly hope either to initiate a meaningful educational program for older persons at your church, or enhance an already existing one, will have to accept the responsibility for establishing a cooperative working relationship with those institutions who can appropriately provide social and health services to the elderly through the facilities and volunteer staff contributed by the church.

Upon establishing the facts, through comprehensive study, the next step in the process of delivery of services, is one of coordination. Again, we turn to Webster who defines "Coordination" - "the act of coordinating, harmonious adjustment or functioning." In order to effectively implement program services for the older person, it is absolutely necessary to involve the above mentioned institutions, together with county and local governments, to establish guidelines for the participation of these agencies. There are many mechanisms which can be utilized in coordinating the services of these agencies into one, functioning as a whole. Perhaps the one agency most familiar to all of us would be the Council on Aging at the county level. If the county in which you reside has a Council on Aging, your church could request their assistance in the delivery of services for the senior person.

The legitimate question could now be asked, - How can you determine the expressed needs and interests of the older population in your area? Do you base these needs on what you, professional and volunteer administrators of aging programs believe to be in their best interest? To the contrary, I feel that responsible approach to planning educational programs would be one which reflects the needs and interests, as expressed by the elderly who are the participants in the program. Therefore, as you help to shape and develop educational programs, the application of the concept of the right of self-determination is of the utmost importance, to help assure the success of any program.

The professional or volunteer staff worker, with this as one of his guiding principals, should utilize the most effective method to develop an educational program which will essentially reflect the basic interests and needs of those whom you desire to serve. The method which has proven to be most successful in achieving this goal, is the Group Work method, through which the individual has the opportunity to participate in meaningful discussion with his peers, to identify the needs and interests of the individuals within the group, as well as, the group as a whole.

The staff worker should be ready to appropriately respond to both the verbalized and unspoken requests for activities by the group.
Structurally, the staff worker could invite the participation of older persons to determine program needs through a meeting of the total membership, which could then delegate the responsibility for program planning to a committee. This committee would then have the duty to create program activities which would be representative of the attitudes and feelings of the membership organization. Through the democratic process of decision making by the program planning committee and the membership organization, within the framework of the sponsoring agency, the elderly's needs and interests will be met.

Senior Centers of Dade County, Inc., is a private, non-profit, voluntary, social service organization, responsible for the development and operation of six multi-service senior centers, six neighborhood reach-out locations, and special projects, for the purpose of providing services designed to prolong independent living and enhance social functioning. Senior Centers is presently delivering services to over 4500 members, sixty years of age or over. The staff at the centers and reach-out locations consists of an inter-disciplinary staff team of social workers, health maintenance nurses, food service personnel, educators, specialist instructors, and volunteers. The Board of Directors, composed of community leaders, sets the goals and policies for the operation of the centers.

The centers are open daily, Monday through Friday, and some evenings and weekends. The Housing and Urban Development Department of Metropolitan Dade County, in connection with its program of building special low-rental housing units for the elderly, has provided the center facilities for the use of its tenants, and other elderly in the community. Responsibility for the financial support of the centers is shared by the United Fund of Dade County, and a contract for services with the government of Metropolitan Dade County.

The basic services of the multi-service senior center are: Group and Adult Education Services, Casework (Individual Services), and Health Maintenance Services, and Food Services. In 1966 the following program summary was made relating to Adult Education. One center serves a number of Spanish speaking members, who, due to their inability to speak and understand English, participate in center activities in a very limited way. With this realistic fact confronting the center, not only the staff, but both English and Spanish speaking members were greatly concerned about this situation. As an out-growth of this, the team approach (casework and group work staff) was used to help form a class in English Conversation for Spanish speaking members. The center membership was involved in the discussions about offering this class as part of the on-going program activities of the center. The Program Planning Committee of the Center Membership Organization was ultimately approached by several of the Spanish speaking members who requested that such a class be initiated.
Significantly, these members also, with staff help, found a member of their own ethnic group, whose educational training and experience would be appropriate for assignment as a volunteer instructor for the class. However, this member was reluctant to accept the full responsibility for this class, because of her Spanish accent. Therefore, through their interest in teaching and/or learning Spanish, four additional members volunteered to act as instructors who would pronounce the English words and construct sentences which would be useful to the Spanish speaking members in their everyday experiences. There are currently twelve Spanish-speaking members participating in the class, with an expression of unbounding enthusiasm among both the member participants and the volunteer member instructors. The members and staff feel the English Conversation Class has been a success. The Spanish-speaking members appear to feel more comfortable and willing to relate to the English-speaking members, with this being apparent in their daily contacts at the center. In other words, one of the goals is being achieved, the Spanish speaking members can identify with the larger whole, the center, through their increased participation in various formal groups, and thereby feel a sense of belonging. They also have the opportunity to, in part at least, "quench their thirst" for knowledge and understanding of the English language. Inherent in the foregoing is that the basic philosophy of the right of self-determination was demonstrated in the formation of this class.

As a result of the Cuban immigration, which still continues at a rate of some 4,000 persons per month, Dade County is fast becoming a bilingual and bicultural community. As of today, 26% of the city's population is Spanish speaking. County-wide, it is estimated that there are more than 300,000 Spanish speaking residents, of which 30,000 are over sixty. More significantly, in point of the needs that Senior Centers are designed to meet, figures from the Cuban Refugee Assistance Program show that of the 11,000 persons on its caseload, some 8,300 are over 65 years of age. Senior Centers, having gained some insight into the problems of serving this ethnic group, realized the importance of meeting this new challenge.

Therefore, Senior Centers submitted a project proposal, "Project Amigo", under Title III of the Older Americans Act, through the Florida Commission on Aging, for a one year project. This project was approved and began on October 1, 1967.

The primary objective of Project Amigo was to demonstrate the capacity of the Senior Centers, with their multi-purpose programs to carry out a viable inter-related educational, citizenship, and social program that would promote the integration of the Spanish speaking elderly into the centers and the community. There was a need for this, as population statistics clearly indicate.
An Advisory Committee, composed of Board Members, professional, business and civic leaders of the community was formed to help provide direction in achieving the goals and objectives of Project Amigo. This committee was instrumental in coordinating Senior Centers' programs with the community at large.

Initial reach-out and recruitment efforts were concentrated in the areas of the greatest density of Spanish-speaking population, which corresponded in location with the area served by the Metropolitan and Myers Centers. By early in the spring of 1968, the modest target of 100 members was within reach, but it became clear that other methods of recruiting, besides invitation letters to prospects selected from lists supplied by community agencies were needed if the project was to reach any significant number of eligible candidates for membership. Accordingly, specialized personnel, both full and part-time, were added to the staff, new English, Spanish, and Current Events classes were organized, and more intensive recruiting plans were made with the assistance of community agencies involved in work with Spanish-speaking residents, especially with the Cuban refugees.

This project, through the process of education and socialization helped to change the attitudes of some of the English-speaking members towards the Spanish-speaking members. For example, a Spanish-speaking member who enrolled at a center was insecure and unable to relate to the English-speaking members. Through the work of Project Amigo, this individual is now involved in many of the activities of the center and is readily relating to those whom he now calls, "his English-speaking friends". Also, this individual was elected as an officer of the membership self-governing organization. In addition, he is a Senior Aide in the Dade County Community Service-Senior Aides Project. This is just one example of the impact which Project Amigo has had on the Spanish and English-speaking members.

To achieve orderly and constructive growth and development in programming for older persons, it is imperative that the matter of priorities, both in terms of short range and long range planning be established by a group or committee, representative of the community's professional, business, and civic leaders, and reflecting the socio-economic and racial composition of the area served. With this total approach in planning, all interests in the community will be best served. Inherent in the setting of priorities is one of always being mindful of the primary goals and objectives of your agency, church, or club. If primary goals and objectives have not been specifically spelled out in your program, this should be done before attempting to formulate priorities in planning programs for the elderly.

The essential goals of Senior Centers, for its multi-service senior centers are: to promote the social and emotional well being of older persons, through an environment conducive to
the creative use of leisure time, talents and abilities; furthering satisfying interpersonal relationships, and the learning of new roles having meaning and value to the individual and the community. Other goals include promoting good health habits and nutrition, encouraging participation in volunteer services within the center and the community, fostering continued interest in self-education, and participation in a variety of group activities and recreation.

To illustrate the role of education in each of the basic services, as I previously mentioned, each of the centers has a self-governing organization. The elderly elect their own officers and committee chairman, and participate in planning center program activities. Therefore, the Group and Adult Education Service has the very real responsibility of providing appropriate support in assisting the elected leaders of the group, and the group as a whole carry out its responsibilities. One of the approaches utilized this year in developing the leadership potential throughout all the centers was through a Leadership Conference, planned by an Inter-center Leadership Training Planning Committee, with over 300 participants.

It should be pointed out that the Leadership conference is just one of many Inter-center educational programs planned and implemented through Senior Centers' Inter-center Presidents' Council. Before a specific program activity or project is undertaken, each of the Center Membership Organizations are involved in the decision-making process, indicating whether or not they would like to be a part of a program. For example, the Great Literature Discussion Group, with an English Literature professor from the faculty of the University of Miami as instructor, met at the largest center, providing members from all six centers the opportunity to participate in a class geared to their interests and abilities. The I.C.P.C. has provided each of the Center Membership Organizations with a form, wherein they can communicate their similarities and differences and express ideas for joint programs.

An integral part of the casework services is that of arranging for educational programs regarding such matters as Medicare, Social Security, Wills, etc., with appropriate Federal, State or community agencies providing the resource person, and a question and answer period after the formal presentation.

The Health Maintenance Service has as one of its primary functions, that of health education lectures, movies, and discussions, conducted in cooperation with leading specialists from the medical association and community health agencies.

Senior Center's Food Service, along with its primary function of delivering a low cost nutritious meal, conducts cooking
classes, lectures and discussions of food preparation. I believe these illustrations clearly indicate the important and vital role education plays in planning programs for the older adult at Senior Centers.

It should be noted that the success of the operation of Senior Centers and its Adult Education program is linked to the cooperation of the Lindsay Hopkins Adult Education Division of the Dade County Board of Public Instruction, which provides Senior Centers with qualified instructors to develop the strength and capacity of the senior person to be a contributing member of the community through classes in basic education and special interests. Some of these classes are, Good Grooming, English Classes for Spanish-speaking Elderly, Spanish Classes, Choral, Arts and Crafts, Ceramics, Physical Fitness, Lapidary, Silver Jewelry, Drama, Community Service, Sewing, etc.

The number of center members involved in a variety of Adult Education Classes (more than 2100 senior members attending classes during the month) reflects the great interest of the older person in pursuing his education, to make his life as useful and purposeful as possible.

I have discovered in my work with the senior person, that they have a wonderful sense of humor, which prompts me to tell you a story - A clergyman was preparing a sermon as his small daughter watched ---"Daddy," she asked, "Does God tell you what to say?" "Of course, honey," he answered, "Why do you ask?" She answered "Then why do you scratch some of it out?"

Society has a real responsibility in providing all age groups with the opportunity to develop their full potential, in order to preserve their dignity and self-worth. Many illustrations could be cited where the older person, through Adult Education has renewed his interest in living and has translated this into contributing to the well being of others. Thus, Adult Education has played a significant role in preventing emotional and mental deterioration, and thereby eliminated some of the need for institutionalization, which can be quite costly to the community.

It may be of interest to those who are concerned with the funding of Adult Education programs, that Senior Centers has joined with Syracuse University Adult Development Center, to undertake a special study program to determine the learning capacity of the older person. The results of this study have not yet been tabulated, however, the experience of Senior Centers has been that the older person does have the ability to learn new roles having meaning and value to the individual and the community.

Senior Center services have been extended to include providing opportunities for training and part-time employment of center members. The agency is committed to giving high priority to employing qualified older men and women for positions within its overall program.
For instance, the Low Cost Meals Project is in its third and last year of Title IV, Administration on Aging grant, under the Older Americans Act. The primary objective of this project is to provide a nutritious, well balanced, hot luncheon, Monday through Friday, to center members. However, another important component of this project is providing part-time employment to older person in the capacity of dining room aides, counter workers, food satellite managers, etc.

Senior Centers, through a Federal Grant allocated by the U.S. Department of Labor and administered by the National Council of Senior Citizens, Inc., launched a new program entitled, Dade County Community Service-Senior Aides Project, to provide new career opportunities through training and part-time employment of men and women over 55, especially, low income elderly whose contribution in continued community service is possible only through such employment. These senior aides are employed at all six centers and in the six reach-out locations in the disadvantaged areas of Dade County, as Friendly Visitors, Neighborhood Workers, Recreation Aides, Food Service Aides, Program Aides, Assistant Bookkeepers, Receptionist and Attendance Clerks, and Clerk-Typists.

A four day, Orientation and Training Program (4 hours each day) was conducted by the staff of senior centers, to explain about the program, the total community welfare picture, sessions on working with groups and working with individuals. Also covered were explanations of the four basic services, the conditions of work, reports and statistics to be kept by the Senior Aides, etc. One day was devoted to a practice session, where the Senior Aides reported to their individual assignments.

After completion of the Orientation and Training Sessions, Graduation Exercises were held, and each Senior Aide received a certificate. These exercises held much meaning and significance for the graduates; for example one graduate, as she received her certificate verbalized, "I never graduated from anything, and who would have ever thought that at my age I would be graduating."

The Senior Aides employed in this program express enthusiasm and dedication in the various jobs they have undertaken. They have demonstrated consistently an ability to establish meaningful relationships with the elderly whom they serve. The professional staff at the various centers continually gained a greater appreciation of the strengths and abilities of the Senior Aides, as they assist in program activities and services. For example, one of the Senior Aides has an ability in Arts and Crafts, and is using this skill to assist homebound elderly, through a home visit, develop a specific Arts and Crafts interest. In this way, the homebound person, when well enough, is encouraged to pursue this interest at a center.
One inherent part of projects funded by federal and state sources is the educational component. For example, the Senior Aides who are in positions as Food Service Aides, participated in a Food Handlers Course conducted by the State Health Offices of the State Department of Education. The course covered such matters as need for cleanliness, safety in the kitchen, etc., and when the course was completed, these Senior Aides were presented with a Food Handlers Card.

As the Senior Aides' confidence in their own abilities increases, their effectiveness in delivering services increases also. Through working in this program as Senior Aides, several persons have obtained full-time employment elsewhere.

Continually evidence of the value of the Senior Aides project is shown. One Senior Aide choked up with tears, expressing her appreciation for the opportunity to work, as it has made it possible for her to pay an $800.00 hospital bill, accumulated by her late husband's illness.

It has been found that the Senior Aides Program has enhanced the self-image of the older person, and increased his feeling of self-worth, through the contribution he made through part-time paid employment. Senior Centers of Dade County, Inc. is impressed by the commitment of the older person to the project, and feels that it is demonstrating to the community in a most positive way, the contribution the older person can make through meaningful employment.

I have attempted to share with you the basic principles I believe will have relevance and application in your agency work with the community. However, I would like to re-emphasize the fact that each of you represent an area which has its own uniqueness and individuality, and therefore, the planning process for your community will necessarily reflect its differences.

The effectiveness of the educational program for Senior Persons in your community, will, in part, be measured by the willingness of all segments of society to become engaged in the study of the special needs of the elderly. The information which has been presented to you today has direct applicability, regardless of the agency setting which you may represent. You symbolize the concern and commitment of your local community by virtue of your participation in this institute. As a result of this educational experience, you will be expected to provide leadership in initiating and developing new programs for the older person residing in your community. The purpose of leadership is to meet the needs of those to be served. Often struggle is involved in order to achieve - perhaps not physical struggle, but working through - fairly - points of difference so that a unified approach by your community can produce the
appropriate services to meet the expressed needs and interests of the elderly.

You, the leadership people must help and guide in this process. It is not easy, but most necessary if anything of value is to be achieved in and by your agency.

As Howell so aptly puts it, "An acre of performance is worth the whole world of promise."
Use of Library and Other Community Resources

Verna Nistendirk, Director
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Florida State Library

In the early 1900's, with the rise of a strong adult education interest among libraries and educators, Alvin S. Johnson wrote *The Public Library - A People's University.* William S. Learned wrote *The American Public Library and Diffusion of Knowledge.* But the plain truth of the matter is that many libraries were poorly equipped to provide a people's university and to actually diffuse knowledge to all. Throughout the life of the public libraries, the older adult has been one of the many "publics" which libraries regularly serve. This service to older people also includes those who work with the aging, whether as professionals or volunteers. The families of these aging people comprise another public while community leaders and government officials who are truly working with them, often very indirectly, are another of the library's public.

Since the library must serve the community as a whole, this includes all ages from the preschool child to the oldest citizen. The function of the public library is:

1. To facilitate informal self-education of all people in the community;
2. To enrich and further develop the subjects on which individuals are undertaking formal education;
3. To meet the informational needs of all;
4. To support the educational, civic, and cultural activities of groups and organizations;
5. To encourage wholesome recreation and constructive use of leisure time.

Quite a big order, isn't it? And actually various libraries have various emphases. Some have a staff that do one thing well and some work toward another objective. In fact, libraries change their objectives as they go along. Nevertheless, the social, economic, and biological problems resulting from the process of aging place a responsibility on every school, public and academic library and every special library having a general education function as well as those libraries with special concerns for the problems and needs of the aging and the aged. According to the American Library Association statement prepared by the Committee on Library Service to An Aging Population and adopted by the Adult Service Division of the American Library Association in 1964, these libraries served their communities by:
1. Contributing to a positive, wholesome attitude toward aging and the aged;

2. Providing information and education on the subject and its problems for the professional and the layman who work with this group, for those who are aging, and for those who are retired;

3. Demonstrating by example in the library profession and in the use of volunteers the potential contribution to society of the retired or the eligible to retire.

4. Facilitating the use of library service by the aged;

5. Providing library service appropriate to the special needs of this group;

6. Working with other institutions and groups concerned with these problems and needs;

7. Continually exploring ways of making these services more effective.

I think I can help you more by discussing each of these items in the context which some libraries are using to making information and recreation through library holdings more meaningful to their communities. Right now the American Library Association Committee on Aging is working on a booklist to be used by families of the aging to help them develop a more wholesome attitude toward their parents or whomever they have in this age group. This list will include, and you can find some in almost every library in Florida, items about the psychological, nutritional, and recreational needs of the aging. It should help develop a more positive attitude and happier situation for many of the older people and their families. It would also open new ways in which libraries and other organizations can assist the aging in living fuller lives.

Most libraries will provide information, even to specific books, articles and periodicals and answers to reference questions for those who work with the aging. As you know, Florida is developing an inter-library loan network so that if you ask your local library to provide something which it does not have on its shelf, the local library then requests the material from the State Library. If the State Library cannot provide the desired book or information, it puts the question on TWX to the Jacksonville Public Library or the Miami Public Library. Plans are in the making to include other larger public libraries in this closed network. With another network that would be an open type network, the TWX would reach the state-supported universities as well as the University of Miami. If none of
these turn up the desired material, it would then be possible to go outside the State to borrow the book or necessary information. So you see, with this kind of network, it is possible to locate hard-to-find information. Remember, the first part of the network is currently in operation; the latter part is planned for development this year. So do not be discouraged. If you are working with the aging and you need special material, please do ask your local library to provide it. The search does not end with the resources at your public library.

Many libraries use volunteers. They can be a boon to the library or they can be a great burden. All of you who work with older people and who encourage them to volunteer in all sorts of public enterprises, please remember that these library volunteers must have some skills and must have a facility for entering into the framework of the library. There is a need for good people in the disadvantaged area who have the respect of their fellow citizens, who can learn about the library and who bring other people to use its facilities. There is a need for good volunteers in almost every area of library work but those volunteers must have some skills, must be able to work well with the full-time employed professional and non-professional workers. The library volunteers must be dependable. If the volunteers take so much of the supervisors time that they actually don't accomplish anything, perhaps they should enter another field of endeavor. In the Santa Fe Regional Library at Gainesville, a small group of volunteers have met and mended books for years on every Wednesday morning. They have a great time at it, they know where to go, where to find the material, they have a sort of captain of their team who knows if someone will be missing, and they actually do a great job. They can mend torn pages, loose covers, all sorts of things. They don't need any supervision and they perform a real service to the library. In some of the New York City libraries, volunteers have worked well, especially in the ghetto areas, providing street-side library services. There have been examples of storytelling, of work with parent groups, and advertising the services of the library.

At Gainesville the volunteers re-registered all the library borrowers. A retired economics professor had charge of it and, with the help of other volunteers from the Friends of the Library organization, they did a big job. They were absolutely dependable and correct without much supervision. However, I suggest you discourage volunteers who think they can catalog the books. They may file cards if they take the trouble to learn the rules. Usually that must be done early in the morning when the public does not use those card catalog trays as much and this is not the time volunteers usually wish to work. So there is another conflict. Anyway, volunteers are great but only if they are a real help. Volunteers can be a great headache too.
Library service to the aging is normally what library service would be to anybody else. Here in Florida, in 1957-58, a committee studied the needs for service for older people. And they came up with this, almost universally: Aging persons are simply people with needs of all sorts. The normal person may have time on his hands but his interests are as varied and his needs run the gamut from the simplest of recreational reading to the most intricate of engineering, hobbies, and other books. Therefore, the librarians felt that the older people should be treated just as any other people as long as they have their faculties of hearing, seeing, etc. Nevertheless, all users of libraries need more directional signs, need library displays, booklists, new articles, TV programs, and other means of finding out what is of interest, available, and waiting for them. It is the ailing, the handicapped, and those who are homebound that need special help. For them there are many books in large print; a whole new world has opened up in the last few years and these large print books are tremendous. There are talking books, phonograph records, and even film programs available. What is more, they are available throughout the state.

The Library Services Act provided funds for services to the handicapped persons as well as to the blind. The public librarians can provide application forms and help their citizens make contact with the Library for the Blind. The machines as well as the materials are provided. Many libraries have both musical and spoken phonograph records on a variety of subjects. Furthermore, many of the libraries have films available and lend the films. Some lend the projector and screen. However, there are so many 16mm sound projectors available that this is no problem. In addition to the films which are available in many of the libraries, the library staff is able to locate other free and rental films on many subjects. So discuss your film needs with the local librarian. The library should provide assistance in locating the films you need for special programs as well as those you need for a neighborhood showing.

The Tampa Public Library has been providing a bookmobile service to nursing homes, retirement hotels, and other places where older citizens are to be found in some numbers. I know that the Volusia County Library has provided films on a regular basis to their large retirement hotel.

Miami Public Library works closely with retirement groups in providing book talks and programs on a continuing basis. The community relations department handles this program. Other libraries can probably work out similar programs if those who work with the aging citizens desire such a program. A long time shut-in delivery service has been carried out by a group of women in Sarasota. At any rate, this is an idea that could be used elsewhere and with dependable volunteers.
At a recent workshop concerning bookmobile service, I was very much interested in the comment made by a librarian from Miami Beach. Although there were frequent community bookmobile stops or even a branch library in the very community in which these older people live, they are completely unaware of it. So the librarian asked a number of the good library patrons to distribute posters to the apartment hotels in the area. These bright posters gave the location of the two branch libraries nearby and the time and location of the bookmobile stops. Many very sedentary people who have had endless time on their hands were simply delighted. Although they had never known that the bookmobile stopped almost on their doorstep. So you see a little advertising may go a long way toward bringing in these people.

A series of programs were given in the Miami Public Library System on consumer buying. These were keyed to the needs of different communities. This program was worked out with the cooperation of the Home Demonstration Agent and of other community organizations in the area. When the programs were held in Coconut Grove, they were keyed toward the type of community. When they were held in Allapatta or Lemon City, again they were changed to meet the needs of the disadvantaged, the undereducated, or whomever attended the program. Council evenings, with the assistance of representatives from other countries around the world, have been most popular in Miami and tickets for these sessions have been in great demand. Although there are no charges, because of the crowds, each person attending must get a ticket ahead of time.

In Jacksonville, there have been noonday and other film showings and these are exceptionally well attended. In many libraries, there have been programs on investments, various arts and culturally oriented programs, and the aging not only are welcome but comprise a great portion of the attendance.

In Winter Park, the Friends of the Library provide the various adult education programs, including public affairs talks, book reviews, and different discussion type programs. Almost all the people providing the leadership for these are retirees, many of whom are highly skilled and exceptionally well educated. Here in Florida there are many of these fine people highly capable of providing with very little supervision the kind of excellent programs that all our citizens, not just the aging, need.

Many public libraries also have, at their reference desk, a list of the organizations in the community, when they meet, and sometimes even the programs they will be giving. This is especially valuable for discussion groups, film series, lecture programs, etc. The oldest library sponsored club, the Live-Long-and-Like-It Club of Cleveland, provides a continuing
informal adult education program for people over 60. Dr. Fern Long worked with it for years and it filled a real need for that community.

One reason other states paid little attention to Florida and its service to the affluent aging is that our aging permeate all activities and are so well oriented to the overall program that they are not noticed as the aging—a separate group. The real problem has been the hidden, disadvantaged, low income, ailing and lonely aging in cities and in rural areas. These have had almost nothing done for them. The library staff and library boards, in many instances, have simply dismissed them as the library's public. They can't be dismissed. We have a very present need to wake up and serve them. To let them know that we want to help them—in their way—and that the world of ideas still exists for them.

Make no mistake, the library's program and service should be dynamic, flexible, and appropriate to the changing needs of the community. The library's program for the aging should fit the total needs of those people and of the community. The librarian must know the general problems of the aging. He must understand the lack of mobility among older persons since many of them do not drive a car and he must plan his program to reach them as well as to meet their needs. The librarian must understand the motivation of the older people as well as the younger people and you can help with this very need.

When you are thinking of organizing a new program, when you are getting together to evaluate, to plan, to appraise the programs that you have which are designed to meet the changing needs and interest of this particular group, do you think of the librarian? Do you include him in? Do you call this person when you need something? And then do you call when you have something to contribute in the way of meetings, programs, etc. You see this is a two-way affair and the library can be better if the staff works along with you toward meeting the needs of the community. And so, the librarian must be alert toward meeting the needs and must explore every possible way in which more service can be rendered and more people can receive the services we have to offer. But you can help.

Of course, there are other informational resources in addition to the library and we should never forget them. In Northwest Regional Library, the Mental Health Association and the library work so closely together that all of the mental health materials are placed in the library for use of all citizens. They mutually advertise one another's holdings to the great advantage of the total community. Whether your organization places material in the library or not, please do let the librarian know about your material. And please, librarians, let your citizens know about
the materials other agencies have. There are many, good materials in the Health Department, the Home Demonstration Agent distributes material, your Social Security and Medicare have pamphlets that are a must for all older citizens, as does the Labor Department, the Department of Health, Education and Welfare, government and non-government agencies. The library can help distribute, can let people know about them, but the library is exceedingly busy with limited staff so please, in your organization, look to the Commission on Aging, look to the Harvest Years, look to Maturity, in all these different places; get your material together and use it. Booklists, news articles, TV materials, all are needed. Unless people use these materials they aren't worth much. So let's do disseminate information!
SOME ISSUES CONCERNING
EDUCATION FOR THE AGING

1. To what extent should we encourage older persons to attend classes and other educational activities? They have spent a large part of their lifetimes subject to the confining routines of work and community activities. Perhaps now they should be allowed to just relax and enjoy life. They may be like the old lady attending a conference on aging who said she didn't want to be taught games or square dancing. She just wanted a small place of her own where she could cook a light meal and brew a cup of tea and then be left alone.

2. Should older persons be charged a fee for attending educational activities? Many of those who seem to need it most can ill afford to pay. However, many retired persons are adequately provided for and a modest fee would present no hardship to them. Is there any reliable evidence that paying a small fee makes participants value a program more or makes them more persistent in attendance? What principle or principles should guide administrators when they decide on fee charges?

3. To what extent should older persons themselves be used as teaching and administrative resources in educational programs for the aging? It is often pointed out that the educated and skilled among the retired persons represent a vast reservoir of talent which is in danger of being wasted. On the other hand experience indicates that there is a certain degree of unreliability in volunteer help since they do not have the same sense of responsibility that paid professionals do.

4. Should older people be segregated in special groups for educational purposes? Some program planners say that older persons prefer to be by themselves. Others say this is because only so can they escape the biases and stereotypes associated with age. To what extent do older people fear the noise, bustle, and competition when placed in classes with younger students? Are there some activities where it would be better for those of all ages if the groups were mixed?

5. What is the role of counseling in the planning of educational programs for older persons? Do older persons know what they want and need or should we help them expand their mental horizons and so move toward greater self-realization? Is there a relationship between educational and general counseling? What skills and knowledge should a person have who does educational counseling of older people?
6. What should be included in the term "education" when we are planning for older persons? Are oldsters interested at all in formal classes or just in discussion type of activities? Is past 65 too late to learn a language? Arts and crafts belong, but what about bridge and square dancing? Is this getting into the area of recreation or doesn't it make any difference? What are the boundaries?

7. How can older people be categorized in ways that would be helpful to program planners? Thinking of them in the mass is not productive, since they vary so widely in age, interests, education and health. If certain typologies of older persons could be established, each of these could be looked at in terms of needs, capacities, and interests. This device should simplify the job and improve the effectiveness of the program planners, and hence bring more satisfaction to the participant.

8. How can educational programs be arranged so as to have older persons become engaged or keep engaged in the social and political life of their communities? Tendencies toward withdrawal and disengagement can lead to loneliness in the individual and extreme conservatism in the group. What can education do to help older people make their maximum contribution to society as a group, and perhaps in so doing, stave off their own mental and physical deterioration?

9. What can education do to help the older person close out his last years with a sense of fulfillment and completion? Most people in their younger and middle years have certain climactic experiences which give verve and a sense of accomplishment to life. They are married and have children, they are promoted on the job, they take trips, their children are born, go to college, get married, and bring them grandchildren. After these exciting experiences what can education do to provide, on a reduced scale perhaps, some substitute satisfactions which will give the older person a continuing sense of worth, and even pleasure, clear to the end of his existence?
OUTLINE OF REMARKS ON EVALUATION

I. Introduction

We are constantly evaluating—we evaluate every experience either subconsciously or explicitly.

If we are evaluating a program for the purpose of improving it, we need to be more exact in our appraisal than saying simply, "I like it."

Evaluation always assumes goals or objectives. When one is operating an informal program, this is not so easy as in a formal one, but it has to be done—and done in terms of measurable outcomes.

II. What are some reasonable kinds of goals for a program geared to older people?

I will give some examples and expect you to think of others.

A. Numbers. How many people do you hope to enroll? Just saying, "as many as possible" is not enough; you need to state a number or a percentage of your parish or area.

B. Instructors. Don't say, "we want to get the best instructors possible;" say, e.g., we want instructors who (1) understand and can work with older people and (2) who have proven ability to communicate their skills to other people.

C. Facilities. Some reasonable criteria for facilities might be, "we plan to hold our activities at times and places that are (1) convenient to our clients, (2) where the seating, lighting, acoustics and temperature are conducive to the comfort of older persons, and (3) that is equipped with ramps, grab bars, and other safety features.

D. Breadth of Program. "We want to have our program cover cultural, remedial, hobby, and civic activities and interests" would be fairly specific statement of goals concerning breadth.

Other goals could cover finance (tuition), publicity, and other matters.
III. Who should do the Evaluating?

A generally accepted principle is that the various kinds of persons involved in the program should have some share in evaluating it. This means students, teachers, and administrators. Some program directors use an outside panel of evaluators. This gives a high degree of objectivity but runs the danger of the evaluation being based on incomplete information. For this reason an evaluation by outsiders should never be used alone. It should always be used along with other data and information gathered by those within the institution.

IV. What means should be used to evaluate?

The means used will depend on whether you are evaluating the whole program, some part of the whole program, or simply an aspect of the program, e.g., physical facilities.

A. Total program

1. Counting noses and persistence of attendance.

2. Use of "listening posts."

3. Oral appraisal by a panel of participants.

4. Use of a written detailed form in which various aspects of the program can be scored on a point scale. Each section should have a space for comments.

5. Similar detailed form to be mailed later for follow-up.

B. For single meetings use "end of meeting" slip expressing degrees of approval or satisfaction with the meeting as a whole or with selected aspects of it.

C. Administrative arrangements of times, places, charges, transportation, etc., can be measured on a scale for each item with open spaces for suggestions.
Note that any and all of the above can be used by any type of personnel concerned with the program. However, there may be certain situations where special forms would be needed, e.g., where teachers were to evaluate themselves.

V. What use should be made of evaluation reports?

A. Too often the data are collected and read and then put on a shelf while the administrator proceeds to do "swivel chair" planning for the next session.

B. The only justifiable reason for evaluation is to use it, along with other data, for improving the program in the future.

IV. References

Evaluation Form No. 1

I. Please comment briefly on the first two days of the Institute. Have you any general reactions, comments, or suggestions.

II. Speaker evaluation scale - Tuesday afternoon speaker

1 - Poor, 2 - Average, 3 - Above average 4 - Outstanding

1 - To what extent did the presentation apply to your needs and interests?

______ 2 3 4

2 - How well did the speaker cover the topic?

______ 2 3 4

3 - General effectiveness of the speaker.

______ 2 3 4

Other comments on this presentation:

III. Speaker evaluation scale - Wednesday morning speaker

1 - Poor, 2 - Average, 3 - Above average, 4 - Outstanding

1 - To what extent did the presentation apply to your needs and interests?

______ 2 3 4

2 - How well did the speaker cover the topic?

______ 2 3 4

3 - General effectiveness of the speaker.

______ 2 3 4

Other comments on this presentation:
I. On the basis of the first week of the Institute, what major ideas have you acquired? State each briefly.

II. We have dealt with the following areas:

Place a number 1, 2, 3 etc., in front of the items indicating their value to you (1 ranks highest):

1. ____Overview on Aging, Dr. Rich
2. ____Physiological Factors in Aging, Dr. Thigpen
3. ____Sociological Aspects of Aging, Dr. Sielski
4. ____The Role of Recreation in the Education of the Aging, Dr. Tait
5. ____The Role of the Arts in the Education of the Aging, Dr. Kuhn
6. ____The Role of Religious Organization in Education of the Aging, Dr. Springfield
7. ____The Role of Other Agencies in the Education of the Aging, (Panel)
8. ____Planning Educational Programs for Disadvantaged Older Persons, Dr. Smith
III. To what extent have the small group sessions been of value to you? (Check one)

___ Of great value
___ Somewhat valuable
___ Of little value
___ Of no value

IV. Do you have any comments, suggestions or observations?
Evaluation Form No. 3

End of Institute Evaluation

I. New Ideas and Concepts

A. What new ideas did you get about what it means to grow old?

B. What new ideas did you get about the need for counseling older adults?

C. What new ideas did you get about the characteristics of older adults -- ranges of ages, interests, background, etc.; their economic conditions, etc.?

D. What new ideas did you get about planning programs for older adults?
II. **Changed Behavior**

What will you do differently in the future in dealing with older people because of your attendance at this Institute?

III. **Rating the elements of the Institute**

Rate the following elements of the Institute 1, 2, 3, etc., the highest rank being 1:

____ The lectures
____ The discussion following the lectures
____ The opportunity to associate with persons from a variety of agencies
____ The small group sessions
____ The books, mimeographed articles, and other materials
____ The film showings
____ Other (What?)

IV. **Can you make any suggestions about future similar institutes?**
Evaluation Review

During the Institute on Education for Older Persons there were three separate formal evaluations by the Participants. Mimeographed forms were distributed and collected at general sessions resulting in a 100% return by the respondents. In general the response to each section was complete. Each instrument included both scales and open-end type questions. A wide range of background experience was represented among the participants. Three evaluation forms were used with other methods to assess the strengths and weaknesses of the Institute.

The first phase of the evaluation was done on the third day of the Institute. In Section I of Evaluation Form One, which asked for general comments and reactions, a majority of the comments were positive. Varying degrees of satisfaction were expressed in regard to:

Speakers - "Good choice of speakers," "speakers have been good in their overall views."

The group - "Impressed with the quality of the group," "Exchange of ideas most helpful."

Program - "Good scheduling," "Institute outline looks practical."

In Sections II and III participants rated speakers and had space for general comments on each presentation. A majority rated speakers as average or above average on the three factors of coverage, presentation, and effectiveness.

Evaluation Form Number Two was completed at the close of the Friday afternoon general session. The form contained both rating scales and requests for suggestions and comments. Section I was related to information acquired or attitudinal changes by participants. Variety was the major characteristic of the responses; and the varied characteristics, needs, and approaches to work with the aging was the basic theme of many of the comments. For example: "The aging cannot be lumped into one group but must be considered as individuals, having individual problems and personalities...yet having common factors and needs." Ideas mentioned were more often general psychological or philosophical than specific concrete data. "Education for the aging is not simply a matter of use of leisure time but is a complex subject involving physiological, psychological, sociological knowledge, in fact, all the disciplines."
Contrasting ideas were also presented: "Older persons can be encouraged to participate in more activities." "Expecting all Senior Citizens to participate is futile." Also appearing in a significant number of responses were the themes "accent on flexibility," and "an individual is important."

In Section II of Form Two items were to be ranked by the participants. Tabulating this section was complicated since members used more than one scale. In both rank order scale—that is comparing the elements to each other as to relative value; and the rating scale—in which each was considered separately, the topics of most value were the client centered rather than the institution oriented subjects. In the rating scale, which considered areas separately, it was seen that all topics were rated of value to participants.

In Section III of Form Two a majority of participants rated the small group sessions as valuable with only 15% rating these sessions as of little or no value.

Section IV which asked for general remarks, was left blank by about 1/4 of the participants. Almost all the comments received were of a non-critical nature. About 1/2 commented on the value of the exchange of ideas with others who attended the Institute. "Have learned much in talking to individuals."
"Association with other members of the Institute has been very helpful." Other subjects mentioned were:

Speakers - "speakers usually to the point"

Technical points - "mechanical details very well handled"

Level of interest - "Suggest group meetings such as this be continued."
"This type of meeting should be held every year."

Both general basic information and specific procedural details were referred to by participants.

Evaluation Form Three was completed the concluding day of the Institute. Section I called for more specific ideas or information which had been acquired by participants during the two weeks. The return of forms was 100% but the response on each part was not complete.

Part A asked for new ideas about what it means to grow old. Although physical aspects and societal influences were mentioned in 20% of the responses, psychological factors were considered
more significant by a majority of the participants. Both importance of individuality and the value of planning were also mentioned in about 1/2 of the responses.

In Part B, on counseling older adults, most answers stressed the importance of the individual and the value of his involvement in the world around him. Also, a majority of the respondents mentioned the necessity for self-determination. Other responses related to specific information or counseling methods.

Part C, the characteristics of older adults drew definite responses from approximately 75% of the participants. Almost 20% mentioned economic concerns, and there was some mention of physical factors but again the dominating theme was of the variation in the rate of aging and the need for treating this on an individual basis. The relationship of the characteristics in an aging person to his earlier life pattern was evident in a majority of responses. In regard to ideas about planning programs, Part D of Form Three, one of the two basic ideas mentioned most often was the necessity for good detailed planning on a community wide basis. Equally significant in responses was the need to involve the older person himself in the planning process. A significant number of participants were newly aware of the value of the library in programming.

Section II of Form Three, which asked what participants expected to do differently in the future in dealing with older people, brought a number of different expected behavior changes in the areas of:

Planning and organization - "Do more research," "Broader scope programming," "Bring in outside agents."

Differences in Methods and Procedures - "More counseling," "Let them decide what they want," "Introduce group work," "Seek out those who are lonely."

Attitudinal and Personal Differences - "Be more patient and understanding," "Not think older people are all alike," "Listen," "Be more flexible."

Specific technical items mentioned were: "More use of library," "Reduce the physical difficulties for older persons." Congruent with the theme which appeared from the first in these evaluations and in comments made during the Institute, the value of the interaction with other participants was evident.

Section III of Form Three was an objective scale rating of elements of the Institute. As in the previous scale the tabulation was more difficult because almost 1/2 of the returns were rated on a different scale than was intended to be used. However, in
both groups the association with persons from a variety of agencies was rated as highest in value to participants and closely following was the lecture element. "Discussion" and "books and materials" were also rated as high. And even though in the second evaluation more than 90% of the responses rated the small group sessions as valuable, in this section they were rated lower than these previously mentioned elements.

The final Section, IV, an open-end type question, drew response from about 75% of the participants. In about 1/3 was the recommendation of a preferred time span of one week for an Institute. Several reasons were mentioned but most pertained to the difficulty of taking time away from home and/or business. However, the majority of the final comments reflected the general satisfaction of the participants and some possible specific changes or additions such as: "Suggest visit to a Senior Citizen's Center," "Have more program of activities," "Would have enjoyed several night sessions with afternoon off."

Some of the general comments which reflect the overall mood of the answers were of general satisfaction--"I would like to know what active programs and specific changes have grown out of this Institute." "Appreciate the on-going interpretations of the director; he opened doors and said 'look in here'." "Have another Institute as good as this."
Summary Remarks

Andrew Hendrickson
Professor of Adult Education
The Florida State University

Any final remarks I make will be made against a background of perceived 'need for this kind of Institute. This perception has been imbedded in the Statement of Objectives which accompany the program outline.

The real pay-off of this Institute will not occur until you return to your respective communities and your agencies. Whatever you do there to start some form of educational services for older citizens or whatever you do to improve, enrich, or enlarge those services which you already have and which can be attributed to your presence here--that will be the proof of the value of this experience.

But even now we can perhaps apply some more immediate, if superficial, criteria as to the success of this Institute:

1. Do you feel that you as a group have been engaged in a worthwhile experience and have developed a sense of group adhesiveness, so that you would like to meet again under similar circumstances?

2. Have you been given a fresh sense of the size and proportion of the aging as a social group needing attention; and yet the need for thinking of them as individuals because of the infinite variety of their personalities and their circumstances?

3. Do you have a feeling that you have received new insights, new skills, and a broader knowledge of resources in conducting educational programs for older persons?

4. To what extent has any complacency in the way you were doing things been displaced by a disturbing sense of inadequacy and incompletion?

5. To what extent are you committed to going back to your communities and using the knowledge gained here in advancing the cause of the education of the aging?

The degree to which you can give positive answers to these questions will be a measure of how successful this Institute has been.
PROGRAM OUTLINE

for

Institute on Education for Older Persons

Strozier Library Auditorium
Florida State University
Tallahassee, Florida
June 16-27, 1969

STAFF

Director: Dr. Andrew Hendrickson
Professor of Adult Education
Florida State University

Co-Director: Dr. George F. Aker
Professor and Chairman
Department of Adult Education
Florida State University

Staff Members: Mr. Robert Palmer, Research Associate
Department of Adult Education
Florida State University

Mrs. Leila Fields, Staff Assistant
Department of Adult Education
Florida State University

Held Through the Cooperation of
Office of Continuing Education
Florida State University

and supported by

Florida Commission on Aging
Florida Board of Regents
First Day, Monday, June 16

3:30 p.m. First General Session, Dining Area
Cash Hall, 700 North Woodward Avenue

Second Day, Tuesday, June 17

9:00 a.m. General Session

Welcome to F.S.U. Campus
Dr. Garth K. Blake, Assistant Dean,
College of Education, F.S.U.

Welcome from Office of Continuing Education
Dr. Sam Hand, Director
Office of Continuing Education, F.S.U.

Introduction of Staff
Dr. Andrew Hendrickson
Professor of Adult Education, F.S.U.

Who Are We?
Dr. George F. Aker, Chairman
Department of Adult Education, F.S.U.

11:00 a.m. Keynote Address: "Overview of Education on Aging"
Dr. Thomas Rich, Director
Institute on Aging, University of South Florida

11:45 a.m. Discussion

1:30 p.m. General Session

Film Showing - "Old Age - The Wasted Years"

2:45 p.m. Buzz Sessions - "What do we want to get from this Institute?"

3:30 p.m. Tour of Campus

Third Day, Wednesday, June 18

9:00 a.m. General Session

Report from Tuesday's Buzz Groups
Organizing into sub-groups

Continued
Third Day Continued....

10:15 a.m. General Session

Address: "Physiological Factors in Aging"
Fred B. Thigpen, M.D., Tallahassee

1:30 p.m. Small Group Sessions

2:30 p.m. Group Report

3:00 p.m. Evaluation

3:30 p.m. Tour of F.S.U. Library

Fourth Day, Thursday, June 19

9:00 a.m. General Session

Address: "Sociological Aspects of Aging"
Dr. Lester Sielski, Professor of Social Welfare, F.S.U.

10:00 a.m. Discussion

11:00 a.m. General Session

Address: "The Contribution of Recreation to the Education of Older Adults"
Dr. William Tait, Professor, Department of Physical Education and Recreation, F.S.U.

1:30 p.m. General Session

Address: "The Role of the Arts in the Education of the Aging"
Dr. Marylou Kuhn, Professor of Art Education, F.S.U.

2:30 p.m. Discussion

3:00 p.m. Small Group Sessions
Fifth Day, Friday, June 20

9:00 a.m.  **General Session**  
Address:  "What Role Should Religious Organizations Play in the Education of the Aging?"  
Dr. George A. Foster, Senior Pastor  
Trinity Methodist Church, Tallahassee

11:00 a.m.  **Panel Discussion:**  "What Roles Should Other Agencies Play?" (Panel of Participants)

1:30 p.m.  **General Session**  
Address:  "Planning Educational Programs for Disadvantaged Older Adults"  
Dr. Charles U. Smith, Department of Sociology, Florida A & M University

3:00 p.m.  Evaluation of the first week's sessions

Sixth Day, Monday, June 23

9:00 a.m.  **General Session**  
Address:  "Age as an Asset to Learning"  
Dr. Theodore Landsman, Professor of Education, University of Florida

11:00 a.m.  Address:  "Role of the Commission on Aging"  
Mr. Clifton McLoud, Executive Director, Florida Commission on Aging

1:30 p.m.  **General Session**  
Address:  "What it Means to Teach Older Adults"  
Dr. Sam Hand, Director  
Office of Continuing Education, F.S.U.

3:00 p.m.  **Small Group Meetings**

Seventh Day, Tuesday, June 24

9:00 a.m.  **General Session**  
Address:  "Counseling of Older Adults"  
Mrs. Margaret Miller,  
Assistant to the State Director, Department of Public Welfare.

Continued
Seventh Day Continued...

11:00 a.m. Film Showing -
Mr. Paul Richardson, Executive Director, Halifax Senior Citizen's Center, Daytona Beach, Florida

1:30 p.m. General Session
Address: "A Comprehensive and Coordinated Community Approach in Planning Educational Programs for Older Citizens" Mr. Glen McKibbin, Executive Director, Senior Centers of Dade County, Inc.

2:45 p.m. Tour of Florida A & M Campus

Eighth Day, Wednesday, June 25

9:00 a.m. General Session
*Panel Discussion: "Discovering Financial Resources"

11:00 a.m. Small Group Sessions

1:30 p.m. General Session
"Providing Adequate Educational Facilities"

3:00 p.m. Film Showing
Dr. Louis Meeth, Jr., Director, Adult General Education, Mirror Lake Adult Center, St. Petersburg

Ninth Day, Thursday, June 26

9:00 a.m. General Session
Evaluating Programs and Replanning

10:00 a.m. Discussion

11:00 a.m. Small Group Sessions

1:30 p.m. Small Group Sessions

3:00 p.m. Film Showing - "The Hottest Spot in Town"
*Panel Members: Mr. Paul B. Richardson, Dr. Louis Meeth, Jr., and Mrs. Helen Kaechelle, Coordinator for Senior Citizens Programs for Orange County, Winter Park, Florida.
Tenth Day, Friday, June 27

9:00 a.m. General Session

Address: "Use of the Library and Other Community Resources"
Miss Verna Nistendirk, Director
Development Department, Florida State Library

11:00 a.m. Small Group Sessions

1:30 p.m. General Session

Evaluation of the Institute and Planning for future Institutes
SELECTED BIBLIOGRAPHY

Books


**Articles**


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Let me grow lovely growing old,  
So many old things do;  
Laces, ivory and gold  
Need not be new.

There is a beauty in old trees,  
Old streets a glamour hold;  
Why may not I, as well as they,  
Grow lovely growing old?  
Karle Wilson Baker