These proceedings are intended for use by educators, trainers, and others with responsibility for developing short-term educational programs in the field of aging. The articles are practical tools containing a wealth of concepts and suggestions for designing conferences, workshops, and short courses on aging. The articles were developed or assembled for three workshops conducted by the Rocky Mountain Gerontology Center (RMGC) during 1974-75 under a grant from the Administration on Aging. Material is divided into four major content areas: (1) Education for Aging; (2) Resources for Short-Term Training; (3) Resources in Gerontology; and (4) The Symposium Project Report. A major strength of the volume is that the program ideas described are practical rather than theoretical, and most have been tested by the authors and/or RMGC staff. (Author)
EDUCATION AND TRAINING IN AGING:
A PRACTICAL GUIDE FOR PROFESSIONALS

Prepared by the
ROCKY MOUNTAIN GERONTOLOGY CENTER
UNIVERSITY OF UTAH — SALT LAKE CITY

In cooperation with the:
ADMINISTRATION ON AGING
EDUCATION AND TRAINING IN AGING:
A PRACTICAL GUIDE FOR PROFESSIONALS

Proceedings and Final Report of the Region VIII
Symposia for Trainers in Aging.

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I. INTRODUCTION
INTRODUCTION

Education and Training in Aging: A Practical Guide for Professionals is a collection of papers intended for use by educators, trainers, and others with responsibility for developing short-term educational programs in the field of aging. The articles are practical tools with a wealth of concepts and suggestions for designing conferences, workshops, and short courses on aging.

There are materials which focus primarily on gerontology and others which deal more exclusively with program design. A major strength of the volume is that the program ideas described are applied rather than just theoretical, and most have been tested by the authors and/or RMGC staff. Education and Training in Aging is, therefore, a practical guide which hopefully will be of direct use to those who design and implement short-term educational programs.

The papers in this volume were developed or assembled for three workshops conducted by RMGC during 1974-75 under a grant from the Administration on Aging entitled "Regional Symposia for Faculty and Others Conducting Courses in Aging."

Under the grant, faculty and training staff in aging from Region VIII (Colorado, Montana, North Dakota, South Dakota, Utah, Wyoming) were invited to Salt Lake City for workshops designed to help them increase their knowledge of gerontology, public policy in aging, education and aging, and short-term training. The papers in this volume include major addresses given at the workshops as well as materials used in the workshop training manual. Among the training manual items are previously published articles, which the authors generously allowed to be reprinted, and reference material developed by RMGC staff and student research assistants. Presentations given at the session have been edited extensively to make them more readable in written form, which it seems is quite different from oral delivery. The Editor takes full responsibility for the modifications.

Education and Training in Aging is divided into four major content areas: Education for Aging, Resources for Short-Term Training, Resources in Gerontology, and the Symposia Project Report.

The first section comes largely from the third workshop "Education for Aging: A Life Span Approach," which took place at the University of Utah on June 21, 1975. The articles by Atwood, White, Marsh, and Hixson, and the bibliography by Walmsley explore how educational, governmental, and private institutions might prepare people of all ages for growing older and for working with older people. The McClusky article, which is from the Symposia held in December, and January, reviews the most recent knowledge on learning abilities in later life and the implications for education.

The second group of articles on "Resources for Short-Term Training in Aging" moves more specifically into program planning techniques, from Swack's extremely important paper on how short-term teaching differs from the traditional college class to Alford's pragmatic and effective ideas on evaluation. The articles by Connelly, Hansen, Gessner and Robinson offer field-tested guidelines for conceptualizing and implementing program. McKenzie's article on simulation as a training technique is included to suggest a method which is not often used but which could have great value in training about aging. Simulation has special potential for aging given the wide range of phenomena in gerontology which might best be taught using an experiential mode such as simulation. Sources for further information on tools for trainers are given in the bibliography by Walmsley.

Part III, "Resources in Gerontology," contains two addresses on public policy and aging which were presented by Senate Committee on Aging staff members Deborah Kilmer and Val Halamanidis at the December and January Symposia. Also included in Part III are bibliographic and reference resources on basic
gerontology, organizations and publications in gerontology, and national/regional demographic profiles on persons age 65 and over.

The final section is a narrative account of the Symposia project, included for those interested in the nature and outcome of the project from which *Education and Training in Aging* was derived.

The RMGC staff hope that *Education and Training in Aging* will be a valuable guide for those who have the difficult task of constructing useful and exciting short-term training programs. The authors represented in this volume have been, without exception, generous of their time and materials, and they all deserve many thanks for helping to make their knowledge available to others.

Ginger M. Walmsley
Editor
II. EDUCATION FOR AGING
EDUCATION FOR AGING: A LIFE-SPAN APPROACH*

H. Mason Atwood

When does education for aging begin? For that matter, what is “aging?” The title of this paper and, in fact the title of this workshop, make reference to “the life-span approach.” What is it? By inference, there must be other “approaches” to the subject of aging, or at least to education for aging. What are they?

These are some of the questions with which I wrestled as I began to think about what I might say today. I haven’t asked the question, “What is Education?” It seemed that we have to assume some common understanding of words. Yet, I am really not sure that such an assumption is warranted. In fact, I will get back to the word “education” a little later and suggest that, perhaps, it does require some definition.

Let’s take a look at the questions I have just raised, not necessarily in the order that they were listed. What do we mean by the word “aging?” I am assuming that we all have some interest in or concern for the field of aging. Or we are interested in or concerned about gerontology, if you please. But what is “gerontology?” Very simply, it is the study of the phenomena of aging and old age. So that brings us back to the word “aging.” Is it too elementary to define a word we use so often? Are we less sophisticated if we start at this point? I think not.

My dictionary shows that “aging” is the present participle of the verb “to age.” Incidentally, it is used mainly as an intransitive verb although it may also be a transitive verb. Not far south of my home in Indiana, there is considerable activity in aging an interesting liquid—sometimes legally. We even speak of aging someone, though it is usually a figure of speech. But most often we speak of aging rather than aging someone.

Aging, then, denotes a process. So what else is new? It surely doesn’t come as much of a surprise to learn that aging is a process. But, then, do we mean when we speak of “the aging?” (And we very often do) Well, “the aging” usually is a shortened expression meaning “the aging people,” so let’s get back to that.

According to the life-span concept—a concept in which we are particularly interested today—aging (the aging process) begins with conception and continues until death. It is fair to say, I am sure, that this is the most generally accepted concept of aging. But it is not the only one. Aging has sometimes been said to begin at that point when the rate of growth is exceeded by the rate of deterioration—somewhere in the mid-twenties for humans. If we adopt the life-span concept of aging, then every human being—in fact, every living organism—is aging.

However, there is the very common use—or rather misuse—of the word “aging” in reference to persons in the later stages of life. All over the country we now have Area Agencies on Aging whose concern is to improve the quality of life for older adults. There are many homes for the aging which do not even accept applications from persons under 65 or some such chronological age. Over and over we have references to “the aging” as those persons who are beyond some arbitrarily designated chronological age—60, 65, or whatever.

The fact is that “the aging” is used as an euphemism for “the aged.” I really have no great objection to this use of the word “aging” if, in fact, it is more acceptable to those for whom it is used. But I have a strong hunch that those of us who are older and aged know it very well and the search for nicer sounding adjectives is more a concern of the young. I would make a strong plea, though, that persons working in the field of aging—professionals, para-professionals, and volunteers—understand the difference between “aging” and “aged.”
This has been a rather lengthy attempt to define or describe the word "aging." And we haven't even mentioned the subject of education for aging. But it seems logical—at least to me—that once we define "aging" in terms of the life-span concept, we are ready to discuss a life-span approach to education for aging.

Perhaps the term "life-span approach" automatically answers the questions of when education for aging should begin and when it should end. Indeed, such education should begin just as early in life as possible and continue throughout life, well into the later years—right up to the end of life, insofar as possible.

Children can learn about aging very early, even in the pre-school years. They can begin to grasp concepts related to aging as soon as they have an understanding of the concepts of "old" and "older." It doesn't matter that to a kindergarten youngster his 10-year old sister is old; or that the high-school teenager may consider anyone over 30 to be old. This is but the simplest of concepts related to aging. My recent experiences as director of our Teacher Education Program on Aging make me very excited about this end of the life-span concept in regard to education for aging and I am tempted to dwell much longer than I should on this.

Let me add just one more thing about education for aging among young children. I spoke of the concepts of "old" and "older." There is much more in the cognitive domain which children can learn in regard to aging. But, perhaps, the affective learning at this age is even more important. Study after study has shown that attitudes are acquired at a very early age and that they become fixed and, consequently, difficult to change as early as age nine or ten. What better reason do we need for starting early with education for aging?

On the other end, what of the educational needs of a 65-year old widow, for example. With the probability of some 16 or more years of life, does she not have needs for learning about her own aging, how to cope, where to find help?

A life-span approach to education is closely related, but certainly not synonymous with, a number of other concepts, and it may be helpful to consider some of them. One which comes quickly to mind is that of life-long learning or life-long education. I am an adult educator by profession and, at Ball State University, I hold academic rank in the Center for Life-Long Education. That explains, I am sure, why I find it easy to relate to any life-span concept.

The "cradle-to-grave" concept of education is, of course, especially important to practitioners in adult and continuing education. But this is not to say that all education is education for aging. Persons of all ages have need for education in a variety of contexts. Much of the education as it has become institutionalized in our society has only a tenuous relationship to education for aging. We might well wonder whether the vocational and occupational emphases have meaning for individuals vis-a-vis aging. Nor does the current push for career education seem to provide much understanding of the aging process and its implications for learners, despite some claims to the contrary.

But that does not mean that education for aging—education specifically and purposefully related to aging—cannot be part of everyone's educational experiences. I said at the outset that I would return to the question of "What is Education." This might be a good place to do so. I am not particularly concerned about textbook definitions at this point. It is important, I think, to recognize some different forms which education takes.

First of all, we err greatly if we do not distinguish between education and schooling. I am part of the educational establishment and I don't intend to indulge in breast-beating or to snipe at formal education. Surely some of our best opportunities for education for aging are in the schools. But not all education takes place in schools and not all schooling results in education.
Much of what we learn we learn in the home. And we learn much more by example than by admonition. It would seem that, in this respect, adult education in general and parent education in particular are directly related to education for aging.

Many of us have engaged, and continue to engage, in learning activities sponsored by institutions other than the schools—voluntary agencies, the Cooperative Extension Service, churches and synagogues, business and industry, and many others. If education for aging is to be a part of those programs, then the leaders and program planners must become aware of it.

Education may take other forms, not the least important of which is self-directed learning. It has been said that perhaps this is the highest form of learning, a form toward which other educational ventures should aim. But one hardly ever engages in self-directed learning without having been a part of some organized learning activities. Whether or not education for aging becomes a part of self-directed learning depends largely upon any awareness that the self-directed learner has acquired along the way.

The relationship between lifelong education and education for aging is well put by Howard McClusky in the final chapter in Learning for Aging, edited by Grabowski and Mason. I quote briefly from that chapter, "Education for Aging: The Scope of the Field and Perspectives for the Future." I recommend the whole chapter for your reading.

One rationale for supporting such a global approach is the fact that everyone is aging and everyone has a stake in its opportunities and consequences. What this stake is varies of course with one's age and his life condition. If a person is 10 years old, his stake is one thing, if he is 40 it is another thing, and if he is 70 it is something else again. Aging then is an inclusive process. Whatever it means, it has meaning for persons of all ages and whatever it does it does to all.

This life span view counters the idea that aging is primarily a process of decline. It also counters the notion that aging occurs at a characteristic age, i.e., when decline begins. It is likewise at variance with the proposition that aging has nothing to do with development, i.e., with becoming something better. And finally it nullifies the idea that aging is something that happens only to the 'aged' and not to those moving through the earlier stages of the aging process.

There is a second basis for our support of a comprehensive approach to aging. This is our confidence in the role of education. While learning is usually defined as experiential change in behavior, we believe that this learning will lead to something better in the life of a learner. At the same time we believe that all persons are capable of learning; that not only the young, but also persons in the middle and later years are capable of an educative response to instructional stimulation.

Thus in any attempt to devise strategies and formulate perspectives for the future, it is essential to keep the foregoing generic character of the domain of education for aging in mind. For in an ultimate sense, any fundamental treatment of the field must include persons of all ages whatever their level of educational competence. As a consequence then we can divide the field of education for aging into two categories. One is education for and of persons in the later years. The other is education for and of persons in the early and middle years—in both cases about the course, processes, opportunities and goals of aging.

McClusky was a co-chairman of the Section on Education for the 1971 White House Conference on Aging. In his statement to delegates assigned to the Education Section he dealt very little with any kinds of education for aging except education for older adults. In fairness to him, that was the focus determined for the Section on Education of the White House Conference on Aging. McClusky's chapter, to which we now have reference, presents a much broader view.
You will note in your copy of the proceedings of the White House Conference on Aging Section on Education that McClusky included in his summary an acknowledgement that "it (education for aging) should aid in the progressive attainment by individuals of life-long fulfillment and, in so doing, constitute a principal part of the education of persons of all ages."

While we are on the subject of the 1971 White House Conference on Aging, it might be interesting to note two more items. The first is the list of issues which were to be the bases for discussion in the Section on Education at the local and state conferences preparatory to the White House Conference, as well as in the White House Conference itself. Not one dealt with any aspect of education for aging except education for older adults. It is a tribute to the conferees that they actually revolted, in a manner of speaking, and produced the other recommendations among the 23 that are listed on your green sheets.

The other noteworthy item is the number of recommendations on education that came from other sections. Five that came from the Special Concerns Session on Youth and Aging, whose members were the youth delegates to the conference, are especially interesting:

1. The society should adopt a policy of education for life such as preparation for job, family, retirement, and use of leisure time. This education should begin with young children as developing a philosophy of life and should be developed by consultation with government, business, labor, and educational institutions.

2. Federal, state, and community agencies shall earmark funds and appoint committees within the year following the White House Conference on Aging for the preparation and utilization of curricular and educational materials for all school levels that deal with the biological, medical, psychological, social, and environmental aspects of the continuation of life from conception through death. Further, this shall be implemented with In-service training for teachers at all levels, as well as continuing education for persons all through life.

3. Wherever possible, educational systems at all levels should utilize qualified older persons as paraprofessionals. Formal credential requirements should be relaxed without the relaxation of remuneration for these services. Funds should be provided by an appropriate Federal agency for these services.

4. We think that without neglecting the incorporation of preparation for living in the school system, it is urgent that every available avenue for informal education be explored. Priority (in the appropriation of funds), shall be given to the promotion of interaction between youth and aged outside the formal school system, in voluntary organizations, and other common activities as a conscious reflection of the need to change current cultural attitudes and stereotypes of all stages of life.

5. It is finally urged that the President of the United States include as part of a national policy on aging an emphasis on achieving life cycle education as a mandatory component of all educational institutions.

There are some other concepts that are closely related to life-span education for aging. Time will permit only a brief mention of them.

The concept of life-cycle has been the subject of a number of studies and writings. It would seem to have meaning for life-span education for aging if one has confidence in the stages presumed to make up the life cycle. We are not likely to make use of the common analogy between the seasons of the year and the stages of life: spring, the time of growth and coming
into bloom; summer, the time of maturity and greatest productivity; autumn, the time of harvest and culmination; and winter, the time of decline and death. And the poetic, but satirical view of human development in Shakespeare’s seven stages lacks precision, though it does bear a resemblance to more scientifically derived models.

A quick look at three theoretical models, though they are just that—theory—may suggest some direction for life-span education for aging.

Buhler’s theory of the course of human life identifies five biological phases: (1) progressive growth-up to age 15; (2) continued growth combined with ability to reproduce sexually—age 15-25; (3) stability of growth—age 25-45; (4) loss of sexual reproductive ability—age 45-65; and (5) regressive growth and biological decline—age 65 on. She proposed five phases of life corresponding to the five biological phases: age 0-15, the child at home, prior to self-determination of goals; 15-25, preparatory expansion and experimental self-determination of goals; 25-45, culmination—definite and specific self-determination of goals; 45-65, self-assessment of the results of striving for these goals; and 65-up, experience of fulfillment or failure, with the remaining years spent in either continuance of previous activities or a return to the need-satisfying orientations of childhood.

Jung’s concept of the stages of life include only post-adolescent periods. Interested primarily in problems of the psyche, Jung argued that while the child may be a problem to parents, teachers, and others, the normal child does not have problems of his own. Thus his first stage, youth, extends from after puberty to the middle years (35-45). His stages from middle age on are so vague and loosely formulated that this theory seems to hold little of real help for the educator planning programs.

Erikson’s eight ages of man may be the most useful model for planning life-span education for aging. The stages represent a series of crucial turning points stretching from birth to death. Only three of Erikson’s stages describe adulthood and the last two—“Generativity versus Stagnation” and “Integrity versus Despair”—encompass all the middle and later years. Nevertheless, the theory may be worth considering.

There is also the concept of important events in the human lifeline. A list would probably include conception, birth, begin school, puberty, begin occupation, marriage, parenthood, death of parents, menopause, children leave home, grandparenthood, retirement, death of spouse, great-grandparenthood, and death. Each of these, at least after birth, has some psychological, social, or economic relation to the concern for life-span education for aging.

Perhaps more familiar to some of us is Havinghurst’s concept of developmental tasks. The list is an age-ordered sequence of social duties which are required of a person as he or she moves through life. The author outlines the tasks as: infancy and early childhood; middle childhood, and so on through early adulthood, middle age, and later maturity. The concept, formulated in the early fifties, is still useful, though the tasks may change slightly with societal changes and expectations.

Life-span education for aging, then, encompasses all those learning opportunities that are required to help people meet the needs that they have primarily because of their development and movement along the continuum of life—because of the aging process, if you please.

If education for aging is to be effective it must be available to the individual when it is needed—not years ahead of the time one can relate it to his or her needs; not so late that it can be of no help. For example, if retirement is a critical time or an important event in the life span, and if retirement planning is a useful educational activity, then such an opportunity should be available at some reasonable time before retirement, perhaps 10 years before the date. A person 20 or 25 years away from retirement is not likely to see retirement planning as being vital to his welfare. Besides, he probably
has too many other high priority concerns that must be taken care of. At the other extreme, a retirement planning experience six months before retirement is not so likely to be effective. It may be “never too late to plan” but there certainly are severe limits to what the planning can accomplish.

I mentioned earlier the increasing difficulty of changing attitudes as individuals age. Thus, education to develop positive attitudes toward aging and toward older persons should be provided as early as possible — not after attitudes have been acquired and fixed. Children can grasp the concepts of “old” and “older” at an early age. The concept of time may be difficult for primary-aged children but certainly it can be attained at a relatively young age. The finiteness of time is an important concept for the study of aging.

In conclusion, then, I would begin by strongly endorsing a life-span approach to education for aging. Why? Simply because piecemeal, intermittent, disjointed efforts just cannot do the job. Oversimplified, they are too little and often too late. In today’s parlance, the life-span approach stands a much better chance of “putting it all together.”

What has been done in this field? I’m not sure that I can answer that adequately. Many efforts have been directed to the various aspects—education for aging for children and youth; the introduction of gerontology and courses on specific areas of aging—health and aging, for instance, and courses on death and dying into college and secondary schools; in-service programs for persons providing services; retirement planning programs; and a variety of educational programs for older adults. But I cannot cite specific examples of programs directed toward a complete life-span education for aging program. So far as I know, this workshop is one of the early efforts to explore the concept—perhaps it is a pioneering effort.

A question, passed on to me to use as a concern with which I might deal, asked for suggested strategies that educators, aging services staff, and community leaders might use in promoting life-span education for aging. A very obvious starting point, it would seem to me, is that of creating an awareness of the concept first and then developing an understanding. Hopefully some of that is happening here today. If providers and administrators of services and community leaders are expected to promote the concept, they must first learn about it. Perhaps that is the challenge to educators.
Bibliography


Introduction - Gerontology and Higher Education

It is always a pleasure for me to speak at meetings such as this, since it gives me a chance to meet other people in the field and to share information. To me this information-sharing is of special importance for gerontology because it is such a new field. There really are not many institutions which have been involved in gerontology for more than five or ten years, although that number is increasing.

The field's newness is demonstrated by the fact that many of us are still at the point of "infiltrating" gerontology content into our curricula. At Ann Arbor, for example, we have finally been able to start a gerontology course in the literary college for undergraduates. One counseling class now includes a unit on counseling with older people. In the future we hope to persuade vocational education to apply the career education concept to second and third careers for the later years.

Another area of recent development is in higher education for older people. As you are probably aware, the adult is becoming the new client for higher education. In fact there are two colleges in Michigan which would be out of business if it weren't for their adult students. So it seems clear to me that gerontology is beginning to grow. I personally think it crucial that gerontology becomes an integral part of the general curriculum, either as professional training or general education or both. My perception of the field of gerontology and the forces that are making it important is that gerontology will become just as important in the curriculum as energy, ecology, or our relationships to starving peoples of the world.

Older People as Resources

I would like to take the approach that people in their later years, which I will define as 60 and over, represent a resource which needs to be activated. I would also predict that in the future, half of the trainers of people who need help will themselves be older people. Finally, I would like to take the position that advocacy on behalf of older people has got to come from older people themselves as well as from younger people. One of the basic principles of adult education is that a good part of the teaching should come from the experience of the group, and the teacher's responsibility is to arrange the situation so that happens. I think that principle applies to all our work with older people.

One other premise which I use is that we need to pay more attention to the potential of the well-functioning 80% of our older population and not concentrate so exclusively on the problems of the other less well-functioning 20%. As I see the field, we put major emphasis on the 20% with problems. It is true that great problems of health, income and the like do exist, and I do agree that a civilized society should provide at least a floor of maintenance for its citizens. And in terms of Maslow's hierarchy, you do have to start with the basics of survival in order to be free to do other things.

However, it is important to realize that for every person with those problems there are many other people who are getting along wonderfully. You have to balance the negative reality with the fact that there are people like Artur Rubenstein still playing the piano superbly at 88, or Picasso producing brilliantly at 91, or Grandma Moses doing some of her best painting after age 100. All I'm saying is that there is another side to the story.

Dr. McClusky is Chairman of Educational Gerontology and Professor of Educational Psychology at the University of Michigan in Ann Arbor. He wrote the Education Section position paper and co-chaired the Education Section for the 1971 White House Conference on Aging.

*Excerpts from an address given at the "Symposia for Trainers in Aging" held in Salt Lake City, Utah on December 14, 1974 and January 17, 1975.
Learning Abilities and Aging,

As you are probably aware, we have come a long way in our thinking about the change of abilities with age since the measurement movement started back in the 1920's. At that time, according to the Terman-Binet test, age 16 was the base line for computing Intelligence Quotient (I.Q.), using the formula of: I.Q. = Mental Age/Chronological Age. It's easy to see what a fix that got you in. If your Mental Age didn't improve after age 16, assuming you had a peak I.Q. of 100, then by the time you were 32 you would have an I.Q. of 50 and be an idiot. That's as far as we got at that time.

Thorndike's idea was that intelligence peaked at about age 22 and decreased 1% per year until age 45.

Then Dr. Freeman of the University of Chicago started conducting continuous studies on the same people for a five to ten year period and found that their I.Q. was growing. Nobody had thought that was possible. Research done since then on successive cohorts of people has further substantiated that decline in intelligence is not inevitable. The fallacy in the earlier research was that it was based upon cross-sectional rather than longitudinal studies. The declines which would be expected based on findings from cross-sectional studies are not found in longitudinal studies where repeated measures are taken on the same groups of people. In fact, one study in California on people age 30-40 reported six to ten point increases in I.Q. scores over several years.

Another study, done by the National Institute of Mental Health on people 60-85 years old, reported that if people are healthy and not traumatized by physical disability, their ability to learn and perform holds up very well. It seems that if the skill, ability, or dimension has been exercised throughout the years and if the circumstances of life are such that the person can continue to function, then the capabilities hold up quite well and in some instances improve.

In summary, then, the newer research indicates that our old picture of intelligence peaking around the mid-twenties and then declining has been thoroughly discredited. We have a completely different notion now of the ability of adults in general and older people in particular to learn. For an excellent yet brief summary of the most current thinking, I would refer you to Baltes and Schaie's article, "The Myth of the Twilight Years," in the March 1974 PSYCHOLOGY TODAY magazine.

Another aspect of learning ability which has important implications for understanding older people's learning is the transfer of training or generalization theory. Generalization refers to the phenomenon of being able to recognize commonalities among entities. If you are able to look at two or three items and discern a common element, then you can make a proposition about the commonality and generate a new element. You are able to generalize.

I would argue that if a person has a lifetime of experience behind him, he has more data in his bank from which to generalize. If a person exercises abilities, maintains a limberness of attitude, and has learned how to generalize, then the very fact that he has more data in his bank gives him an advantage in the field of generalization. Now, of course, it may be true that those in the pure sciences like mathematics may be able to reach high levels of understanding quite early due to the fact that life experience is less relevant. On the other hand, as the great classical scholar Sir Richard Livingston wrote, there are some things in life we cannot understand without a good deal of life experience. Some would argue that we cannot really learn philosophy until we have lived a while; or that we can't understand politics until we have been through a few power struggles. I think a case could be made for this view, and the implication for me is that older people have a lot of life experiences from which we all might learn and grow.
As an offshoot of this idea, I think the time will come when we will not only think of gerontology in terms of the 20% with problems, but in terms of how people might live in the earlier stages of life in order to maximize the possibility of creative use of the full life span.

Maximizing the Potential

Now let me suggest some directions that I think we might take in developing the potential of the later years. These directions would arise from two important qualities of older people, namely compassion and perspective.

Foster Grandparents programs are a good example of older people's capacity for compassion. I see it also in a program in Ann Arbor, where an elementary school teacher has invited retired men and women to help her teach art. The youngsters literally swarm around these people with excitement. There is one lady who makes quilts and another who makes lace. They ask the children if they would like to make quilts and lace, and they love it. Another is at Ypsilanti State Hospital where older people are working with retarded children. The professionally trained staff say, "These folks come in and do things for these children that we can never do." Such is the power of compassion.

Older persons also have a sense of perspective. You may not agree with this, but I propose that a person who has known a field pretty thoroughly for the last 40 or 50 years is in a better general position to predict what will happen in the future than a person who knows it only currently. There is great value in having "lived through" something, and I think older people have a great contribution to make in helping us understand history, philosophy, and related subjects where time perspective plays a part.

For example, I know of a brilliant historian who in his retirement teaches history to high school students. He goes to their classrooms or they come to his home, and what a privilege that is for those students to learn from someone so outstanding in his field. Also, there is a course on twentieth century history at Fairhaven College in Bellingham, Washington where half the students are college-age and the others are over 60. The people over 60 had lived through this history. They did not have to read about the Depression in the books — they were there. It is a fascinating course, with the younger people sharing their opinions and older people sharing their experiences.

It seems to me that certain theories of personality development help put the capacities I've mentioned into perspective. I think the best theory we have in personality development is Maslow's, although Jung has done some interesting work, and Erikson is about the only one to conceptualize the full life span. Freud didn't do so well. As you know, Freud thought we were pretty well established by age eight, so that after a fairly young age there was only to "Arbeiten" and "Lieben" (work and love).

Maslow's idea is that we don't become truly actualized until age 60 or so. Erikson at least included generativity or middle-adulthood and ego integrity or late adulthood in his life stages. For Maslow and Erikson, personality can develop in an ascending curve without any break. The implication is that we don't reach the culmination of life until the later years, and we achieve maturity because we have successfully resolved the tasks of the earlier periods. So, what little theory we have seems to support the idea that the later years constitute a period for fulfillment and continuing development.

It seems clear to me that the contribution which older people might make is enormous. One big advantage of working with older people is that they are not "bugged" with the achievement motive to the same extent as most younger people. They are freer in the sense of fewer burdens and expectations.

Their potential is great. But, as I said before, I think we must begin to explore that...
potential by interpreting gerontology not just as the care of the elderly with problems, but as the further development of well-functioning elderly and possibly the preparation of youth for the later years.

Preparation for Aging

At this point the realists may want to check my enthusiasm by reminding me of the physical declines that take place with age. To be sure, some physical decline is generally inevitable, but I’m not willing to concede that there is a one-to-one relationship between the physical and the intellectual dimensions. The amount of physical decline varies both among and within individuals anyway, and the central nervous system is about the last to go. Just because we can’t run the high hurdles or the 440 as fast as we did at age 20 doesn’t mean we can’t function intellectually at the same level or higher.

Let us now examine what I will call the Theory of Margin. This theory is based on the relationship of Load to Power. Load consists of all the demands on us—the responsibilities and the things we are expected to do. Power consists of all our resources—our personal abilities, physical and mental assets, wealth, friends, position in life, etc. In order to survive any stage of life we need to have an excess of Power over Load. We need a Surplus or Margin. Thus, maturity starts at that time of life when Power exceeds Load—probably somewhere between ages 14 and 18. Then the balance fluctuates as the years go by. If Load is fixed and intolerable, there comes a breaking point where we can’t make it. The reason some of us make it is that we reduce our Load or we increase our Power.

When we reach the later years, sixty and over, we confront a problem of reallocation of our Load and Power. We have to shed the heaviest and least important Loads, and we must accent those things that represent our greatest Power. The key point is the ratio, i.e., more Power than Load. We need some Surplus or Margin.

As I see the field of gerontology today, it is almost completely aimed at the reduction of Load, with very little emphasis on increasing Power. That is better than nothing, of course, but it doesn’t do much to increase the potential of the later years.

The relevance of this theory in terms of strategies is that we know a lot about increasing Power and decreasing Load so that many of the problems found among the less favored 20% could be prevented. For example, the research on exercise shows that not only does exercise decrease blood pressure and cholesterol levels, but that some of the declines of age can be reversed by an exercise program, even starting as late as sixty. The most effective prevention, however, is early planning and habit formation.

If we take a long view of gerontology, there is a lot which could be done as pre-retirement education. Presently, pre-retirement education is committed in a limited way to the idea that if we start at age 44-50, we can anticipate many things that we will have to face after age 60 or 65. I think we should start earlier and educate for lifelong development in which retirement is one turning point along the way.

In Conclusion

If what I have previously said is true, then it follows that older people represent an immense resource for education, training, planning, services, and the like. Now let me be more specific. I will wager that if we analyzed the power structure of any community to see who is chairman of the board, who is making decisions, who has money, etc., we will find a very sizable percent of those people are past 65 years of age. In fact, it is estimated that 75% of the wealth of the United States is controlled by people age 60 and older.

Therefore, it would seem that if we want to do anything, we would do well to look for those older people of influence to be on our advisory
boards. They are not just “clients,” but resources, representatives of power, persons who can make things happen. Another valuable resource are the older poor persons who, in spite of their nearness to poverty, are coping well. They have another part of the picture which we need to know about.

If we are striving to make programs and outreach more effective, then I think we must realize that older people have a special advantage in perspective, often of power, and in obtaining access to other older people. Some of the best programs we have in Michigan owe their success to the fact that older people were hired as staff members to link up with other older people.

Perhaps the most appropriate thing I can say in conclusion is that older people offer a potential resource as bridge-builders, and if we want to reach the other side, they may provide the best way to get there.
VIEWPOINTS ON GOALS, STRATEGIES, AND ROLES IN EDUCATION FOR AGING:  
Elementary and Secondary Education*

H. Mason Atwood

Some History

I would like to begin my remarks about education for aging at the elementary and secondary levels with an historical review of some efforts that have been made to date.

About ten years ago in Winnetka, Illinois, Dr. Janet Friend began a program with Administration on Aging funds to introduce ideas about aging into the school system. She did this primarily by using older persons in the classroom and in various other roles throughout the school. She found the project to be highly rewarding. Among the benefits she found was that by involving older adults from industry, she began to build some "educational bridges" between school and industry in the community.

A short time after Dr. Friend's project, Alberta McBride from Jacksonville, Florida, persuaded the DuValle County Board of Public Instruction to allow her to develop curriculum materials which could be used to train teachers how to build ideas about aging into coursework.

Next came the work of Dr. Lee Jacobs, now retired from the University of Iowa. Dr. Jacobs began offering graduate instruction in aging, with an emphasis on how to instruct children and youth about aging. He also authored the monograph "Youth Looks at Aging," and a chapter in the new Grabowski and Mason publication, "Learning for Aging." In the latter, he wrote that two major hurdles which impeded the education for aging program were: (1) Lack of formal training for teachers, and (2) administrative accommodation. I mention this for consideration of those of you who may be planning programs.

All those efforts plus our own teacher training program at Ball State started as early as 1961. Ball State first proposed a teacher training program on education for aging in that year. In 1971, after the proposal had been re-written a number of times, it was accepted and funded. Things just don't happen overnight, it seems.

The project was a three-year one in which we were to bring in 35 elementary and secondary teachers each of the three summers for a four-week workshop on aging. The purpose was to help the teachers learn more about aging and about ways of introducing concepts on aging into their curricula. The first couple of summers went along fine, but then the funding axe fell. We continued the program on our own but on a much smaller scale.

There have been other isolated efforts, mainly by individual teachers. I have some concern about many of these efforts, because I think they are overly oriented to doing things for older persons rather than with them. There is also an overwhelming emphasis on nursing homes—you have a convenient place to take students, and you have a captive audience. The teachers' intentions are good, and there is value in trying to teach children about concern for others, but it is a poor way for youngsters to learn about aging unless they are also exposed to other types of information and experience. After all, if children get the idea that an aged person is automatically a nursing home resident, then that's a distorted view.

One other recent effort should be mentioned. Marsha Cameron at the University of Michigan Institute of Gerontology has developed...
a unit on aging for high school curriculum, particularly for a social studies class. The unit is now being tested by a number of teachers in the Ann Arbor area.

Types of Programs and Resources

What kinds of programs might be used? One of the first things that comes to mind is this idea of a unit on aging. Units on aging may well serve the purpose in secondary level social studies for example, but the problem is that teachers are besieged with requests for units on everything.

The emphasis that we've pursued in introducing education on aging into the schools is to encourage teachers to introduce it into existing curricula. We think it can be appropriate for almost any subject and almost any grade. Much can be done with what we call "incidental teaching," which is to be distinguished from "accidental" teaching. For example, a math teacher might just as easily use problems involving consumerism by older persons as how many pieces of candy Susie has left.

Another area for program development is from sources outside the school. I'm aware of one instance where a recreation director in a senior citizen's center arranged with a particular teacher for older persons from the center to participate in some of the school's activities.

Then there is the matter of resources. There are all kinds of resources; many of them easily available and usable. Of course, one of the most valuable is the use of older persons themselves in the classroom. One teacher invited a lady in to teach knitting and tatting. The children loved it, and it turned out that the boys were just as involved as the girls. The school secretary was rather amused one day when a boy came in and called his dad to say he'd forgotten his lunch and his knitting.

Then there is the home economics teacher who had built her course around the life-cycle. At first the life-cycle ended with adulthood, but then she added older adulthood to complete the series. The same teacher got interested in death and dying, so she called the local undertaker and asked to bring her class over for a field trip. He was baffled by her request until she explained the class was studying consumerism, and she felt he has a service that almost everybody uses eventually and therefore should know something about.

Strategies and Roles

Let me move on to some thoughts on starting any kind of program. The basic danger I see in getting education for aging into the elementary and secondary curricula is that there is no guarantee that the teacher is any better informed than the students as far as aging is concerned. You run the risk of promoting myths and stereotypes if the teachers themselves are not informed. I do, however, have great respect for the creativity of teachers and sympathy for their heavy work loads. I might point out that in our experience the ideas seemed to be more creative at the elementary level, which may be due to the fact the elementary teacher has one group of students all day and is, therefore, more on the lookout for new ideas and resources.

Regarding roles for higher education in promoting education for aging at the elementary and secondary levels, it seems to me that teacher training and consultation services might come from this level. Aging services also have a role to play, for example in identifying needs and providing resources.
The Problem of Role Definition

In thinking about the roles that institutions of higher education might take in educating for aging, my first thought is that they are very diverse and ill-defined. This is not just true of aging in higher education; it is true of higher education in general. For example, take some of the questions that are frequently raised about the role of higher education: Is its primary role to prepare people for careers? To generate new knowledge through research? To help people adjust to society? Can it be argued that since we spend more time outside our vocations than in, we should therefore spend more educational effort helping people to adjust? Is it the role of higher education to develop and operate direct service programs for communities?

We could list questions indefinitely, which I will not do, but I think it important to realize that there are many definitions of what higher education should be doing. There have been some studies done where researchers asked board members, administrators, and teachers from the same institution how they perceived their institution's role. Interestingly enough, all three groups perceived the roles differently from one another, even though they were in the same organization. So, when we talk about defining a role for aging in higher education, it is extremely difficult since higher education is not clear on its own basic roles.

Let me just share with you, however, some of the possible roles and functions that higher education might perform with respect to educating for aging. Here I am talking about universities and four-year colleges as well as community or two-year colleges. And I'd like to talk in terms of two categories: functions that relate directly to older people and functions that have indirect relationships.

Direct Roles in Education for Aging

I would suggest that direct service functions to older people should include such programs as:

1. Enrollment of older people as students in the regular academic program.
2. Special courses on campus for older people—courses on wills, estate planning and this type of thing.
3. Education for older people via workshops and symposia, either on or off the campus.
4. Service to organizations comprised mainly of older people through consultation, evaluation, or research.
5. Advocacy for older people. What I have in mind there is that very often faculty people could be advocates in the interest of older people with the state legislature, testifying at state or federal hearings.
6. Provision of opportunities for reciprocal action, by which I mean that there is a greater need to involve older people in many facets of higher education.

Indirect Functions in Education for Aging

In terms of indirect service to older people, we certainly have responsibility for career training in the field of gerontology, and this can happen on several levels:

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*Address given at the "Education for Aging Workshop" held in Salt Lake City, Utah on June 21, 1975.
1. At the masters or "middle management" level, to train people who will be going into supervisory or managerial positions.

2. At the associate and bachelors or "entry-level".

3. At the continuing education level for people who may continue their education or go into research related to the field of aging.

A second indirect service is to provide sensitivity training through our courses by simply introducing more material on aging into established classes.

A third indirect service is to conduct research and disseminate the findings. Hopefully there will be some knowledge there which will benefit the older people that the research was initially designed to understand. A good example of this can be found in the area of hearing where research has had a tremendous effect on older people.

A final function might be in the area of program development and operation. As we talk about developing programs, I think there are two questions we need to ask. First, are we developing a program in the sense of a model which will be spun off to a community agency if it works? Or are we talking about operating a direct community service? I think the latter question may be more pertinent to community colleges, but there has been a running argument across the country on whether educational institutions should be giving direct service in competition with established agencies in the community. I know, for example, that some community colleges are operating information and referral programs, meals-on-wheels programs, and forty or fifty other types of services. Many of the same functions are being carried on by community agencies, which raises an issue that we need to work on.

Organizational Structure and Education for Aging

Looking at higher education from the point of view of organizational structure, I think there are different models that might be followed. In my opinion, the ideal model has not been developed; nor ever will be. In other words, there are different approaches that could be used and the consortium approach followed by the Rocky Mountain Gerontology Center is but one possibility for a viable structure.

I know that in Washington, D.C. recently some Federal people raised the question of whether consortiums only should be funded. And I think the answer that most of us gave was "No." A consortium is not necessarily the only way to go.

Another question is whether to go with the uni-discipline or the multi-discipline approach. In other words, do we stay with established departments such as psychology, sociology, and recreation, or do we actually develop an interdisciplinary program that cross-cuts traditional structures. The case can be argued both ways, and I think there are advantages and disadvantages to both, of which you are probably already aware.

Another way to conceptualize education for aging is to look at the levels of involvement with aging in an institution. One level, and this is not necessarily first in priority, is to actually introduce aging content into existing courses. Another level is to actually introduce new courses in gerontology, such as sociology of aging, psychology of aging, education and aging. So you are going a step further. A third level is to actually develop fields of concentration, within departments. For example, on the University of Utah campus the School of Social Work has developed a special concentration in aging. Students are required to take five or six different courses to qualify. The next level would be to establish inter-disciplinary and
inter-university programs, of which our consortium is an example.

There are a number of factors that one has to look at in determining a course of action. The national and local political climates are always important considerations. How do the people read what is going on? What are they willing to support?

Another factor is the immediate and future availability of funds. Certainly, the introduction of material on aging into already-existing courses is relatively inexpensive because the faculty is already on board. The introduction of new courses becomes more expensive because the resources must either be diverted or developed. Then, if you start talking about a full-scale gerontology center, it becomes even more expensive because you are talking about yet another institutional layer.

There is another factor which I think is important, and that is the institution's stated role. How does the institution perceive its own role in aging? Does it perceive itself as a center or just as an organization willing to develop some courses and materials in gerontology? How does the board of regents or the board of higher education view your request? How do they see gerontology fitting in with the institution's role? These questions become very important.

Let me just take one second and diverge here. I know that at one time in Utah we considered establishing a gerontology center in Northern Utah at Utah State University, because at that time they had the greatest interest. However, when we met unofficially with a representative from the Board of Regents, he said that Utah State probably would not be funded because the University of Utah was more centrally located and had more colleges associated with it that might become involved in aging. Well, obviously we changed our plans.

Questions for Planning

In conclusion, let me mention just a few questions that you might want to think about with respect to higher education and aging:

1. In developing programs, do you get administrative support before you initiate a program, or do you sneak it in the back door and then try to get support?

2. How do you go about establishing goals in an institution?

3. How does your institution relate to other institutions and departments? I raise this question because I reviewed grant applications this year, and one thing that surprised me was that there were many institutions in the same state applying for grants to develop training programs in aging. They thought they were the only institution doing anything, yet we knew that there was a neighboring institution also doing things and also applying for a grant.

4. How do you finance programs? Do you go all out and start big like we tried to do at our Center, or do you start small and build? And how do you develop long-range planning in a shaky funding situation?

There are a lot of questions like these that we can discuss later on this afternoon, and I hope to see you then. Thank you very much!
VIEWPOINTS ON GOALS, STRATEGIES, AND ROLES IN EDUCATION FOR AGING:

Retirement Planning

Gary B. Marsh

What is Retirement Planning

In these few minutes, I would like to explore some concepts about retirement planning and what the role of an institution like the Rocky Mountain Gerontology Center might be with respect to organizing and conducting retirement sessions.

First let me do some conceptualizing. I see retirement planning covering such problems as legal, financial, educational, health, and leisure aspects of aging. Admittedly, these are problems we face throughout our lives, but I like to put them in the framework of what I call the "American Life Style." From birth to about age twenty-five we go through the "Learning Phase." From twenty-five to sixty-five we go through the "Earning Phase," and from that point on I call it the "Yearning Phase," or those years when we think back to what we wish we had done earlier in life. As I see it, people in the second stage need to do a lot of work to prepare for a satisfying third stage.

Role of Institutions in Retirement Plan

Given the problems and developmental framework I have mentioned, where do institutions like the university fit? Most programs in the field of gerontology that I am aware of tend to deal with the symptoms of problems, rather than their causes. In contrast to that after-the-fact approach, I believe retirement planning must take a preventive approach and must focus on the causes of the problems as early as possible. However, I also agree with Dr. Atwood's comment that it is difficult to start too early on some matters, for example, to attempt to convince young people of the importance and meaning of the later years. Ideologically, it might be desirable if we could improve foresight, but pragmatically that does not generally seem to happen. Therefore, I would suggest that we might get the most mileage by focusing on the middle-age group and trying to sell retirement training to industry, government agencies, educational institutions, or whoever might receive us.

The potential audience for such training is enormous, by which I mean that research indicates there will be some 15 million people retiring in the United States over the next ten years. No longer do we work until we can't work any longer. Retirement is a real thing. We have letters right now from state offices, agencies and industry indicating 100,000 people who might benefit from this kind of program. So, with this many people, how best do we go about implementing a retirement program? And who will pay for it? The major problem we face right now is that there are no dollars to pay for training programs. But we are working on that.

In the area of program delivery, we have experimented with the more traditional on-campus program and found the response to be rather negative. However, when we have taken the program out to people, the response has been excellent. For example, in doing retirement training for industry, all management has to do is identify the people they want in the program. Then we go out and put on the whole show. Using that approach, we have had nothing but excellent feedback from participants.

Future Directions and Questions

To summarize my perception of our role in retirement planning, I see it in very general terms as education and training. We need to develop the program and be ready to take it to the marketplace.

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*Address given at the "Education for Aging Workshop" held in Salt Lake City, Utah on June 21, 1975.
Training methods which might be effective vary from lecture and discussion to personal correspondence. The package we are using now is an 8-session course which integrates a variety of methods and media. A problem of concern to us now is the matter of training personnel. Should we be training trainers or should we concentrate on taking the program to the people ourselves? Should universities and community colleges and government agencies be doing the training? How can such questions be resolved?

These are the struggles we have faced in building our program, and I imagine you will have to grapple with the same basic issues. Why don't we keep each other informed of solutions we discover?
Goals for Older Adult Programs

In very quick order let me share with you some observations I have made during the 12 years in which AARP has been involved in continuing education for older people. I have had a unique opportunity to travel around the country and observe first-hand what is happening.

There are a great many exciting and worthwhile programs throughout the nation, but one thing I have noticed occasionally are programs which have been reported as highly successful but which exist only on paper or at a much less spectacular level than publicized. I think we need to watch out for those over-dramatizations and not delude ourselves into thinking we are always successful.

To get to more specifics, let me suggest some types of educational goals that are appropriate for older adults. This is just a sample of ideas to tickle your imagination. One of the first things I emphasize is that it is presumptuous for any of us to set goals for older adults. Therefore, the first goal is to ask older people themselves to create what they perceive as appropriate educational goals. I think we would be amazed at the outcome, because they won't follow a lot of our preconceived and traditional notions.

Secondly, I think a clue to educational goals for older people is to be found in a quotation from Dr. Ethel Percy Andrus who said: "Learning is a form of living. Let us keep alive our sense of curiosity, of wonder, and of concern." If we analyze that carefully, we can find some goals that have important meaning for older peoples' lives.

Mr. Hixson is Dean of the AARP/NRTA Institute of Lifetime Learning in Long Beach, California. He serves as consultant and resource person for organizations wishing to establish learning programs for older adults. His training is in group work education and school administration.

Address given at the "Education for Aging Workshop" held in Salt Lake City, Utah on June 21, 1975.
The Institute of Lifetime Learning has 40 different centers now where older people serve as volunteers and run their own "learning" programs. I say "learning" programs because I am not sure educational programs are what older people want. I know it's a point of terminology, but the more I watch people in my travels, the more impressed I am with the importance of semantics. Often our programs fail because we use the wrong words. Often when we talk about "programs for older people," we turn a lot of people off.

Experiments have also been tried with radio, newspaper and home study programs. These approaches are particularly useful for the home-bound, missionaries, or those traveling around. Television has been used with some degree of success, but it is extremely expensive and difficult to keep track of.

Institutional Roles

At the risk of sounding too elementary, I will suggest that one of our most important roles as institution and agency representatives is to learn to listen to older people. That is one of the hardest things to do well it seems.

Secondly, we need to improve our skills for working with older people and with volunteers. I am very happy to see state departments of education and state offices on aging doing more work in volunteerism. Unfortunately, I have found that educators tend to be rather inept at working with older people and volunteers.

Thirdly, we need to be more genuine in our attitudes and inclinations to work with other community organizations. We tend to operate in our own institution rather than in cooperation with the wider community. I say these things sympathetically more than critically because I recognize the problems that organizations face.

We also have a responsibility to develop new resource materials, not only for our own organizations, but also for older adults in the field. Obviously, older adults should be involved in the development of these materials.

Often we get too academic in commissioning instructors to write such things as correspondence home-study courses for older people, so one requirement I started enforcing was that there be no academic language in the course materials because I believe we must learn to communicate.

Strategies

Of top priority in building programs for older adults is the creation of more gerontology centers across the nation. For example, there is so much to be done in the field of education, and I have noticed a real lack of leadership from departments of education in getting involved with gerontology.

We need to implement the 1971 White House Conference recommendations. For a number of reasons, progress is lagging, so we need to push harder in that area.

Another priority is to encourage multi-level interagency exchange through workshops, publications, state and regional federations. I am appalled at how difficult it is for community college representatives to sit down at a table and talk with faculty and staff from four-year institutions. Even within our own profession we are having problems talking or planning. So there is a long way to go communications-wise.

There is a further need to help research institutions identify areas in which more knowledge is needed. Better communication lines between practitioners and research people must be established or we cannot really be effective.

Obviously, my suggestions constitute a big order, but I maintain that if we are serious in our intentions of establishing meaningful educational programs for older adults, then we must become more proficient in all these areas.
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III. RESOURCES FOR SHORT-TERM TRAINING IN AGING
THE UNIQUE ASPECTS OF SHORT-TERM TEACHING:
HOW TO TEACH THE "HOW-TO'S" TO THE DOERS
Lois G. Swack

Keeping up with the escalation of new knowledge is an almost impossible task for the practitioner, thus he is turning increasingly to sources of continuing education to keep him up-to-date and effective. To teachers in continuing education programs, as well as to staff development personnel responsible for training workers in the ever-changing human services, there is the perennial challenge of teaching a large amount of material in a short period of time.

Any unit of instruction and study which requires that the content be telescoped and condensed into short periods of time is considered short-term teaching. When the time is thus limited, both teacher and student know they must get at the tasks of teaching and learning quickly. There is little time to pursue the process in a leisurely, reflective manner. The teacher must know how to put his teaching across effectively. Because of the awareness that the time at hand must be well used, it is likely that as much or relatively more learning will happen during a brief period as would happen if the same content were stretched over a longer period.

Although most of the principles of teaching and learning are the same no matter what the length of the experience, there are certain differences between short-term courses and "regular" education (those of the traditional school session):

1. The short course is based on action-focused objectives and identification and solution of specific problems as compared to generalized objectives and concern with problem solving as a process in the longer course.

2. The participant group in the short-term course is usually more heterogeneous in terms of education and experience than those in the regular course, where criteria for enrollment usually include a stated level of education and experience.

3. For the short-term course small groups are frequently utilized quickly to promote engagement and interaction, and therefore the teacher needs small group competence. When there is a longer time period small groups may be used as part of the teaching method, but exchange of ideas and relationships of students may also evolve as a responsibility of the students.

4. The teacher of practitioners must have current practice involvement, whereas a teacher of long-term courses that may be essentially theory oriented probably will not find the personal practice connection as compelling.

5. The setting for the short-term course allows both the learners and teachers optimum opportunities for informal and social interaction where ideas and experiences are exchanged and learning is stimulated. The longer course allows various opportunities for students to initiate exchange.

6. Participants in the short-term course test the learning immediately as it applies to their practice. In the regular course testing in terms of practice is usually postponed and course content is not necessarily immediately useful even in a student's field placement.

This article discusses some of the teaching principles and techniques that can increase the effectiveness of the short-term learning experience.

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The Student and the Learning Group

The student comes motivated to learn quickly whatever will be useful to him on his job. He expects the content to be practical. As Knowles observed of the adult learner:

His time perspective shifts from one of postponed application (“Accumulate subject matter now for possible later use”) to one of immediate application (“Learn things now that will help in coping with today’s life problems”), so he learns better those knowledges, skills, attitudes, and values that are relevant to the problems he faces in life at this moment.1

When the student can attend to the learning over a longer period of time he is more willing to become deeply involved in theoretical material, which he can think through and then test at a later time.

Motivation enables the short-term learner to minimize his involvement in some of the detracting processes characteristic of educational groups. “Resistance to the learning-teaching contract,” as a result of the learner’s ambivalence about learning2 and competition for achievement and recognition among the learners are generally of minor importance in the short-term continuing education context. It is a frequent observation among teachers involved in both the college and continuing education classroom that the latter provides a notably refreshing and exciting contrast in terms of the full engagement and receptivity of the learner.

The obvious complement is the rapid assessment or “testing” of the teacher by the learners, which influences attitudes about the teacher’s competency and perceptiveness as well as expectations concerning the quality of the “course.”


The student in the short-term class is not involved in the particular learning situation long enough to become dependent on the teacher. He must learn an approach to learning that involves substantial self-education, that is, how to ask questions and how to look for answers—a process of identification and solving of problems, not merely incorporation of a set of facts or theories. In short, for the short-term student, each learning experience is education for self-education, providing stimulation and incentive for ongoing learning.

Objectives

The teacher of a short-term unit must be clear about the differences between short-term teaching and both the supervision and treatment process. Objectives must be quickly and clearly defined, negotiated, and understood by both students and teacher. Miller documents the effectiveness “of establishing educational objectives by identifying the problem with which the potential learner must deal, rather than building programs upon problems a faculty would like to teach him how to solve.”3

On this basis the learning experience allows those engaged in it to discover working solutions to practical problems and to develop new knowledge to deal with such problems. The content will be specific and focused.

Asking a student when he enrolls to indicate briefly his practice problems and concerns can help give appropriate focus to the course. On this basis many good teachers have been able to rethink and adapt their content and teaching to the interests of the students.

A group of students attending a course in child development felt they had wasted their time because they expected to learn how to work with parents of young children in a poverty area, rather than the usual material about child rearing. The teacher was not prepared for this.

Several students exiting from another classroom were heard to say, "I was afraid to do family therapy, but now I think I know enough to try it." That teacher used both live demonstration cases and written material presented by the participants. Each time he teaches the course he begins anew with material brought by the students enrolled in that class.

West emphasizes "helping the student to develop an ability to gather and evaluate evidence," relating this to the need for the practitioner to develop a capacity for "quickly retrieving information that can be brought to bear on the problem." This is perhaps a primary objective of a short-term continuing education unit, offering some hope for the possibility of maintaining a practice awareness of rapidly growing bodies of knowledge.

How the information is used varies widely. For example, based on the material in a course on comparative personality theory the participants may develop their own roles and practice models. On the other hand, students attending a course on operations research may want to adapt only forms and models already tested.

The Teacher

The teacher in a short-term course must recognize his role in the stimulation and encouragement of participation and in planting the seeds that will grow into thoughts and ideas. He helps create a "capacity for self-renewal" in the learner. The educator involved in this kind of teaching must be able to use effectively the participants' experiences as a dynamic, relating these to generalizations and concepts new to the learner and helping the learner to discover meaning actively rather than to accept it passively. Here again advance information about students' experience and interests is useful.

The time-limited aspect of these sessions indicates to the educator the necessity to facilitate quickly a group identification so that the experiences and contributions of the participants may be shared and incorporated into the content. "The teacher will need . . . to seize every opportunity to point out differences as potential resources . . . he reinforces mutual aid . . . ."7

One teacher, although she had a basic design, indicated in her course description that the group would share in developing the content. In this way the participants could begin immediately to know one another, to share experiences, and to have some ideas about what they could learn from whom.

In identifying the small group characteristics and dynamics of an educational group Somers says "every small group works on tasks and works on relationships — the teacher must also relate to and deal effectively with the group in both of these major dimensions of group life and functioning."

In discussing the teacher as socializing agent Rothman pointed out that there is a paradox in this role.

The teacher as person strategy reduces social distance between teacher and learner since neither is neutral or passive and both face uncertainty. More important, this teaching

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6Esther Test, Professor Emeritus, SASS, CWRU. Former Director of Continuing Education.


8Somers, op. cit., p. 160.
style reveals to the learner a model for learning. The risks inherent in this strategy, however, should not be overlooked. The possibility of competition between the learner and teacher exists.

The teacher as facilitator...stands out as the most useful mode in continuing education. It supports independence, it makes provision for divergent thinking, it allows students to proceed at their own pace of learning, and it enhances motivation in learning...Since the facilitating mode gives preeminence to the engagement of students with each other, rather than with the teacher, the advantages of group support and group identification in learning are notable contributions associated with this teaching strategy.9

In addition, the teacher "must necessarily be able to formulate a diagnostic assessment at two levels — individual and group." 10 This is particularly challenging in a continuing education group where participants present considerable diversity in their backgrounds, and a cursory assessment can have unhappy consequences.

An experienced teacher, noted for his informal and open style, was unaware that several of the participants in his group were unfamiliar and uncomfortable with a loosely structured learning situation. They did not know how to use it, and while some indicated their dissatisfaction during the course, others waited until the final evaluation to express their frustration. This teacher may have leaned too heavily on his assessment of the group, and with the very active participation of a number of individuals it was not unusual to assume that all was going well.

In a short-term teaching situation the intensity of the challenge is obvious, and implicit in that challenge is the requisite for quality teaching. A comfortable climate must be established, relationships developed, and instructor-student and student-student interaction must evolve quickly to allow for the free interaction and exchange necessary to the learning group. "Basically, the teacher must trust the group members to be (or at least to become) able to help each other to learn, to teach each other, to learn from each other — in other words to carry their responsible role as a learning group in the collaborative process of learning and teaching." 11

The Methodology

Quality of teaching must be a priority criterion in a short-term learning experience. In contrast to semester-long courses, the short-term course allows little opportunity to correct mistakes, whether they be perceptual, relationship, or content-focused. Teaching methodology is related to objectives and purposefully selected to stimulate learner engagement quickly.

It is important for the teacher to know about his students prior to the beginning of the teaching unit. Previous education, explicit interests and job concerns, and work experience of the learners are bases for the teaching-learning tasks."...as they (adult learners) themselves attach increasing value to their own and other's experiences, they learn better in situations in which the experience of the learners is used as a resource for learning." 12 In a short-term learning experience, advance identification of this potential enhances the use of the group's classroom time.

Various studies have illustrated the pros and cons of methodology issues such as lecture vs. discussion. West maintained that "information provided in a lecture usually has no immediate and direct relevance to a specific


10Somers, op. cit.

11Ibid, p. 166.

12Knowles, op. cit.
problem of the student. Because the knowledge is not used or acted upon promptly, it is much less likely to be remembered.  

Analyzing some of the research studies comparing the lecture method with group discussion, McKeachie gives examples which show that "the discussion method proved to be superior on measures of problem solving and scientific attitude," and "that small group discussions were better than lectures in developing favorable student attitudes." However some students want the expertise of the teacher via lecture, particularly when he is notable or has had unique experience. By comparison, and considering the brevity of the course, they feel the contributions of their peers are inconsequential.

In evaluating a workshop on crisis intervention conducted at a school of social work the students were unanimously enthusiastic about content, teacher, and so on. But in reply to a specific question about teaching methods, fifty percent thought there was too much lecture and not enough discussion, while the other fifty percent said just the opposite. That teacher could only decide that she had struck a good balance. As Rothman pointed out:

> learning in a group is enhanced by the structure and quality of communications in the group.

For the most part the teacher can assist communication by playing the role of expediter, qualifier, and summarizer. He does this in various ways depending, of course, on his imagination and skill. The most common ways are by eliciting ideas, asking for reactions or suggesting that individual contributions be limited in length to permit as many persons as possible to become active communicators. The teacher must, of course, keep in mind that his own communications can reduce the time available in any learning situation and therefore needs to be limited. The ultimate responsibility in the learning situation for keeping the channels of communication open and accessible to all falls to the teacher, but once again in the adult learning situation each member shares in this responsibility.

Whatever teaching methods are selected, they are chosen in terms of their potential for illuminating the usefulness of the content. Special media are used to assist in the problem-solving process, not as "entertainment." There is a danger at times in any teaching situation of using a special "gimmick" to seduce the students' interest. It is particularly important in a short-term course to be certain that the techniques relate to the objectives.

Ultimately the teacher is responsible for the organization and structure of the course.

> some patterns of organization may not be functional to working or learning and, once structures are established, it is difficult for groups to give them up and accommodate to necessary change. Armed with this knowledge the teacher can facilitate the creation of structures in the learning group that will enable the group and individual learners to effectively carry out the work tasks involved in learning. The teacher's assistance in this aspect of group life is crucial. He has a better perception or mapping of the learning terrain. He can aid in determining more realistically needed working teams, assignments, time-tables, etc. He can actively clarify what he anticipates may be difficulties in the future of the learning process and help the group to develop structures for meeting these.
Feedback and Evaluation

Evaluation must be an ongoing process in a short-term teaching situation.

Since the task of an educational group is individual learning, this continuous assessment of individual and group and the continuous revision of these assessments in light of evaluation of progress toward educational goals are essential to effective learning and teaching. 17

Concomitant with the teacher-learner negotiation and agreement on objectives is the ongoing monitoring and periodic feedback and assessment of the progress the group is making in approaching the objectives. It is desirable that at one or more stages in the learning process the group and the teacher discuss their progress and, if necessary, redefine the objectives.

A dynamic teaching team conducting a high-powered workshop for agency executives found to their dismay about two-thirds of the way through their course that they were not going to cover the planned content. The teachers knew it was important, but they had been diverted by a great deal of participant discussion. That was important too but they knew that the material would not be useful unless a certain amount was presented. What to do? They presented the problem to the class and the class agreed to limit and focus discussion even though it meant putting aside some individual concerns. When the course ended, most of the important content had been covered. The teaching team in their self-evaluation agreed that in the future they would begin by sharing course content plans with the participants and then after a short period of time discuss where they were and where they were going.

This may indicate a shift in direction, method, and even content. The teacher would need flexibility, sound familiarity with the content, and willingness to search out and make use of additional resources if necessary.

The Nonteacher Expert

A few words must be spoken about the nonteacher expert who is frequently asked to conduct a workshop in his area of renown. If he is conscientious about wanting to get his material across he may worry that he knows nothing about teaching. He should, indeed, have some assistance in advance if he expects to be effective. The helping person may be a teacher, an education administrator, a staff development director or a continuing education specialist. The person who invites the expert to teach has responsibility for seeing that he gets the help he needs.

Conclusion

Inherent in the short-term teaching unit are factors that can enhance both the teaching and learning experience. It demands of the teacher special qualities of self-awareness, perceptions of learner involvement, and knowledge and skills in group dynamics and group leadership. Recognition by both teacher and learner of the unique aspects of the short-term continuing education program will contribute to its effectiveness and to the fruitfulness of the experience for the participants.

17 Somers, op. cit., p. 162.
A MODEL FOR SHORT-TERM TRAINING*

J. Richard Connelly

Introduction

In my remarks today, I will be talking about a model for planning and evaluating short-term training programs. What I hope to cover are some basic guidelines for setting-training objectives, identifying the training modules, and evaluating the program. You will then apply this information in your Work Groups to design a sample training program.

Setting Training Objectives

I contend that there are different types of training objectives and that we need to determine which type we are training for in order to facilitate change. The three categories of objectives I use are "Knowledge," "Skills," and "Perceptiveness." Let me define each one briefly.

"Knowledge" in the context of this model, refers to facts that come from research or experience and which are based on some objective measure. We are dealing here with content. "Skills" refers to the ability of a person to make decisions. Decision-making skill in turn depends upon the ability of a person to make decisions. Decision-making skill in turn depends upon the ability to make assessments, to relate to people, and to make judgments. The decisions made may be management/administrative decisions, or they may be the more effective/relationship kinds of decisions.

Perhaps the following example will help distinguish Knowledge from Skills. I think all of us know people who have a lot of knowledge but are poor practitioners. We also know the reverse of that where someone works well with people but does not have the knowledge with which to make good decisions or give sound advice. So, if we can understand Knowledge as the mastery of facts and Skills as the mastery of decision-making, I think we can differentiate between the two.

"Perceptiveness" means attitude and value set. A Perceptiveness objective would seek to change some part of the attitudinal structure. For example, if you want to have a person increase his empathy for older people or develop a positive attitude towards older people, your training effort would be in this category rather than in Skills.

Now, obviously, Perceptiveness is interrelated with Knowledge and Skills, but can they exist and be trained for separately? There is research to suggest this is so. In one study I am aware of, the researchers tested subjects in terms of their knowledge about older people, their decision-making ability, and their ability to actually work with older people. Many who did poorly on the first two areas were extremely capable in the third. What I am suggesting is that competency in one area does not automatically assure competency in another.

From a theoretical point of view, it seems to me that if we could train people to a certain standard on all three components, we would have persons who could be very effective in the field of aging. If we can assess what areas need to be strengthened, then we can design training programs that will focus on the appropriate components.

Again, recognizing that Knowledge, Skills, and Perceptiveness are never totally exclusive of one another, I think it is still possible and desirable to design training objectives for that component we wish to change. The differentiation is important for evaluation, since the type of training objective set will influence the type of evaluation conducted. For example, the evaluation of an information-giving session would probably not be the same as the evaluation for a skill-development or attitude-change session.

The third component is "Perceptiveness." Perceptiveness means attitude and value set. A Perceptiveness objective would seek to change some part of the attitudinal structure. For example, if you want to have a person increase his empathy for older people or develop a positive attitude towards older people, your training effort would be in this category rather than in Skills.

*Excerpts from an address given at the "Symposia for Trainers in Aging" held in Salt Lake City, Utah on December 12, 1974 and January 16, 1975.

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Identifying The Training Module

There are several questions which should be answered in the early stages of planning: What kind of training module or subject matter is needed? Who will the participants be and why? Should they be all service providers or should we try mixing service providers with administrative staff? What would be participants' motivation for attending? What are the expectations and requirements of the funding agency?

These questions seem obvious, but they are difficult to answer and are often avoided. Let me give you an example from my State. When our faculty was approached about doing short-term training under the Title IV-A funds, we indicated interest but also asked the State exactly what type of training they wanted. The State kept saying that they weren't sure. After going back and forth this way for some time, I decided that maybe we should just tell them what we could and would do, then they could decide if they were interested. They were, as it turned out.

The process was that we were waiting for regulations to come from the State saying: "This is what we need you to do." But they didn't have a direction for us so we went the other direction of training in our area of expertise. In our case, the State director had very little time. She did ask the administrators and service providers what they needed in the way of training and they said: "We don't know." Eventually, an inventory of need was put together and prioritized. At least this gave us a starting point.

Planning and Evaluating the Program

There are a number of training procedures involved in planning and evaluating training programs which I would like to review.

A basic starting point is the needs assessment survey, through which we try to determine where participants are in terms of their Knowledge, Skills and Perceptiveness. The survey might also include questions about participant interests and motivations. The idea is that by using such an assessment we would obtain a fair idea of what levels need to be trained for. Ideally, there would be some kind of interview where a person in the local area would meet with individuals or small groups to get more complete assessment information.

A second step in the procedure involves clearly formulating and publicizing the objectives of the training prior to the session. If we can design and communicate the objectives well in advance of the training so that potential participants have a chance to give some feedback, I think participant motivation and program success are greatly enhanced.

There is always the problem that even if you do a good needs assessment, you will still end up with a participant group whose backgrounds and interests are extremely diverse. I don't have a definite solution to that problem except to say that it then becomes very important to use some basic adult education techniques, especially on-going involvement and evaluation by participants.

Let me make a few remarks about evaluation. Much of the evaluation that we do is evaluation of how the training goes. We ask questions like: "How did you like this session?" "Did it meet your expectations?" "What do you think was the most important thing you learned?" "What kinds of things do you think you will use when you get back to your job?"

Now, much of that is self-perception and relies on trainee ability to decide what parts of the training were most important. We have no idea if any of the self-reported learning carries over onto the job. If we were going to assess whether a person actually changed, we would have to know where they were before they started the training. Maybe that's not our objective, but if it is then we have to do testing before, during and after the training to be able to substantiate change.
You can halfway measure change in knowledge base by using a pre- and post-measure. For example, in our nutrition training program we used a 100-item true-false questionnaire before and after each session. At that time we were just using it as a learning tool rather than a true assessment of change in post-training job behavior, but it might be developed into a good measure.

One very effective technique we found for increasing knowledge, by the way, was a Quiz Board where questions and answers were listed on a board and participants had to push a button matching them up. You would be surprised at how much the post-training measure increased. It was much higher than the results from the lecture or discussion methods. Participants had a hundred percent increase on the post-test.

A third part of the procedure is to have trainers and participants develop a “training module” with each other. If we could take time at the beginning of a session to share with each other what we want to accomplish during the next few days or weeks, and if we could reach some consensus on what types of objectives we wanted to focus on, that would at least give us a common base for the duration of the program. Perhaps participants would then show more patience, understanding and self-control when a particular topic seemed irrelevant or boring to them.

A fourth item, and probably one of the most important, is to constantly involve trainees in the search for knowledge by relating their experiences to the material we’re trying to convey. The goal is to make the experience real and relevant to their job. Involvement means that the translation to reality is not left entirely up to the person at the podium, who might not be able to speak to so many diverse backgrounds even if he or she had the time.

The assessment of our nutrition training suggested that not only are there problems in reaching a balance between all the components in training, but there is also a problem in assessing what actually went on during the training. As a result, we set up a project council which met with the trainers every day to let them know how the training was progressing. That way the trainers got immediate feedback and tried to adjust the training accordingly.

In sum, it seems to me that we need to work very hard at adapting our evaluation techniques to our training goals so that we are not just running a popularity contest of what speaker was most exciting or what film most stimulating. What I am suggesting is that we begin to look at techniques and methods of evaluation that will begin to assess actual changes in Knowledge, Skill and Perceptiveness. Otherwise, the time and money spent in training are of dubious value.
GUIDELINES FOR SHORT-TERM TRAINING*

M. David Hansen

Introduction

I would like to share with you this morning some “Golden Rules” developed by our staff at the Rocky Mountain Gerontology Center from training we have done for ACTION, Area Agencies on Aging, the American Health Association, and through our Summer Gerontology Workshops. In all, we have evaluation information from about 2,000 people.

Scheduling

Timing. Let me start by discussing something that I call “timing.” One of the first things we learned is that you do not hold a training conference near a holiday. Unless the people you work with are different than those we’ve trained, you’re going to run into real static. A second rule under the topic of timing is that on the first day of a training session, always try to start a little later than you do on other days. This is especially important if you have people traveling in from long distances.

I don’t know about the training sessions you have been involved in, but one thing we notice with the longer sessions is that somewhere towards the middle, people come in a little bit later every day. Then on the last day they arrive right on time, hoping that by some grant of clemency they will be released early. Because of this we always try to finish the session before the scheduled quitting time. In fact, it is a good idea to adjourn by 1:00 or 2:00 pm on the afternoon of the last day. That way people can start the drive home, catch an early flight, or do some shopping and touring.

Training Schedule. It is wise to avoid scheduling more than six or seven hours of formal training in one day. “Formal” refers to stand-up lecture presentations, structured types of group activities, and the like. If you can plan something relaxing for the evening where people can enjoy themselves without having to stick to an agenda, that seems to work well. People have a tendency to become less bored if they can have diversity and informality.

Agenda

The second major area I would like to address is the agenda. I don’t think there is a more difficult task than building an agenda which is exciting and relevant.

Conceptual Agenda. My approach to setting an agenda is to structure for concepts rather than for specific content. That way you don’t lock yourself into a program that you can’t adapt in response to participant feedback. I don’t mean to suggest that you fail to tell people what they’re coming for, but the problem is that trainees will generally be so diverse that too strict an agenda prohibits you from responding to those differences.

Flexibility. Related to structuring for concepts is the notion of maintaining flexibility in the agenda. This is extremely critical to good training. In reality, there will be as many different agendas as there are participants and trainers, and in order to succeed with the training effort you need the latitude to respond to some of those agendas. In part, flexibility is enhanced by a conceptual agenda and in part by the philosophy and behavior of the training staff.

Lunch-time. Leave a little longer for lunch on the first and last days. On the first day people may need some time to explore the environment and become familiar with what facilities are available. Or they might need to complete registration and unpack their things. On the last day most of them will need some time to check our, pay their “bills,” or do an errand. By allowing some extra minutes, you can minimize the battle of trying to get people back in their seats.

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*Address given at the “Symposia for Trainers in Aging” held in Salt Lake City, Utah on December 12, 1974 and January 16, 1975.
It is also important to avoid committing every lunch hour. There may be times when you want to hold a luncheon for everyone to socialize or work. Such gatherings help create a cohesive atmosphere. But people also have various food preferences, special diets, other lunch-time agendas, so it is wise to leave them to their own devices occasionally.

Socializing. One of the best ways to facilitate group cohesion is to encourage and arrange opportunities for unwinding together. Maybe everyone would like to watch the football game together, go out to dinner, or have an informal rap session. These informal gatherings really pay off in terms of creating a more congenial atmosphere for the daytime sessions.

Summarizing. We have found that it helps to preview and review events every day. People appreciate a summary of where they have been and where they are going. It helps them focus on the job to be done. And, if you can make the preview sound exciting, people may even show up earlier or at least on time.

Daily Warm-Up. For the morning session, it often helps to use a get-to-know-you or warm-up activity to start things moving. I say that because if the session is very short, there are not many opportunities to develop interaction and cohesion. Also, some people need a few minutes to orient themselves and prepare for work.

Training Environment

Murphy's Law. In the area of environment, there seems to be one law that prevades short-term training. That is Murphy's Law, which says: "If it can go wrong, it will go wrong." I don't care if you contact the facilities management fifty times about seating arrangements, meals, hotel costs, etc., something will go wrong. So it is always wise to "expect the unexpected."

Comfort. It is time well spent to check with trainees daily regarding rooming problems, conference facilities, acoustics, and so forth. We have had elderly trainees, especially men, with rheumatoid-arthritic conditions that were aggravated by sitting on metal chairs for long periods of time. Often all that is needed is to get some softer chairs and take frequent breaks. Try to be continually aware of the environment and problems that it may be posing, so you can act to improve conditions.

Announcements. Somehow miscommunication is usually the rule rather than the exception. When you are dealing with a group, especially if they are from various locales and backgrounds, everything goes more smoothly if you take extra time to announce and repeat. Communicating frequently and in various ways will insure that everyone is operating on the same wavelength.

Problems. There is no way to avoid some problems, and perhaps the best advice is to respond to problems immediately. Even if you have to bring in extra help to handle the seemingly petty things, do it or training will suffer in the end.

Trainers and Training

Instructors. We found that the competency and personality of instructors is directly related to learner satisfaction. That relationship came up time and time again in the evaluations. In other words, if you are planning a training program, recognize the fact that the personableness of the individual and the time he or she spends in building a relationship with the trainees are integral to the training's effectiveness.

Being Available. Good trainers are not 8 AM to 5 PM people. A trainer who is not available to some extent before, during, and after the session is not going to have the most effective training atmosphere. Being accessible does not automatically mean that people will flock to you or keep you up all night, but they will be more inclined to see you as approachable and concerned.
Being Aware. A good trainer has the capability of being sensitive and willing to respond to a variety of demands. One thing I really dislike is going to a session where lots of things are wrong, but the trainers do not acknowledge or act on the problems. Maybe the room is stifling and everybody is taking off jackets and folding paper fans, but nobody on the training staff is moving to solve the problem. You may have a training job to do, but people are not automatons who come to the sessions free of personal problems or basic needs. You need to deal with those.

To the program planners, I would also say that once you have selected an instructor and made an agreement with him about the training to be done, allow him the latitude to do the job as he sees fit. If you hired the person in the first place, that assumes you have some faith in his competence, so let him use his skills.

Methods

There are some general comments on training methods that I would like to cover before we finish. As a general statement, I would urge you to remember that most people see to prefer a variety of training styles and a lot of personal contact. For any short-term training that involves group lecture or discussion, I prefer the horseshoe or U-shaped type of seating arrangement because the trainer can walk up and down the inside and have eye contact with every trainee. Trainees can also interact with one another more easily.

Registration. Registration is a part of the methodology, and I would just recommend that it be made as short, thorough, and personal as possible. People don’t want to be herded, but they do appreciate getting the preliminaries handled efficiently.

Seating Arrangements. Try mixing up the seating arrangements from time to time. By that I mean to alter the physical arrangement and the grouping of individuals. There is nothing worse than having people from one city, state, or program sit by their own people for the whole session. It is natural to seek familiar faces, but as trainers I think we need to provide people with opportunities to meet others.

Alter the use of large group sessions with plenty of small group meetings. We have found that learning from others in a small group is extremely valuable, appreciated, and more effective than a straight lecture format.

Involvement. Provide an opportunity for individuals to share their knowledge and experience. We have found through our studies that there is a direct relationship between having the opportunity to exchange experiences and being satisfied with the training. So, if you can make sure trainees have the chance to talk with others about their programs, you will find that learner satisfaction is enhanced.

On-going Assessment. Pre-assessment and continuous assessment are worth the time taken and help assure that the training effort is on target. There are many ways to keep tabs on the process, most of which are very simple. For example, observing people at different points throughout the day or talking with them at breaks can provide a great deal of information. Having the training staff sit with the trainees during the session and converse with them informally is another valuable source of information. You may get a lot of good feedback in a one-to-one discussion from someone who would not otherwise be inclined to speak up in front of the whole group.

One of the most frustrating things that we have found is having people who sit through an entire session without saying a word about their frustrations or dislikes. Then they give you a disastrous evaluation about how bad things were. The same sort of thing happens with people who fail to send back the pre-assessment, then have nothing but criticism for the session. I am not too sure yet what can be done about those situations except to start seeking feedback from everyone about the program as soon as you possibly can.
As Rich mentioned, you need to set up criteria for training and determine what kinds of training objectives you want to work on — Knowledge, Skills, Perceptiveness. That is what training is about.

Conclusion

As with any set of rules, however "golden", there are always exceptions. I hope you will find my suggestions helpful but not limiting; and I would appreciate learning how the "rules" work for you.
PLANNING EDUCATIONAL CONFERENCES

Quentin H. Gessner

Introduction

Conference planners have various alternatives available to them for planning educational conferences. However, from my experience, many short-term learning experiences are planned in a rather haphazard manner. Therefore, in this article I will provide a working definition of an educational conference; mention several of its components; suggest some of the approaches that are used for conference planning; discuss who the participants are that attend the program; and then, recommend six specific guidelines for planning an educational conference. It is for the new or uninitiated persons that are faced with determining how they should proceed in planning that this article is intended.

The guidelines presented suggest one approach to planning that can be utilized during the planning process for an educational conference.

What are Educational Conferences

Howard Y. McClusky, in mimeographed material, has defined a conference as “a planned and orderly series of educative experiences designed to achieve an educational objective.” This definition clearly exemplifies the need for planning a progression of activities designed to provide a cumulative educational experience for participants attending an educational conference.

Components of Educational Conferences

Educational conferences seem to have many components. Several include the interpersonal relationships among planners; the experiences, needs and expectations of the planners; the objectives they establish for the conference; and the planning process itself. In addition, other components include the experiences, needs and expectations of the participants; their objectives, and later the valuations; and also, the speakers selected for the program and their objectives for their presentations. These components and the crucial elements in a conference situation that are discussed later need to be dealt with during the planning stage of the program.

In my opinion, if conferences are to be meaningful for the participants and effective as a method of change and the application of principles of adult education, they must be planned in an effective, systematic manner.

Approaches to Conference Planning

First, let’s respond to the question, what is planning?

Harleigh B. Trecker has defined planning as “the conscious and deliberate guidance of thinking to create logical means for achieving commonly agreed upon goals. Planning always and inevitably sets priorities and calls for the value judgments. The alternative to plan is no plan.”

This seems to suggest that the quality of planning is directly related to the quality of outcomes derived from the learning experience.

I would further suggest that planning is necessary because of the highly complex experiences that require consideration of all factors involved.

However, conference planning experiences have convinced me that systematic planning for conferences is more the exception than the rule. Many conference programs seem to be planned using what can be called a “shot gun” approach. In this type of planning, committees suggest, for consideration, speakers and/or topics to use in forthcoming programs. One committee I am familiar with bases its suggestions on speakers

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the committee members have heard speak at other programs they have attended. The planning committee members then like to invite the "good or entertaining" speakers to cover the subject areas they personally believe need to be covered. In this procedure, the planning committee presumes to know what is best for all the members of the organization. The possible effect is that the personal interests of the committee members, not necessarily of benefit to the majority, will prevail.

Another problem with a planning committee using this approach is that there is a lack of continuity with other conference programs in which their particular organization may be involved over a period of years. The programs tend to be yearly "one short programs" rather than a series of short-term learning experiences designed to provide a continuing education program for the participants.

In an attempt to provide a continuing education program for its membership, a state association I have worked with here in Michigan, recently initiated a three-year plan for its annual conference. The plan is designed to provide within a three-year period the basic information a new member will need to carry out his professional responsibilities. This type of planning provides continuity, a systematic training process, and maximizes the time and effort of the instructors and participants.

Another approach often used by conference planning committees is to first select a theme and then decide what the program should be. Or a committee may decide on subjects that are popular at the time. Unfortunately, these approaches do not necessarily meet the needs of the participants, and tend to ignore the reasons for bringing the conference participants together. It ignores who the conference participants are and does not necessarily take into account the background and experiences the participants will bring to the conference situation.

Who Are the Participants

The questions "Who are the potential conference participants?" and "Why they attend conference programs?" should be considered during the planning phase of the conference. Generally, conference participants are representatives of a cross-section of many occupational, professional and/or socio-economic backgrounds. Some will attend a program to increase their education; to gain information to solve a problem; to resolve conflict; and to discuss specific areas of interest.

Also, participants may attend because they have instructions from a superior to do so, or because they have a desire to get away from job responsibilities or their spouses for a few days. Some conference participants attend a program for social reasons or visibility purposes. The reasons why participants attend a conference and the background of the participants are important considerations during the planning stage. We need to know not only what he is and why he comes, but what will he bring to the conference setting in the way of experience and from what kind of an environment. What happens to these participants during the conference experience needs careful consideration in order to help eliminate some of the unknown aspects of a conference experience. For example, an unfortunate situation developed in a conference I attended recently because the program planners had not taken into consideration the experience and sophistication of the participants. The results were that the speakers provided very little new and/or meaningful information for the audience. Feedback from the participants indicated considerable frustration and a general negative reaction to the program.

Guidelines for Conference Planning

My comments to this point have been designed to reflect the need for a plan for designing educational conferences. The question
can then be asked, "How can educational conferences be planned effectively and systematically?" The approach suggested is to follow six specific guidelines toward planning an effective educational conference.

1. Select A Planning Committee

The initial step in planning for an educational conference is to select a planning committee. The question of who should be involved in the planning must be considered. All organizations and/or groups that will be involved in the program should be represented on the planning committee. This procedure has the advantage of broadening the base of people involved, although one should keep in mind the preferred size of a working committee is generally from five to eight persons. Consideration should also be given to the role of the persons involved in the planning.

The following five guidelines refer to the planning process itself:

2. Determine Purpose of Conference

The definite purpose for conducting the conference should be defined at the beginning of the planning and should be related to the organization itself, its philosophy and its goals. Discussion should include such questions as: Why are we bringing these people together? Who are the persons we want to attend? What are their needs? What are their expectations? How will the total experience fit together? What's it all about? Six common purposes for conferences are: to provide educational emphasis on training and learning; to provide information and decision-making; to help resolve conflict; to provide for discussion and interaction.

Once the overall purpose for the conference is established, the specific objectives that are to be achieved can be spelled out. This then leads us to the third guideline.

3. Establish Specific Objectives For the Conference

Once the specific objectives for the conference are determined, the planning committee can design the program to produce some specific achievement based on these objectives. The committee should ask itself, "What objectives can realistically be accomplished during the program? Are they attainable within the time limits set for the meeting? How are the objectives to be achieved? How much interaction among participants should be planned? Are we dealing with cognitive change or change in the affective domain?" The committee needs to be specific about what it expects the participants to achieve as a result of the conference experience. The achievement of objectives makes it possible to evaluate to what extent the participants have realized their fundamental aspirations. When objectives are clear and meaningful then the gathering of facts, the articulation of plans, the presentation of a program, and the evaluation of results are greatly facilitated. A conference evaluation then becomes quite meaningful in terms of whether or not the conference has been successful.

If the evaluation is defined as the process of assessing the degree to which objectives are being achieved, it becomes clear that evaluation presumes that goals or objectives have been set down first. A professional evaluation should prove helpful for the improvement of a program and for determining whether participants have benefited from the educational experience.

4. Select a Conference Theme

A theme is generally used to describe or characterize the subject of the conference. The theme can be useful in identifying the main thrust of the conference to the potential participants.
The theme must relate purpose and objectives that have been established for the conference. The theme should then give the potential participant a "feel for what it's all about".

5. Determine Conference Topics

Once the overall purpose for holding the conference has been established, the specific objectives have been determined, and the theme selected, then the planning committee can turn its attention to the topics to be covered.

The topics ideally should be selected to cover the subject areas suggested by the objectives. They must be relevant. For example, if the committee selects as one objective for a conference, "that the participants learn the proper procedures for treatment of shock as a result of profuse bleeding", this subject then must be discussed in detail so that the participants will be able to achieve that objective. The topics or the planned learning activities should reflect what we know of adult learning principles. Using this approach to conference planning, the objectives will identify the subjects to be discussed and will tend to eliminate, superfluous and non-essential information. The discussion will hold to specific information designed to help the participant achieve the objectives established for the program.

6. Determine Conference Speakers

Finally, after the purpose, objectives, theme and topics have been selected, the planning committee then can turn its attention to the selection of the conference speakers.

Speakers should be chosen on the basis of their knowledge of the topics, as well as their ability to successfully cover and communicate the information on the topic to the audience. Needless to say, the selection of speakers for a program is an extremely important part of the planning process. All too often the speakers are determined by reputation and not necessarily by how successfully they can perform a specific task.

The selection of the speaker does not terminate the planning committee's responsibilities. The committee must communicate to the speaker specific information pertaining to the purpose and objectives of the conference, who the potential participants are, and the probable backgrounds and expectations the participants will bring to the conference. This procedure will increase the possibility that the speakers' presentations will cover the specific areas the planning committee had intended be covered. The committee should also be concerned with the method of presentation, the techniques used, and the involvement of the audience in the program. At this stage of the planning the committee may decide to utilize small group discussions, panels, clinics or some other form of interaction to achieve desired outcomes.

Summary

In this article, six guidelines to planning an effective educational conference have been presented. It has been suggested first that a planning committee be selected to plan the conference. That this committee initiate the planning process by determining first the purpose for holding the conference. Once the purpose has been established, the specific objectives for the conference should be determined, the theme for the conference should be chosen, the topics should be selected to cover the areas suggested by the objectives and finally the speakers should be selected to provide information on the topics that are to be covered.
Obviously, more goes into conference planning than has been mentioned in this article. The conference planning approach suggested should provide the committee charged with the planning responsibility for a conference with specific information and guidelines that are important in planning an educational conference experience. Instead of a "hit and miss" proposition, the committee can approach the conference with the confidence that the conference has been planned to make the experience meaningful and valuable to the participants.
NEEDS ASSESSMENT AND OBJECTIVES SETTING IN SHORT-TERM TRAINING*

Phileon B. Robinson

Introduction

There is a vast amount of information about needs assessment and objectives setting which might be covered here, but I would like to focus on three areas in particular. First, I want to review the advantages and pitfalls of the formal needs assessment. Secondly, I will suggest the use of a "mastery model" as an approach to overall program goal setting. Finally, we will spend some time on criteria for setting good objectives.

There is a very basic rationale for becoming familiar with these topics, which brings me to an analogy about Christopher Columbus. It has been said that many of our program participants are a lot like Columbus, who didn’t know where he was going when he left the Old World, where he was when he reached the New World, and where he had been when he arrived back home. So it is with some of our trainees. They may feel rewarded in the sense that they had a fine time and filled their suitcases with handouts, but they really ought to know why they are at the training program, where they are going, and what they have ultimately gained.

Basically, the whole process of needs assessment and objectives setting should help us determine what we will teach and how we will teach it. We have to know what kinds of individuals we will be working with, what their pace is, what special needs they might have. The more we can individualize sessions to the particular group and participants, the better off we are.

Needs Assessment

Let me begin with needs assessment by mentioning an approach to program planning which is often taken, but which I feel is not very productive. I refer to the tendency for establishing content and objectives before doing needs analysis. Too often the direction for a training program is set by someone who says: "Well, so-and-so is an excellent speaker with good material, so let's call him." And that is what happens.

The approach I recommend is that of first determining whether or not there is a training problem and then asking what might be done to solve that problem. To make such a determination, we need to start with a needs assessment. Only then can we move into designing an appropriate program.

There are a variety of sources that might be tapped to identify training needs and the following are some suggestions to stimulate your imagination:

1. Potential participants
2. Funding agency
3. Planners
4. Public officials
5. The written literature
6. Other agencies - staff and administrators
7. Participants from past programs
8. Evaluations from past sessions
9. Service recipients

I would suggest two cautions about needs assessment. One is to beware of working only on those needs that can be easily identified. Alan Knox, in his paper on "Helping Adults to Learn," writes about the man who lost his keys and searched under the street lights to find them because that was where he could see best. Sometimes we let that kind of thinking decide how we are going to proceed on an educational program.

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"Excerpts from an address given at the "Symposia for Trainers in Aging," held in Salt Lake City, Utah on December 13, 1974 and January 17, 1975.
The other thing to beware of is the notion that "educating" or "training" will solve the problem that has been identified in the needs assessment. Maybe the problem is not lack of information, but lack of motivation or lack of application skills. The problem may be one which cannot be solved by an educational program. For example, imagine that a senior center director is having some problems doing his job. Before automatically assuming that the solution is to send him off to a training conference, explore some other alternatives. Maybe he simply needs more and better feedback about what he is supposed to be doing and how he is performing. Or, perhaps too much is being expected of that person and the job requirements need to be changed.

In sum, if the problem is not one of lack of information or skills, it may not be a problem that can be solved with the typical training program. There may be attitude, morale, or personal satisfaction elements involved which won't be touched by even the best-planned program.

**The Mastery Model**

However, for the sake of the subject, let's assume that the problem can be solved or aided with some type of training program. We do the needs assessment and then design what I call a "mastery model." By a mastery model I mean something like a job description, a task analysis, or a statement of outcome. Questions asked when designing a mastery model include: "What must the graduates of the program be able to do?" "What gaps are there between present and desired behavior?" "What gaps are the most important to work on?"

What I am referring to is a conceptual tool that we can use to plan training even though we are not experts in personnel management or time-motion study. Basically, a mastery model involves breaking the job or problem down into goal components from which good objectives can be developed.

Some of the areas around which the mastery model might be built are:

1. Communication skills
2. Planning skills
3. Predicting skills
4. Administrative skills
5. Academic skills

Knox suggests a somewhat different classification which is also useful:

1. Skills
2. Interest
3. Knowledge
4. Understanding of relationships
5. Critical thinking
6. Attitudes
7. Performance

Connelly uses the three areas of Knowledge, Skills, and Perceptiveness, and that's another way to conceptualize the mastery model. All three classifications refer to areas where people may need training and any of the three would be helpful in organizing a program.

As a quick example of a job mastery model, let's return to the senior center director. A mastery model for such a position might be that the director must prepare and manage the budget, take care of expenses, and foster program development. Second, the director must supervise volunteer workers. Third, he must be responsible for publicity about the center — writing stories for the media, identifying and using community opinion. These are all part of the mastery model of the person who heads this senior center.

The attempt here is to describe what type of activity is expected and at what level of mastery. To give a further example, in the area of program development, a program planner might be expected to do a needs assessment which includes:
1. Surveying
2. Personal interviewing
3. Reviewing registration information
4. Pre-testing program participants

As an aside, and I am taking some poetic license here, there are several points I would like to make regarding pre-tests and post-tests. After the needs assessment, the pre-test is most helpful in assessing where participants are before they come to a session. The in-person pre-test, done by the trainee at the beginning of the program, is helpful. Mailing out pre-tests to participants before the program is also effective. Although many of the pre-test instruments we find ourselves using in short-term training are not scrupulously objective measures, nevertheless they provide a starting point from which to assess what happened as a result of the training.

There is some question about whether it is more effective to use a completely open-response instrument or a more structured one. My preference is to give some suggestion of structure, but let respondents do a lot of prioritizing and commenting within that structure. If you don't put down some specific questions and categories, people will tend to answer with very general kinds of information that aren't too helpful.

Another problem area that might be touched on briefly is the matter of advertising for the program. A large part of a good program is reaching the people for whom the program is actually meant. Failure to state intentions and objectives clearly results in drawing people with such a wide variety of backgrounds that one program could not serve them all. So it is wise to send out clear and complete program information in order to limit the audience to those you are trying to reach.

A good recruitment and publicity effort does several things. It helps people decide whether or not they really need and want to attend. It also helps to prepare them mentally for what to expect. I doubt that the perfect program and the perfect audience will ever meet, but through comprehensive pre-test and publicity efforts, programs can be more tailor-made.

Behavioral Objectives

We have talked about the mastery model of what the participant or employee should be able to do. From that we determine where the performance gaps are, and it is around those gaps that behavioral objectives for training are set.

The basic question to be asked when setting objectives is: "What should participants be able to do after they've completed the program?"

Behavioral objectives cut right off the mastery model. The mastery model is sort of a big tree with all the branches and the behavioral objectives are the limbs. The model is a more global statement whereas objectives are the more detailed specifics.

There is general agreement that ideal objectives are:

1. Precise
2. Measurable
3. Significant
4. Practical

Objectives are used to determine program content, to advertise the program, and they should also be used to evaluate the program. Moving through the whole process of program development, we conduct the needs assessment, set objectives, choose content, do promotion, train participants, and then do an evaluation based on the objectives set initially.

Conclusion

Outlining the process and the criteria so neatly makes program development sound quite rational and simple, but it isn't — at least not initially. It takes practice. But to date I know of no instant schemes that will insure the desired training outcome. So, I conclude by strongly recommending that you take the time and effort to find out where you need to be headed and how best to get there.
Modern simulation games can be traced to the more recent past. Educational games that are used today are the direct lineal descendants of games invented by instructors in military education. The game of chess, for example, was designed more than 200 years ago to enable players to learn strategies and tactics associated with warfare. Although the inception of formal war games is obscure, these games served as symbolic equivalents of war and were used for training and as a means of planning for war.2

During the past decade simulation games have been utilized by a growing number of educators for a broad variety of purposes. It would not be overly dramatic to view the past ten years educationally in terms of a simulation game explosion. Surprisingly, however, the professional literature of adult education does not include an abundance of articles or studies on simulation games. This is unfortunate since simulation games, I believe, hold much promise for the enhancement of adult learning.

Origins

Play and games have been employed throughout history as consciously structured situations for teaching and learning. In the Laws Plato's Athenian Stranger suggested that expertise in doing anything derives from practice, and that this practice should take the form of play.1

Complex simulation games came into being as early as 1798 with the creation of Neue Kriegspiel by the German General Staff. Games that simulated war and battle conditions became popular in the military academies of several nations.2 In the later 1950's business and industry, given impetus by the American Management Association, began to develop simulation games for management training.3 Since this time the popularity of simulation games has reached a peak among teachers of children and adolescents. It is significant to note, however, that the origin of early simulation games was related to a need for an effective technology for adult education and training.

What Is a Simulation Game?

Abt attempts to define simulation gaming by focusing mainly on the concept of gaming. He states that a game is essentially an activity which takes place among decision makers who are seeking to realize objectives within the framework of a limiting context.4

The concept of simulation is more difficult to define. Very briefly it may be stated that a simulation game is an activity of decision makers who are seeking to gain objectives, under the constraint of rules, in a make-believe world. Simulation games usually simulate real-life situation, but the task-irrelevant factors of the real world are left out of the "universe" that is modeled in the game.

Several basic elements can be found in most simulation games: (1) games goals, (2) a simulated universe, (3) a scenario, (4) profiles, (5) rules, (6) resources, and (7) game dividends or payoffs.

The goal of any game is the outcome which, once attained, identifies the winner or winners. The winner or winners may be declared on the basis of who reaches the goal first or with more game dividends (such as points in a pointsystem game).


4Clark C. Abt, Serious Games, New York: Viking, 1970, p. 90.
The simulated universe is the make-believe world in which the gaming activity takes place. The Planet Management Game, for example, postulates the environment of the planet “Clarion” in which the players must act. The planet “Clarion” is a model of the planet Earth.

A scenario is a description of the simulated universe provided to the players. Players are furnished with information about the simulated universe to the end that they may solve problems intelligently.

Profiles describe the roles that the players are to assume during the game. In some ways a simulation game could be defined as “role-play activities in a make-believe world.” The profiles provide the players with “Identities.”

The rules are the norms which legitimize certain gaming behaviors and prohibit other behaviors.

The resources are the means available to the players for the attainment of the game goal. In many home amusement simulation games “money” is awarded for the accomplishment of game tasks.

Game dividends are the points or enabling factors which are awarded during a game and which assist the players to move in the direction of goal accomplishment. When play money in a home amusement game stays in the bank, the play money is considered a resource; once the money has been awarded, the money is considered a game dividend or payoff.

Instructional Use

There are several instructional uses of simulation games. Twelker has identified three major uses: (1) to present information (referential simulation), (2) to elicit responses (contextual simulation), and (3) to assess performance (criterion simulation). The distinction made by Twelker, I suggest, concerns the principal emphases of simulation games. A specific simulation game may transmit instructional content, function to provide feedback to learners on the basis of their gaming performances, and provide evaluations of learners in terms of their accomplishment of game goals. While the game may emphasize one of these dimensions, all three dimensions may be operative in the game.

Content Areas

Simulation games may be used in a variety of content areas. Kidder and Nafziger report that at the eleventh annual symposium of the National Gaming Council (1972) there were demonstrations of many games including games that dealt with:

(1) generative grammars and the scientific method
(2) innovative urban planning
(3) concepts in the field of genetics
(4) the interaction between science and politics in designing the future
(5) presidential politics
(6) the development of questioning skills
(7) survival in educational institutions
(8) changes in a developing society
(9) drug education
(10) the principles of nutrition

Many different kinds of games have been briefly noted in various journals. Some of these games concern:

(1) the resolution of conflict
(2) teacher preparation for the inner city
(3) family financial management


Suffice it to say that simulation games may be used in any content area. The only limitation for the use of simulation games in content areas is the limitation of the human imagination. The range of educational uses of simulation games is practically limitless.

Games and Learning

Simulation games are generally effective educational tools because they are based on a number of significant principles of learning. Simulation games are highly motivating and invite active participation in the learning process; games facilitate the interaction of learners in group situations and encourage decision making and problem solving.

It has not been shown experimentally that simulation games represent a more effective way of transmitting knowledge, but it is evident to anyone who has administered a simulation game that the participants gain knowledge with a great measure of enjoyment. Duke suggested that simulation games are more effective approaches to adult education because the learners are not placed in the traditional teacher-dominated milieu. He lamented that there is not a more extensive use of simulation games in adult education.8

Games and Adults

Sometimes it is objected that simulation games are more appropriate for children than for adults. Such an objection obviously assumes that adults are not inclined to take delight in playmanship.

If Huizinga9 is correct in defining man as homo ludens—playing man—it would seem that the capacity for play is lifelong and that adults, no less than children, would be attracted to simulation gaming as a technique for learning. Bishoff10 states several factors that explain the value of play for middle-aged adults: the need to expend surplus energy, the need for relaxation, the need for an outlet for emotional tensions, and the need to identify and construct other personality patterns for themselves by means of self-expression. Exhaustive research by this writer has not turned up any data which would support the contention that simulation games are more congenial for childhood learning. The assumption that simulation gaming is the restricted preserve of children is a gratuitous assumption.

Game Design

The teacher of adults may locate any number of commercially prepared simulation games in a wide variety of content areas by referring to Zuckerman and Horn's The Guide to Simulations/Games for Education and Training.11 This large volume contains hundreds of descriptions of games, many of which would be appropriate for the education of adults.

If it should happen that teachers of adults are not able to identify and purchase simulation games for their instructional uses, another option may be recommended: the design or invention of simulation games by teachers. In the Zuckerman and Horn volume there is a special chapter on the design of simulation. Glazier's How to Design Educational Games12 is another handy reference for the teacher who wishes to create simulation games for the accomplishment of specific educational objectives. Many teachers will doubtlessly shy away from such a recommendation fearing that the creation

of a simulation game involves too much time and efforts. This writer has found that time and effort are certainly necessary for game design, but he has also discovered that game design can be highly enjoyable. Anyone who can teach adults can successfully design a simulation game for adults, and can also reap the rewards that creativity brings.

Conclusion

It must not be inferred from this article that simulation gaming represents a universal anodyne for all educational ills. An educational tool—including simulation games—is only as effective as the teacher who employs the tool. Simulation games technology will not revolutionize adult education, but this technology can go a long way in improving the quality of adult learning.

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ASSESSMENT AND EVALUATION IN CONTINUING EDUCATION:
FOUR QUICK AND DIRTY DEVICES

Harold J. Alford

Continuing Education program developers want to know and need to know how they’re doing. But lack of money, lack of time, and lack of trained evaluators on their staffs usually rule out elaborate experimental designs or sophisticated statistical manipulations. What Continuing Education administrators need is quick and dirty feedback so they can improve programs in progress, replicate successful strategies, and eliminate ineffective elements. They need success stories for reports and promotion, and they need good suggestions for planning future programs.

At Educational Testing Service—where we’re seeking to move Programs of Continuing Education from the status of an intriguing idea to a self-supporting national enterprise in just two and a half years—we’ve come up with four quick and dirty evaluation devices that we think are helping us do the job. Perhaps others might also find them useful.

There’s nothing conceptually new about the devices: we’ve simply adapted techniques that have been around for some time. However, we’ve given each technique a special twist, and we use all four in combination, and that’s what makes them especially effective.

Obviously—since this cluster of quick and dirty assessment and evaluation devices has been developed for the 5-day Intensive Resident Courses for educators that ETS is concentrating on at the present time—they will work best in conference and institute settings, but innovative program planners ought to be able to see applications and adaptations we’ve never thought of.

Conceptually, the ETS devices consist of: (1) participant daily diaries, (2) individual information request forms, (3) an end-of-Course performance contract, and (4) an open-ended forced-choice evaluation questionnaire. Used together, the devices provide for: (1) a day-by-day retrospective record of the effectiveness of each instructional element, through the participants’ diaries; (2) immediate improvement of instruction in response to individual information requests; (3) a longitudinal measure of behavior change, through follow-up on the end-of-Course contract; and (4) a summative evaluation through the questionnaires, of the overall course effectiveness in meeting individual needs.

The daily diary is tape recorded by each participant on an individual cassette handed out at the opening orientation session of each course. “Just say what happened and how you feel about it,” participants are told. “Talk into the machine before you go to bed each night, or talk into it any time you have something you want to say. Hand in your tape and tape recorder just before you leave for home at the end of the Course.” The program director listens to all the tapes while driving to and from work, so the review doesn’t take up desk time. A secretary transcribes critical passages to send to individual faculty or members of the program staff, and also types out glowing comments for reports or publicity. The complete tapes are filed for future reference.

Also handed out at the orientation session are several “quickie note” forms—message blanks in duplicate. “Just jot down a quickie note request every time something occurs to you that you think would be helpful to you individually or to the group as a whole,” participants are told. Some participants have asked for additional information about something a faculty member has said, some have asked for publications or other materials somebody has mentioned, some for a chance to talk to someone about a specific problem “back home,” for more or less heat in the room, for some aspirin, for assistance in making transportation plans, and for all kinds of other things. Since the quickie notes are in duplicate, the participant hands the first copy to the program coordinator and keeps the carbon. The program coordinator tries to respond to the quickie note request within three
hours, and participants who don't get direct, individual feedback on their requests are urging to wave the carbon under the coordinator's nose and demand a response. Sometimes, of course, the response has to be, "We just can't do it." More often, however, the response is positive and contributes to the improvement of the Course for the individual participant and frequently for the whole group. Even when the response is negative, participants know that the program planners have concern for individual needs, and the program planners, in tum, gain insights about individual needs that may be useful in future courses.

The end-of-the-Course performance contract is a written statement by each participant indicating how concepts learned during the Course will be applied to problem solving "back home." From an evaluative point of view, this device provides an insight into what Course elements have been perceived by participants as practical and applicable. The contract also provides a basis for longitudinal follow-up by the program planner to see whether or not the applications envisioned by the participants at the end of the Course actually are put into operation.

The summative questionnaire is given to each participant to carry away—along with an addressed, postage paid envelope—to be filled in two to three weeks after the participant's return home, thus providing a reflective—rather than an immediate—view of the Course's effectiveness. The questionnaire has just five questions:

1. Was the Course responsive to your individual needs? Explain.
2. What was the single most effective learning experience in the Course for you? Why?
3. What was the single least effective learning experience in the Course for you? Why?
4. What one activity not included in the Course would you recommend we add in the future? Why?
5. What is your overall evaluation of the Course? Why?

This is the most traditional of the evaluative devices we use; but, as indicated at the outset, none of the devices described here is new. However, the particular way in which they are administered and the evaluative impact of the four used in concert is perhaps, worth further explication.

Not all participants keep their daily diary, and of those who do some simply make perfunctory and covered responses. However, a substantial percentage of the participants provide extensive, open, and useful comment about the program itself giving suggestions for improvement or examples of its effectiveness, and also adding references to the individual participant's operational situation back home. All of this provides material for comparison with the end-of-the-Course questionnaire, and for follow-up questions in the longitudinal phase of the Course.

Other useful and multi-dimensional aspects of the audio tape daily participant diary include:
(1) cognitive transfer, as indicated by the number of specific references to subject matter in the diary remarks; (2) differences in participants' perception of events, as indicated by evaluative statements which frequently range from one person's " Terrific" to another person's " Terrible" on the same program activity, and by frequently pungent verbal vignette characterizations of instructors, resource people, and methodologies; (3) changes in participants' evaluation of specific activities and of the whole program, as indicated by contrasting comments on similar events on different days and by attitudinal statements of growing satisfaction or dissatisfaction with the progress of the program; (4) a record of the group process, as indicated by references to other members of the group and to group activities, formal or informal; and (5) some indication of the emotional involvement of the participants, as indicated by the intensity or detachment of the dictation, the tone of voice, the speed of dictation, and the personal references or impersonality of the statements. With regard particularly to this last item, a comparison of the typed transcript of a diary
statement with the audio tape, itself, quickly reveals nuances of emotional involvement which are contained in the audio tape but missing from a written statement.)

"Quickie note" information requests have a number of values as evaluation devices, not the least of which is the fact that they are not viewed "by the participants as "evaluation devices." Quickie note requests, however, reveal gaps in the cognitive structure of the Course, suggested content additions which may have been overlooked by the Course planners, and reveal, by their substance, attitudinal and other noncognitive responses to the program. (For example, a request for end-of-the-Course transportation arrangements handed to the Course Coordinator in the midst of a lecture suggests one type of participant involvement, while a request for a piece of background material identified by the resource person during that same session suggests quite another type of involvement.)

The end-of-the Course performance contract is, as has been suggested before, a particularly useful evaluation device in that it constitutes a clear behavioral statement that can be checked longitudinally to determine whether or not the instruction has contributed to actual change back home. In addition, however, the contract provides some indication of the cognitive impact of the Course, since the performances identified in the contract—because of the language of the contract statement—stem from a specific concept, learning experience, or set of concepts and learning experiences in the Intensive Resident phase of the Course and demonstrate what aspects of the Course have been transferred to the individual's action orientations.

The mail-back questionnaire packs a maximum amount of useful evaluative information into a minimum of questions. The first and fourth questions (Was the Course responsive to your needs, and What specific learning experience would you add?) provide specific insights into individual participant perceptions both of their own problems and of the Course's relevance to those individual problems. The second and third questions (What was the single most effective experience, and What was the single least effective experience?) provide information immediately useful in modifying the Course for future presentation. The forced-choice nature of the questions helps insure both specificity and a clustering of responses to emphasize what really seemed to work well and what rather clearly missed. The final question (general evaluation) provides participants an opportunity to explain or modify some of their previous answers, and also provides a reference scale for judging the intensity of favorable or unfavorable statements in the first four answers. The fact that the summative questionnaire is a delayed response provides the participants an opportunity to think through their answers to all five questions before answering any of them and tends to minimize internal contradictions while increasing effective responsiveness to the language of each question.

Perhaps the most important and useful thing about these devices is that they constitute an integrated set or battery, each device useful individually as described above, but all four providing considerably more than the sum of the parts. Certainly, the "quickie note" of a given day compared with the diary recollections of that same day gives a two-dimensional view of the day's learning experiences. A comparison of the responses to the summative questionnaire with both the "quickie notes" and the daily diaries provides a third dimension, in which lasting strengths or weaknesses are emphasized and some idea of the relative power of various events can be estimated. Finally, the contract and, more specifically, the actual performance with relation to the contract, provides a scale for judging the accuracy of all the other devices insofar as behavior change is concerned.

So there they are, four quick and dirty devices for assessment and evaluation in Continuing Education.
Lurking in the background, however, and putting it all together, is the quickest and dirtiest device of all—the ubiquitous observer at ETS.

Two professional continuing educators are with the group at all times during the intensive resident phase, from breakfast at 7:30 in the morning through the afterglow which lasts until midnight or after, following the evening session that usually concludes between 9:30 and 10:00 p.m. The staff members—the Course Chairman and Course Coordinator—have been involved in the development of the Course and understand thoroughly the objectives of each learning module as well as the objectives of the entire Course.

The Chairman is the Course leader, providing Course orientation, introducing each learning experience, participating substantively in many of the sessions, and acting as a catalyst in stimulating informal interaction between faculty and participants.

The Coordinator has been the personal contact between each participant and ETS from the moment of the participant’s first expression of interest in the Course. On receipt of a registration, the Coordinator telephones the participant to begin to assist in the participant’s identification of personal objectives and needs for the Course prior to arrival at Princeton. The Coordinator has met each participant at the airport and has become further acquainted on the ride to the residential center. Finally, the Coordinator has processed the “quickie notes” and has been directly involved in every learning activity.

Because of their knowledge of both the Course content and the participants’ backgrounds and concerns, the Course Chairman and Course Coordinator are uniquely equipped to serve as critical observers of the learning transaction and the group process. They constantly communicate with each other to provide formative improvements in the Course as it is in progress, and they review independently and jointly all of the evaluative devices described above.

As a consequence, assessment and evaluation for ETS Intensive Resident Courses is a continuous and continuing process, and, while the devices being used at the present time may be “quick and dirty,” they provide the staff with a great deal of useful information about what is going on while it is going on, and they also contribute extensive experiential data that can be used directly and effectively in the improvement of instruction. More sophisticated devices may be developed later, but, in the meantime, we hope you'll find this review of our experience provocative and helpful, and we hope you'll let us, and readers of ADULT LEADERSHIP, know how these and other assessment and evaluation strategies are working for you.
A BIBLIOGRAPHY OF RESOURCES FOR TRAINERS IN AGING

Ginger M. Walmsley

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Ms. Walmsley is a Program Coordinator at the University of Utah Rocky Mountain Gerontology Center in Salt Lake City. She organized the Region VIII Symposium for Trainers in Aging and also the Region VIII Area Agency on Aging Workshops for staff of aging programs.

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IV. RESOURCES IN GERONTOLOGY
Introduction

My role in this presentation is to bring you up-to-date on Congressional action which has taken place during the last year in the field of aging. Before I get into that assignment, however, I would like to familiarize you with the structure and activities of the U.S. Senate Special Committee on Aging.

U.S. Senate Special Committee on Aging

The Committee on Aging was established in 1961 as a special committee within the United States Senate. Our job is to keep watch over all issues on aging which should be of concern to the United States government. We are not a legislative committee in that we do not receive bills from the Senate floor and do not report these bills out when they are ready for floor action. The committee is a fact-finding and investigative unit which holds hearings, conducts investigations, and makes recommendations on action to members of the Senate. There are 22 senators from 19 states on the Committee, with Senator Frank Church of Idaho serving as Chairman.

The Senate Committee on Aging is one of seventeen committees, of which thirteen have some responsibility pertaining to aging. Our committee believes that these thirteen committees should always be aware of the elderly perspective, so we try to keep them informed and sensitized about the needs of the elderly. We also assist these committees in drafting legislation that we think will benefit the elderly.

Senator Church currently has two major goals for the Committee on Aging. The first one is to end poverty once and for all among the elderly in this country. The second is to upgrade the Supplemental Security Income (SSI) program so that it gives the individual an income equal to or hopefully greater than the established poverty level which is now in the neighborhood of $190 per month for an individual. At present, the SSI program assures only $146 for an individual ($210 for a couple).

As you may know, Senator Church was a major Senate sponsor in 1972 of legislation to raise Social Security benefits by 20%. That law passed. Then again last year he supported an 11% increase, which was authorized in two parts to be awarded in 1974. The Senator has also introduced a bill to establish an independent Social Security Administration within the United States government. This would move the S.S.A. from the Department of Health, Education, and Welfare and from many of what we feel are political influences on the S.S.A. Thus far, forty-eight Senators have co-sponsored Senator Church’s bill. That almost assures passage in the Senate, but we still are not that optimistic about the House.

As another example of the Committee’s mode of operation, I refer you to the latest set of publications being released by the Committee. The series of reports is titled, “Nursing Home Care in the United States: Failure in Public Policy,” and includes an Introductory Report and nine Supporting Papers on such topics as nursing home abuses, inadequate physician and nursing care, drugs, and positive approaches. We are not looking for villains within the nursing home industry, but we are looking for answers. We do acknowledge that Federal policies have intensified the problems which we now face. We know that there are many nursing home administrators doing a commendable job in spite of major difficulties, but we also know that there are many owners who are cutting corners, failing to provide decent care, and failing to live up to government standards.
Senator Frank Moss from Utah is primarily responsible for this report, as he is Chairman of the Sub-Committee on Long-Term Care. Senator Moss has waited until this report was issued, however, to take action on nursing home problems. Since 1967 he has tried vigorously to advance legislation which would improve nursing home standards. After the laws were passed, he felt they were not being implemented and so has continued to press for their enforcement and improvement.

Our nursing home report is focused on the future. It recognizes that a national health insurance program, of which there are many before the Congress, will probably be passed during the next session. Senator Moss, as well as the other Committee members, want to make certain that the new health package is an improvement over the former standards of long-term care, Medicare, and Medicaid rather than a retrogression.

Progress Report on Congressional Action and the Elderly

Let me now move on to my "state of the art" report about recent Congressional action on behalf of the elderly. To do that I must say that there is both good news and bad news.

The good news is that since 1971, the year of the White House Conference on Aging, there has been considerable momentum on legislation affecting older Americans. For example, just this week Congress passed the Health Revenue Sharing and Health Services Act which includes provisions for home health services. This is the first time we have been able to get a home health amendment attached to a major bill in several years.

The act allows for grants to develop and expand home health agencies and to train professionals and paraprofessionals in the arts of home health services. The bill now awaits Presidential action.

This legislation also provides for a Committee on Mental Health of the Elderly. The original bill called for a Commission on Mental Health of the Elderly, but our amendment came from the Senate side. Therefore, in a conference with House members we had to "water down" both the Home Health Amendment and the Mental Health Commission amendments to get passage.

Also this year, the House of Representatives finally approved the establishment of a House Special Committee on Aging. This Committee will be very similar to our Senate Committee. That is, it will have advocacy and lobby responsibilities rather than legislative duties. House members will staff this Committee and will be appointed at the first of the year.

The increases in Social Security benefits have already been mentioned. It should also be noted that within the last year we passed legislation which created an automatic cost of living adjustment mechanism. This cost of living adjustor works so that when the Consumer Price Index (C.P.I.) rises above 3% there will be a similar rise in Social Security benefits. Thus, if the cost of living next year rises 7 or 8%, there will be an automatic Social Security increase in the same amount.

Another new program implemented last January was the Supplemental Security Income program (S.S.I.), to which I referred earlier. We are very aware that S.S.I. has many flaws in it — so aware that we devoted three full days of hearings to it, which is a long hearing in Congressional terms. At least S.S.I. does finally establish a Federal floor of income for those Social Security or other recipients who are not eligible for such benefits under retirement or pension programs, or who have an income below $46 (individual) or $210 (couple) per month. There is also a cost of living adjustor in the S.S.I. program similar to that described for Social Security.

The National Senior Service Corps was also established during 1974. The Corps will provide
new and opportune jobs for persons age 55 and over, which is especially important these days when there are so many lay-offs and shutdowns in plants and companies throughout the nation. Older workers find it much more difficult to find new jobs when they are laid off.

Under the Older Americans Act this year we have the highest funding level ever. I know that many programs still do not have adequate funds, but I think it helps to realize that when the Older Americans Act was first funded years ago, the amount was $30 million for the entire act. Last week when we saw the final appropriations for Fiscal Year 1975, the budget amount was $289 million plus—some eight times more than the original act. So, although we are not at the level we would like, still we are progressing.

Also under the Older Americans Act this year we saw the extension of the Title VII Nutrition Program for the elderly. The program was extended and expanded for a three-year period from FY 1975 to FY 1978 at increasing levels of $150, $200, and $250 million. I would like to add that the Committee fully recognizes the problem of Title VII, the fact that 50,000 elderly around the nation have been placed on waiting lists for the program simply because the program was not funded at a high enough level to meet the demand.

Another mark of progress is that the National Institute on Aging was signed into law on May 31, 1974. This Institute has been vetoed twice before because Congress has felt that it would duplicate efforts already being made within other National Institutes of Health Institutes. The Institute's major responsibilities will be bio-medical, social-economic, and environmental research. N.I.A. will have an advisory committee consisting of twelve members who are to be confirmed by the Department of Health, Education and Welfare, and the U.S. Senate.

The Railroad Retirement Program was approved during 1974 and placed on a much sounder financial basis. For years the Railroad Retirement Program was one of the least beneficial to the elderly.

In the area of housing, the Housing and Community Development Act was signed into law August 22. This bill provides several major breakthroughs for older Americans. A direct construction loan program, of special usefulness to non-profit organizations, has been re-established and modified. A supplement program was included to help older Americans pay the rent. There is also a provision that Community Development grants, which are a type of special revenue sharing, can be spent for senior centers. The only catch is that applicants for the funds must be included in the locality's "Needs Plan" to establish that the funds will be used for a center. In other words, they cannot wait until their county or appropriate unit of government is awarded funds and then apply for senior center monies. Applicants must approach that unit of government before it applies for the funds, and that unit of government must specify in its "Needs Plan" that a certain amount of money will be used for a center. The money can be used for purchase, renovation, and alterations.

Before you get too optimistic, I should say that there has also been some bad news during the last year. The worst news, of course, is inflation. Our Committee has issued several bulletins lately warning that the elderly are particularly hard hit by cost increases for food, shelter, and especially health care. In fact, we called in Federal Energy Office representatives to find out if they had contingency plans ready in case older persons were squeezed by cost hikes on heating fuel this winter. We were worried by the new motto that the elderly would have to make a choice between heating and eating this winter. They won't have money for both. The Committee has tried to get emergency action on a bill which would help the elderly with heating costs, but to little avail so far.
Then there are the increases in food prices. Everyone knows what is happening to regular consumers, and the problem is even more severe for elderly persons who pay a higher proportion of their incomes for meals than any other age group in the country. They face terrible choices: To pay for the rent or the heat; to eat or buy the prescription drugs. Increases in Social Security during the last few years have definitely increased the elderly's consumer position in the marketplace, but when you compare the cost of living increases with the price increases, even the increased benefits can’t hold their own.

Several years ago, members of Congress felt that benefit increases might not be necessary for several years, but the last two years have certainly proved them wrong. Even with the 11% Social Security increase in 1974, the average monthly Social Security benefit now stands at $181 for the typical retired worker, $310 for a retired couple, and only $177 for a widow. The way things are going at the supermarkets lately, grocery bills eat up most of that income in one or two visits.

There is no easy answer to inflation, as the newspapers tell you every day, but there is one important matter which should receive early attention by the Committee and Congress. That is that the present cost of living adjustment mechanism used to determine whether Social Security benefits are to be raised should be examined with an eye towards greater flexibility and responsiveness. As I mentioned earlier, the Congress felt that the cost of living adjustor would secure the Social Security system for several years to come. They were wrong and the 11% increase allowed last year is already out-dated by inflationary standards.

Another problem of current concern is the Medicare program which still fails to provide important coverage, including prescription drugs, to the elderly. The program is entirely too inflexible, lacking such services as home health care. In addition, co-insurance and deductibles keep going up in spite of Congressional resistance to administrative action.

We have also run into problems getting adequate funding for programs which have already been authorized by Congress. Most of your programs are funded under the Older Americans Act. Of those nine titles, only three are sufficiently funded to be of any importance or benefit to the elderly. It is not so much that Congress is voting against the elderly, but rather that they are voting against inflation and will continue to do so until the problem diminishes.

Then there are the problems with the Office of Management and Budget. The director, Mr. Ash, has been quoted recently as favoring budget decreases for Social Security and Medicare. How we do this, I don’t know. The Administration did announce that there will be major cuts in both Medicare and Food Stamps programs. The Medicare cut is so drastic that many elderly will be paying more for their medical costs today than they ever paid before Medicare was implemented. The cost of the Food Stamps program will also drastically affect many of the elderly who do use Food Stamps. The Administration estimates that the cut will save $750 million to $1 billion dollars and affect 93% of the Food Stamp users.

The Administration proposal is that Food Stamp users would have to spend at least 30% of their income to buy Food Stamps. The law always allowed 30% but in the past it has been kept somewhere between 15 and 20%. Under the new proposal, an individual who is receiving the S.S.I. maximum of $146/month would have to use $44 for food stamps. The elderly cannot afford to be spending 30% of their income on food and, as a result, Food Stamp use by the elderly would probably drop considerably if the measure goes through.

There are several moves already in Congress to stop the implementation of the new regulations. A proposal went into the December 6th Federal Register to either put off the regulations or revise the Administration’s proposal.
In Conclusion

I would like to end on a positive note by saying that in the last few years the Congress and the entire Federal system have been more and more sensitized to the needs of the elderly. One of the most remarkable and rewarding experiences in working with the Senate Committee on Aging is knowing that people are becoming more aware at all levels of government and that state governments are increasing the funds for aging programs.

I have a special interest in educational programs and have been glad to find that quite a few states now offer either reduced tuition or tuition-free status to persons 60 and older. For example, the state of Hawaii offers tuition to persons 60 and over, and I believe also pays the cost of books for the elderly.

Many states have created special committees to deal legislatively with the problems of aging. Quite a few are attempting to elevate their state agencies to at least division or department level so they will have more status within the state government. After all, if 10% of the state's population is 60 or older, they should at least have a department they can turn to which is especially attuned to their needs.

Day by day we see the building of a new way of life for the elderly. The time of old age is seen less and less as a time of being pushed away of waiting for death. We are starting to refer to that time of life as retirement, a time you can do things beneficial to yourself and others. Retirement age has also become a concern in many states, and some are now trying to make pre-retirement education available to interested persons.

The Committee has also been very interested in age discrimination. We find that the Age Discrimination Act which prohibits age discrimination against anyone between age 40 and 65 is an effective act for some purposes, but not for others. There is some thought now about amending the Act in several ways: to cover more employees, to cover discrimination over a longer period of the life span; and to cover age discrimination in more areas than employment. There is opposition, however, from labor because unemployment is so high. They prefer to hire the younger worker over the older worker. The issue is a difficult one which we will have to tackle next year.

Major adjustments are being made, and we are sensitizing groups and individuals across the country. But we need people like you to fill us in on what is needed so we can inform the Senators who in turn can vote for the appropriate measures. So, I ask you for help — for any ideas you have on the programs you work with. Educate us so that we can educate the Congressmen and make sure they represent the people we need to serve.
LONG-TERM CARE FOR THE ELDERLY: RECENT DEVELOPMENTS*
Val J. Halamandaris

There's something about working in aging; once you get interested and involved in senior citizen problems, you get committed and don't want to leave. I've had offers to do what I always thought I wanted to do—make a lot of money, enjoy life, move to the Riviera—but somehow now I would rather continue to do what I'm doing.

In my work with the Senate Committee on Aging I read a lot of letters from people writing about problems of senior citizens. Pretty soon some patterns begin to develop and we decide there is a problem to look into. When we have isolated a problem, we start looking for solutions and developing some priorities for legislation which we might propose. That's our tool, our weapon. Sometimes the legislation is enforced and administered well, and sometimes the administrative agencies don't quite get around to defining the law as well as you expect. Another part of our job is to see that they do enforce the law.

Let me mention a few of the issues the Committee has been working on, then I'll move to what's happening in Long-Term Care.

First, there is income. You all know that senior citizens are suffering a great deal because of the recent crises of energy, food shortages, and inflation. We hear stories all the time about senior citizens eating cat food; then we get letters from some idiot cat food manufacturer who says that cat food is probably a lot better than what they've been eating. People always like to see their own point of view. At any rate, we're pushing very hard for increases in Social Security benefits; minimum benefits for widows, broader pensions for veterans and retired civil service employees. We want to keep pace with the cost of living and stop the decline in real, spendable income.

At the same time, we're taking a hard look at health problems. Many of us assumed these problems would be taken care of when we enacted the famous Medicare Act in 1965, right? Well, back in 1965, the average senior citizen spent $231 per capita on health costs. In 1972, the per capita out-of-pocket expenditure was $232, with Medicare paying something like $800-900. My point is that senior citizens are paying more every year for Medicare in terms of co-insurance, deductibles, and premiums. The cost of getting into the program is increasing while people are getting back less in return.

Two or three years ago Medicare paid an average 43-44% of the average senior citizen's health expenditures. Two years ago it dropped down to 41-42%, and this year it will drop to 38%. Imagine only 38% of the health costs incurred by senior citizens will be paid for by Medicare. Now, to me this has all the trappings of a broken promise. I believe that if we say we're going to solve health problems, then let's do it. Let's not promise people something, get people all excited, and then let them fall on their face. This to me is like tantalizing a child with candy and then throwing it away.

I'd like to talk briefly about several other problems we've been working on—like housing. In the past four or five years, we've been working to reinstate a housing program called Section 202. The Nixon administration phased it out in 1969 because it was a direct loan program, which meant you could go directly to the government and get a loan without going to the bank. The Nixon administration said, "This is putting the government in competition with the banks, and we don't believe the government should be lending money." Now, that's a dispute which goes all the way back to Hamilton. But to make their point, they stopped this particular program which was a housing program for senior citizens. We're trying to get that started again, but with little success.

Mr. Halamandaris is Associate Counsel of the U.S. Senate Special Committee on Aging in Washington, D.C. He heads the sub-committee on Long-Term Care, which has recently published a report, Nursing Home Care in the United States: Failure in Public Policy (November 1974). Mr. Halamandaris has his law degree from Catholic University.

*Address given at the "Symposia for Trainers in Aging," held in Salt Lake City, Utah on January 16, 1975.
We can also talk about transportation, especially in the rural areas. Senior citizens really need some help, and they're not getting much. Then we could talk about food, nutrition, the current energy crises—there are a lot of problems that we could talk about. But let me now shift focus and give you a little more personal insight as to what my job entails and what I've been doing the last few days. I think this narrative might give you an impression of what it's like to work on the staff of the Senate Committee on Aging and also what is happening now with respect to long-term care for the elderly.

First, I would like to comment that Senator Frank E. Moss's Sub-Committee on Long-Term Care is responsible for overseeing the nation's nursing home industry. Senator Moss has been committed since 1963 to look at nursing homes and he has personally visited more nursing homes than most nursing home administrators. He picked up the issue long before it was ever a political issue because he cares about people and particularly the institutionalized elderly.

In 1969, Senator Moss asked me to put together a report on nursing homes. It was supposed to take six months—and we’re just now issuing the report, one volume a month. Two volumes have been released (“Nursing Home Care in the United States: Failure in Public Policy” and “Supporting Paper No. 1: The Litany of Nursing Home Abuses”) and the next volume in the series deals with drugs.

Now, I wanted these reports to generate intense interest in nursing homes; and they have. Five or six states have contacted Senator Moss and asked the Committee to work with them on investigations of nursing homes. One of the states was New York, which had been putting intense pressure for reform on nursing homes and the Health Department. The newspapers had become involved, the Health Department was involved, and we soon became aware that the whole problem revolved around one central figure by the name of Dr. Bernard Bergman. Dr. Bernard Bergman reportedly owned a hundred nursing homes across the country with some 50 in the state of New York and a corporate wealth of $200-300 million. We subpoenaed his bank account which placed his personal net worth at $24 million.

Dr. Bernard Bergman reportedly is associated with a gentleman named Al Schwartzberg, who is very prominent in the State of Illinois—he’s a builder of gigantic proportions. He, too, is worth “beaucoup” bucks. In Illinois we have some suspicions about something called “the Percy-Wilson Mortgage Foundation.” In New York there are several banks which rumor has it are owned by the mob or the Mafia, and who fund nursing home purchasers. Several big-time nursing home operators are under scrutiny by our Committee now.

It seems that some people in the New York City Health Department contacted a guy named Val Halamandaris and told him that there were nursing homes in New York City which had been continually in violation of the law since 1958-69. Now, they’re all owned by Dr. Bergman, and we’ve got some ideas as to how he is getting away with the violations. The guy has incredible political influence and that’s how he gets over it. The health inspectors are scared to death of him. They never write him up adversely, or if anyone else does, the report is just shelved, burned, deleted from the files, or something.

The health inspectors suggested that we hold a hearing in the State of New York to bring to light the facts about Dr. Bergman. Well, we started looking at his operations and soon pieced together an incredible network of 100 nursing homes we call the “Bergman Syndicate”. We were able to tie in other operators with another 100 or so nursing homes in Illinois, Massachusetts and Florida.
Now, let me digress for a moment, and say that in one nursing home alone, whose books we've been through (the Towers Nursing Home), there is something like $2.5 million dollars missing on the books. We have the general ledgers which indicate that the money was paid out, and we have a reimbursement form from the State of New York which indicates that the money was indeed paid to the home. It was paid to the home and then went out under various initials.

Well, we started looking around for an explanation and decided to ask for some cancelled checks. Mr. Bergman, through his attorneys, refused to supply us with the cancelled checks. First he said that the checks had been burned. Then, he said that they were lost, unavailable. We issued our subpoena, but he claimed the checks were not covered by our request for all his books and records. So our next step was to go down to his friendly banker. The banker for his account happened to be the National Bank of North America, based in New York City right near Chase-Manhattan. Do you know that some of the micro-film copies the bank is required by law to keep are missing? And that's not all. We were able to reconstruct what happened to $660,000 of the $7.5 million, and it seems it went out in amounts of $10,000 or more to Mr. Samuel Dachowitz. Mr. Samuel Dachowitz wrote in his own name as payee and he wrote in the amount in his own handwriting.

But what about the other $2,000,000 or so? Well, we go back to that ledger with the initials. We found out through a former nursing home employee named Cohen. Mr. Cohen offered the following information that one initial, “R.S.”, probably stands for Rocco Scarfone. Which brought the logical question from me, “WHO?”; “Rocco Scarfone,” was the reply. Cohen looked at me, amazed that I didn't immediately recognize the name. I begged him to let me know who Mr. Scarfone was. He then told me that Mr. Scarfone was a guest of Mr. Bergman and company in this Towers Nursing Home. Now, if you're thinking of a nursing home in terms of what you have out here, forget it. It's not your South Dakota nursing home or your Utah nursing home. It's nothing but a big huge building in New York City — maybe ten or twelve stories with a penthouse on top.

According to Mr. Cohen, Rocco Scarfone used to live in the penthouse. Mr. Cohen also said he had heard Mr. Scarfone complaining that he had lost baggage with National Airlines. Mr. Scarfone was cursing National with a blue streak because they wouldn't give it to him. He complained the baggage had money in it, and he was really working over the agent for National to get his luggage.

Then we found out that Mr. Rocco Scarfone was a former policeman with the City of New York. He found an opportunity, shall we say, to embrace himself with a certain underworld figure named Joseph Columbo. Rocco reportedly schooled Mr. Columbo when the latter was indicted and was required to appear before a grand jury. Newspapers report that Scarfone became Columbo's bodyguard until Columbo was shot. Rocco Scarfone is now in residence in Hollandale, Florida, where 13 days ago he was served with a subpoena signed by Senator Frank E. Moss.

A very interesting story in the Village Voice, which is a nasty newspaper in New York City, confirmed the fact that Rocco Scarfone made numerous trips back and forth between New York City and Florida. The story suggested that Mr. Scarfone was a courier and that he had been taking large amounts of money that came from Bergman's nursing home operation.

Going still further, we ventured in where fools dare not tread and found an insurance company which insured a great number of nursing homes. I might mention here that the reimbursement formula in the State of New York is cost-plus. Seemingly almost everything is covered, including insurance fees. Even legal fees are reimbursable. So, if the state Health Department sues you, you hire Edward Bennett Williams. He charges maybe $45,000 to
represent you before a Senate committee chaired by Senator Moss. You in turn charge off that cost to the state of New York under Medicaid and in turn, to the taxpayers. One attorney has charged each of his 16 clients $35,000 per day to represent them. So far, our Senate committee has announced one day of hearings, but I will tell you that there will be at least three days of hearings. So, at your expense the attorney is getting considerably enriched, and the State of New York and Medicaid are going to pay for it.

Other things were also included in the reimbursement formula until the state got nasty. One operator in upstate New York charged Medicaid for fuel for his yacht in Florida, a salary for his first wife, airplane trips, and luncheons in various restaurants across the Caribbean. The State of New York has finally clamped down and is beginning to disallow some of these expenses.

But they still pay you 10% profit, based on your equity. Equity means how much money you've actually got in the building. The way to maximize your equity is take the nursing home you've got and sell it to your wife. She in turn sells it back to you. With each sale, you increase the price. Now, what determines your equity is the sale price. So, if you can sell the home back and forth, that drives your equity up, as somebody did for a $50,000 home which is now worth $5.7 million. The State of New York would then be paying a profit which is based on the $5.7 million.

Unknown to us, the insurance company that I mentioned turned out to be owned by Stanley Steingut, the Speaker of the House in the State of New York and a very prominent Democrat, and by Mead Esposito, a Democrat and the most powerful boss in Brooklyn. The heat began to get rather intense when the story was carried on the front page of the New York Times for two weeks, straight. In addition, certain officials at the Health Department in Albany provided us with some detailed files.

It seems that the deputy director, the number two man in the Health Department, was a guy who kept meticulous records. Every time someone called him on the phone, he made note of it. Every time someone came to see him, he made a note. Every time someone leaned on him for a favor, he made a note. He had a secretary who apparently had little time to do anything else but file. But the files are a bombshell, implicating most New York politicians. Almost every major politician at some time has intervened in these records on behalf of various nursing homes. One memo told of a meeting between a certain Health Department official and three rather prominent New Yorkers—Stanley Steingut; Sam Housman, a millionaire industrialist who was the prime campaign backer for Governor Rockefeller; and Dr. Hurd, Governor Rockefeller's most trusted assistant.

What were they there for? Well its not entirely clear but it seems that Dr. Bergman wanted permission to build some nursing homes in New York without first getting a certificate of need. The accepted procedure is to get a certificate first, but these gentlemen didn't want to do that. Instead, they put up the building first and then went to the Health Department.

This particular Health Department official, however, had told them politely and very gingerly to go fly a kite. He had some regulations to follow and he is quite precise. So he stalled them. In the long run, the facility did not meet the standards to be a "skilled nursing facility." But there is another classification for homes in New York called a "health-related facility", which means that the institution is not qualified to provide any type of nursing services. In actual operation, however, the lines between the two are somewhat blurred.

Not willing to let the matter drop, Bergman and colleagues worked out another arrangement with the Health Department. There is a state hospital in New York called the Willowbrook Mental Institution, which has a rather scarlet reputation. The arrangement was that patients
be removed from Willowbrook and placed in Bergman’s nursing home. Now, the patients to be moved were not just old people, because of the national trend to move people out of state hospitals and into nursing homes (or shall we call them “health-related facilities”).

A basic rationale for the moves was the new Supplemental Security Income program. For example, ordinarily it would cost the State of Utah $600-700 a month per patient to provide care in a state hospital, and that cost comes out of state money. But if you put the patient in a “health-related facility” or whatever you want to call it, the cost is $146 per patient per month and that is paid by Federal funds. Therefore, there is considerable pressure to move them out.

The situation with this particular New York home was a special transaction, since the Willowbrook patients were young mental patients with a life expectancy of 20-30 years. The idea was that for the next 20-30 years these young patients would bring a reimbursement of perhaps $500 a month. Can you tell me a better investment than that? Talk about a guaranteed income!

I could go on and on, but perhaps you have an idea of what the committee is working on and what we’re up against. As I look at my job, one part of it involves advancing legislation, and the other is chopping weeds. That’s my analogy for it. I think we have to keep from kidding ourselves into thinking we’ve all the problems. The weeds are pretty big ones, you know, and they grow back as fast as you chop them. You’re never going to get rid of all of them. But at least we can try to cut them back and maintain some moderation. Hopefully the Senate Committee on Aging is doing that.


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Helen Mills, Gerontology Trainee
Rocky Mountain Gerontology Center


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Larry McCleery, Gerontology Trainee
Rocky Mountain Gerontology Center

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*-------------------- Questions and Answers on Death and Dying*. New York: MacMillan Publishing Co., Inc., 1974. This sequel to *On Death and Dying* consists of the most frequently asked questions and Dr. Kubler-Ross’s answers. It deals with such subjects as terminal illness, accepting the end of life, suicide, telling the patient that he is critically ill, euthanasia, and the prolongation of life.

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Stephanie Belnap, Gerontology Trainee
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SOURCES OF FILMS ON AGING

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Administration on Aging, OHD/HEW
330 C Street S.W.
Washington, D.C. 20201

American Foundation for the Blind
15 West 16th Street
New York, New York 10011

American Nursing Home Assoc.
Film Service
Box 7316
Alexandria, Virginia 22307

APA/HASA Film Library
Visual Aids Service
University of Illinois
Champaign, Illinois 61820

Center for Mass Communication
Columbia University Press
440 West 100 Street
New York, New York 10025

Concept Media
1500 Adams Ave.
Costa Mesa, California 92626

Harvest Films, Inc.
25 West 43rd Street
New York, New York 10036

Indiana University
Audio Visual Center
Bloomington, Indiana 47401

International Films Bureau
332 So. Michigan Ave.
Chicago, Illinois 60604

Mrs. Marguerite Jost
Special Materials Division—Main Library
North Texas State University
Denton, Texas 76203

Mid-American Resource and Training Center on Aging
5218 Oak Street
Kansas City, Missouri 64112

Modern Talking Picture Service, Inc.
1212 Avenue of the Americas
New York, New York 10036

National Audiovisual Center
National Archives and Record Service
Washington, D.C. 20409

National Medical Audiovisual Center (Annex)
Station K
Atlanta, Georgia 30324

Oregon Division of Continuing Education—Film Library
1633 S.W. Park Ave.
Portland, Oregon 97201

Pyramid Films
Box 1048
Santa Monica, California 90406

UCLA Media Center
Instructional Media Library
405 Hilgard Ave.
Los Angeles, California 90024

University of Michigan
Audiovisual Education Center
416 Fourth Street
Ann Arbor, Michigan 48104

University of Southern California
Division of Cinema—Film Distribution Section
University Park
Los Angeles, California 90007
GERONTOLOGY RESOURCE DIRECTORY*
NATIONAL ORGANIZATIONS AND AGENCIES IN AGING

ACTION: Older Americans Volunteer Programs
806 Connecticut Avenue; N.W.
Washington, D.C. 20525

The Federal agency which coordinates volunteer programs such as RSVP, FGP, and Green Thumb, SCORE, ACE, VISTA, Peace Corps, and Senior Companion.

Administration on Aging (AoA)
Department of Health, Education, and Welfare
330 Independence Avenue, S.W.
Washington, D.C. 20201

The federal agency responsible for administering grant programs to the states. It is also a central source of information, technical assistance, and evaluation in the area of aging programs.

Adult Education Association
810 18th St., N.W.
Washington, D.C. 20006

Professional organization devoted to research, publication, and exchange of information in the field of adult education.

American Association of Homes for the Aged
374 National Press Building
Washington, D.C. 20004

Members of this private non-profit organization work with each other and the government in trying to identify and solve problems in homes for the aged.

American Association of Retired Persons/National Retired Teachers Association (AARP/NRTA)
1909 "K" St., N.W.
Washington, D.C. 20006

Regional Representative:

Robert J. Utzinger
Room 609 Kearns Building
136 South Main Street
Salt Lake City, Utah 84101
(801) 328-0691.

These two non-profit organizations work together to meet the needs of older people throughout the nation. They offer a wide range of publications and services for persons over 55. AARP has a newer division called AIM (Action for Independent Maturity) for persons age 50-65.

*Assembled by Staff and trainees at the Rocky Mountain Gerontology Center, University of Utah. Winter 1975.
American Geriatrics Society, Inc.
10 Columbus Circle
New York, New York 10019

This organization emphasizes research and publication in the medical aspects of aging.

American Nursing Home Association
1025 Connecticut Avenue, N.W.
Suite 607
Washington, D.C. 20036

A federation of state associations of nursing homes. Publishes information on characteristics and status of profit and non-profit homes.

American Public Welfare Association
1313 East 60th Street
Chicago, Illinois 60637

Although not strictly devoted to problems of aging, the APWA has published teaching materials for training in gerontology.

Gerontological Society
One Dupont Circle
Washington, D.C. 20036

A professional organization devoted to the research, publication, and exchange of information on aging. The Society also sponsors an annual conference.

Gray Panthers
3700 Chestnut St.
Philadelphia, Pennsylvania 19104

National activist movement concerned with eradication of "agism"—discrimination based on age. The Panthers hold conferences and workshops, maintain a speakers bureau, and help groups organize.

National Association of Retired Federal Employees,
1533 New Hampshire Ave., N.W.
Washington, D.C. 20036

National organization which represents the interests of retired federal employees. Publishes a monthly magazine and offers special life, health, and auto insurance rates.

National Caucus on the Black Aged
c/o National Center for Black Aged
#725 DeSales St., N.W.
Washington, D.C. 20036

An advocate organization working on behalf of the black elderly. Publishes a newsletter, conducts research, and disseminates information on aging and aged blacks.
National Center for Voluntary Action  
1735 Eye Street, N.W.  
Washington, D.C. 20006

A private non-profit organization concerned with promoting voluntarism nationally. It helps committees start voluntary action centers and maintains a central data bank on voluntarism.

National Clearinghouse on Aging  
Administration on Aging, OHD/DHEW  
Washington, D.C. 20201

Federal office responsible for collecting, analyzing, and disseminating information about aging programs. Supposed to be a national clearing house for such information.

National Council of Senior Citizens  
1511 "K" Street, N.W.  
Washington, D.C. 20005

NCSC is composed of representatives of seniors' organizations throughout the nation. Its foci are on education and social action.

National Council on the Aging (NCOA)  
1828 L Street, N.W.  
Washington, D.C. 20036

A private, non-profit corporation which serves as a central resource for information, technical assistance, training, planning and consultation in gerontology.

National Senior Citizens Law Center  
1709 West Eighth Street  
Los Angeles, California 90017

A central national resource for legal services programs serving low-income elderly; works at federal, state, and local levels to see that needs of low-income elderly are met.

Senior Advocates International, Inc.  
1825 K. Street, N.W.  
Washington, D.C. 20006

An advocate organization which represents persons aged 50 and over. Publishes a magazine and offers special rates on health and auto insurance, travel programs, and drugs.

U.S. Department of Commerce - Social and Economics Statistics Administration, Bureau of the Census  
Suitland, Maryland 20233

This agency publishes the "Current Population Reports" which include population, income, education, housing, etc. data.

98
U.S. Senate Special Committee on Aging
Mr. William Oriol, Staff Director.
United States Senate Special Committee on Aging
G-233 Senate Office Building
Washington, D.C. 20510 (202) 255-5364

Subcommittees:
Consumer Interests of the Elderly
Employment and Retirement Incomes
Federal, State, and Community Services
Health of the Elderly
Housing for the Elderly
Long-term Care
Retirement and the Individual

Frank Church, Idaho, Chairman
Harrison A. Williams, N.J.
Alan Bible, Nev.
Jennings Randolph, W. Va.
Edmund S. Muskie, Maine
Frank E. Moss, Utah
Edward M. Kennedy, Mass.
Walter F. Mondale, Minn.
Vance Hartke, Ind.
Clairborne Pell, R.I.
Thomas F. Eagleton, Mo.
Lawton Chiles, Fla.
Hiram L. Fong, Hawaii
Clifford P. Hansen, Wyo.
Edward J. Gurney, Fla.
Edward W. Brooke, Mass.
Charles H. Percy, Ill.
Robert T. Stafford, Vt.
J. Glenn Beall, Jr., Md.
Pete V. Domenici, N. Mex.
Bill Brock, Tenn.
John V. Tunney, Calif.

Urban Elderly Coalition
Alice M. Brophy, Chairman
Mayor’s Office for the Aging
250 Broadway
New York, New York 10007

National association of executives on aging. They meet twice a year to share information and to write on behalf of nation’s urban elderly.

Western Gerontological Society
Dr. E.P. Stanford, President 1975-76
Center on Aging
School of Social Work
San Diego State University
San Diego, California 92101

Roy Van Orman, President 1976-77
Rocky Mountain Gerontology Center
University of Utah
Salt Lake City, Utah 84112
A professional organization of gerontologists in the Western United States devoted to research, publication and dissemination of information on aging. The Society also holds annual conferences.

**Centers for Higher Education in Gerontology**

<table>
<thead>
<tr>
<th>University</th>
<th>Address</th>
<th>City, State, Zip</th>
</tr>
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<tbody>
<tr>
<td>Boston University</td>
<td>635 Commonwealth</td>
<td>Boston, Mass. 02215</td>
</tr>
<tr>
<td>Brandeis University</td>
<td>415 South Street</td>
<td>Waltham, Massachusetts 02154</td>
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<tr>
<td>University of Southern California</td>
<td>University Park</td>
<td>Los Angeles, California 90009</td>
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<td>Duke University</td>
<td>Durham, North Carolina 27706</td>
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<tr>
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<td></td>
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<tr>
<td>University of Nebraska at Omaha</td>
<td>Omaha, Nebraska 68101</td>
<td></td>
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<tr>
<td>North Texas State University</td>
<td>Denton, Texas 76203</td>
<td></td>
</tr>
<tr>
<td>University of Oregon (A Consortium)</td>
<td>Eugene, Oregon 97403</td>
<td></td>
</tr>
<tr>
<td>Pennsylvania State University</td>
<td>Amy Gardner House</td>
<td>University Park, Pennsylvania 16802</td>
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<td>St. Louis University</td>
<td>St. Louis, Mo. 63103</td>
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<tr>
<td>Syracuse University</td>
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<td>Rocky Mountain Gerontology Center</td>
<td>University of Utah</td>
<td>Salt Lake City, Utah 84112</td>
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</tr>
<tr>
<td>Weber State College</td>
<td>Ogden, Utah 84403</td>
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</tr>
</tbody>
</table>

**JOURNALS AND MAGAZINES**

*Adult Leadership*
Published by the Adult Education Association, 810 18th St., N.W. Washington, D.C. 20006. Published Monthly except July and August, $13.00/year.

Journal intended primarily for practitioner. Articles deal largely with programming for adult education.

*Aging*

Good general coverage of what is happening in aging throughout the country. Includes information on programs, legislation, state and federal agencies, gerontological publications and conferences.
Aging and Human Development
Published by Greenwood Press, Inc., Periodicals Division, 51 Riverside Avenue, Westport, Connecticut 06880, Quarterly, $20.00/volume or $8.00/issue.

Special emphasis on psychological and social research of aging and the aged.

Dynamic Maturity
Published by AIM (Action for Independent Maturity), 215 Long Beach Blvd., Long Beach, California 90802. Bi-monthly, $3.00/year.

Covers topics on pre-retirement planning, specifically for persons age 50-64.

Geriatrics
Published by Lancet Publications, 4015 W. 65th Street, Minneapolis, Minnesota 55435. Monthly, $15.00/year.

A medical journal which covers recent developments and findings in geriatrics. Also includes book reviews, abstracts, and information on recent legislation.

Gerontologist
Published by the Gerontological Society, One Dupont Circle - Suite 520, Washington, D.C. 20036, Bi-monthly, $12.50/year (Students - $10.00/year) for both Gerontologist and Journal of Gerontology.

Articles are to inform a wide reading public about research, practical application, trends, education, and recent publications in gerontology.

Journal of Gerontology
Published by Gerontological Society, Quarterly, $26.00/year (except students).

Oriented to scientific research articles in the areas of biology, psychology, sociology, and clinical medicine. Includes book reviews and bibliography.

Journal of the American Geriatrics Society
Published by the American Geriatrics Society, Inc., 10 Columbus Circle, New York, New York, 10019. Monthly, $18.00/year.

A medical journal of current developments and research in the field of health care for the aged. Also includes abstracts and listing of new publications.

Modern Maturity
Published by AARP, 1909 K Street, N.W., Washington, D.C. 20006, Bi-monthly, $2.00/year.

Covers national events, local AARP activities, topics of general interest to older people.

NEWSLETTERS

AARP News Bulletin
Published by AARP, 1909 K Street, N.W., Washington, D.C. 20006, Monthly except August, $2.00/year.

Covers local AARP activities, national developments, general interest articles.
The Senior Citizen News
Published by the National Council of Senior Citizens, 1511 K Street, N.W., Washington, D.C. 20005,
Monthly, $4.00/year for individual, non-member subscriptions.

Provides information on national legislation and happenings of concern to the elderly.

U.S. Senate Special Committee on Aging Memorandum
Published by U.S. Senate Special Committee on Aging, G-233, Senate Office Building, Washington, D.C.
20510, Several times monthly, no charge.

Supplements hearings and studies of the committee to give up-to-date information on legislation and
programs.

RELATED PUBLICATIONS

Resources for the Aging: An Action Handbook
Published by NCOA, 1828 L Street, N.W., Washington, D.C. 20036, Prepared for OEO. Second edition,
1969.

Designed to guide communities and individuals in their efforts at helping the aged poor. Techniques of
utilizing federal programs, voluntary agencies, foundations and trusts are covered.

The Federal Register
Published by the Office of the Federal Register, National Archives and Records Service, General Services
Administration, Washington, D.C. 20408, Daily (Tuesday - Saturday), $25.00/year or $2.50/month.

The OFR is required to publish all federal documents which would affect or be of general interest to
the public. This includes documents on authority, rules and regulations governing federal programs.

Published by U.S. Government Printing Office Annual, $3.00

Outlines the current organization, authority, function, and personnel of governmental agencies.

U.S. Government Printing Office - Monthly Catalog
Published by U.S. Superintendent of Documents, Government Printing Office, Washington, D.C. 20402,
Monthly, $7.00/year.

Puts out a monthly catalog on all government publication, including those of House and Senate
Committees.
STATISTICAL PROFILE OF PERSONS AGE 65 AND OVER: NATIONAL*

I. DEMOGRAPHIC DATA

Numbers:

As of mid-1972 some 21 million persons 65 and over made up 10% of the total population — every tenth American.

Between 1960 and 1970 older Americans increased in numbers by 21% compared with 18% for the under-65 population.

Each day approximately four thousand Americans officially become “aged” by celebrating their 65th birthday.

Sex and Marital:

Most older persons are women — 12.5 million compared with 8.8 million men.

1. Between ages 65 and 75 there are 130 women per 100 men.
2. After age 75 there are 166 women per 100 men.
3. The average for the total 65+ population is 142 women per 100 men.

Most older men are married while most older women are widows. There are almost (four times) as many widows as widowers.

Residence:

Seven out of ten older persons live in family settings. One fourth live either alone or with non-relatives. Only 5% are in institutions.

64% of older persons live in metropolitan areas, typically the central city.

New York, California, and Pennsylvania account for just over 1/4 of the older population. Adding Florida, Illinois, Ohio, Texas and Michigan allows us to account for just over 50%.

Life Expectancy:

At age 65 the average male can expect to live another 13.2 years; the average woman 16.9 years.

*The term “older person” in this profile refers to persons aged 65 and over. It would be better if the term referred to age 60 and over, since Titles III and VII of the Older Americans Act define an older person as 60+, but U.S. Census figures for the 60+ population are not yet readily available. Profile was assembled by Staff and trainees at the Rocky Mountain Gerontology Center, University of Utah.
Life expectancy has increased greatly in the last thirty years:

Estimated average number of years of life remaining:

<table>
<thead>
<tr>
<th></th>
<th>At Birth</th>
<th>At 45</th>
<th>At 65</th>
</tr>
</thead>
<tbody>
<tr>
<td>1929-31</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(men and women)</td>
<td>59.2</td>
<td>25.8</td>
<td>12.2</td>
</tr>
<tr>
<td>1971</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(men and women)</td>
<td>71.0</td>
<td>30.3</td>
<td>15.1</td>
</tr>
<tr>
<td>(men)</td>
<td>67.4</td>
<td>27.4</td>
<td>13.2</td>
</tr>
<tr>
<td>(women)</td>
<td>74.8</td>
<td>33.2</td>
<td>16.9</td>
</tr>
</tbody>
</table>

Race:

Age distribution by racial origin (percents) as of July 1973

<table>
<thead>
<tr>
<th></th>
<th>All Races</th>
<th>White</th>
<th>Black</th>
<th>Other</th>
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<tbody>
<tr>
<td>Under 45</td>
<td>69.4%</td>
<td>68.3%</td>
<td>76.6%</td>
<td>78.8%</td>
</tr>
<tr>
<td>45-64</td>
<td>20.5%</td>
<td>21.1%</td>
<td>16.3%</td>
<td>15.0%</td>
</tr>
<tr>
<td>65 plus</td>
<td>10.1%</td>
<td>10.6%</td>
<td>7.1%</td>
<td>6.2%</td>
</tr>
<tr>
<td>(100.0%)</td>
<td>(100.0%)</td>
<td>(100.0%)</td>
<td>(100.0%)</td>
<td>(100.0%)</td>
</tr>
</tbody>
</table>

II. HEALTH

81% of the aged get along well on their own, even though 66% have one or more chronic conditions, diseases or impairments.

Older persons see doctors 50% more often (6.7 visits per year), have twice as many hospital visits that last twice as long, and spend 3½ times as much on medical costs than do younger individuals.

The average older American in Fiscal Year 1973 spent $1,052 for health care in comparison with $300 for the individual under 65.

Medicare covers only 40.3% of health care costs for the aged.

25% of all prescriptions go to the aged who make up only 10% of the population.

III. INCOME

Older persons have less than half the income of their younger counterparts, but they also tend to own more and owe less than persons under 65.

Nearly 1/3 of all aged households had less than $4,000 income in 1973 — that is less than $80 per week.
About 1/5 of the elderly live in households with incomes below the official poverty threshold ($2,130 for an individual 65+; $2,690 for two person family whose head is 65+)

The poverty rate among the aged minorities is twice that of whites.

Although the total number of poor is decreasing, the aged poor form a slowly increasing proportion of the population.

1/4 of elderly couples and 2/5 of elderly individuals depended almost entirely upon Social Security benefits for their support in 1967.

Food, housing, transportation, and medical care account for the bulk of expenditures for most older Americans. Typically, $4 out of every $5 goes for these four essential items.

IV. HOUSING

There is little good current information on housing and the elderly. However, according to the 1960 Census, 30% of all households headed by persons 65+ had housing that was dilapidated, deteriorated and/or lacking facilities, such as plumbing and electricity.

2/3 own their own homes and 80% of those are free of mortgage but the cost in time and energy for property taxes, upkeep and repair, makes continued ownership increasingly difficult.

36% of the average older person's budget goes to pay for housing costs — their biggest budget item.

400,000 to 500,000 living units could be sold to the aged annually if specifically designed for their needs. This number could jump to 800,000 if subsidies were available.

V. EMPLOYMENT

In 1972 about 16% of persons 65+ were in the labor force with concentrations in the following categories: (1) part-time; (2) agriculture; and (3) self-employment.

Under current Social Security guidelines, the retired worker is penalized for working after earning $2,400 per year — benefits are reduced by $1.00 for every $2.00 earned above $2,400.

VI. EDUCATION

As of 1972, more than 20% of the older population was functionally illiterate, having had no schooling or less than five years; 50% had not completed eight years of elementary education, 8% were college graduates.

SOURCES


Halamanidis, Val. Associate Counsel, U.S. Senate Special Committee on Aging, G-233 Senate Office Building, Washington, D.C. 20510.

Weg, Ruth. Handout used at University of Southern California, Summer 1974. Dr. Weg is a Professor at the Ethel Percy Andrus Gerontology Center, University of Southern California, Los Angeles, California.
<table>
<thead>
<tr>
<th>State</th>
<th>Number of 65+ Citizens</th>
<th>Percent of Total Population</th>
<th>No. Employed Males</th>
<th>No. Employed Females</th>
<th>Median School Years Completed by 65+</th>
<th>Median Income</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Full-Time</td>
<td>Part-Time</td>
<td>Males</td>
<td>Females</td>
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<tr>
<td>Colorado</td>
<td>187,891</td>
<td>8.5%</td>
<td>13%</td>
<td>8.8%</td>
<td>8.8 yrs</td>
<td>$4,606</td>
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<td>N. Dakota</td>
<td>66,368</td>
<td>10.7%</td>
<td>14%</td>
<td>10%</td>
<td>8.3 yrs</td>
<td>$3,899</td>
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<td>S. Dakota</td>
<td>80,484</td>
<td>12.1%</td>
<td>17%</td>
<td>12%</td>
<td>8.5 yrs</td>
<td>$3,750</td>
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<tr>
<td>Montana</td>
<td>68,738</td>
<td>9.9%</td>
<td>14%</td>
<td>8%</td>
<td>8.6 yrs</td>
<td>$4,187</td>
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<tr>
<td>Utah</td>
<td>77,561</td>
<td>7.3%</td>
<td>10%</td>
<td>17%</td>
<td>9.7 yrs</td>
<td>$4,652</td>
</tr>
<tr>
<td>Wyoming</td>
<td>30,204</td>
<td>9.1%</td>
<td>16%</td>
<td>9%</td>
<td>8.7 yrs</td>
<td>$4,200</td>
</tr>
</tbody>
</table>

*From the 1970 Census of Population, Bureau of Census, U.S. Department of Commerce. Region VIII includes Colorado, Montana, North Dakota, South Dakota, Utah, and Wyoming. This chart compiled by Mike Harding, Rocky Mountain Gerontology Center Gerontology trainee.*
V. PROJECT DESCRIPTION AND EVALUATION
Introduction and Project Goals

The Rocky Mountain Gerontology Center was one of ten regional gerontology centers funded by the Administration on Aging to conduct symposia for faculty and trainers who would be offering courses or short-term training in aging. The symposia were intended primarily for those who would be implementing and/or coordinating programs under Title IV-A2 training contracts from their state offices on aging.

The purpose of the symposia was to increase trainers' knowledge of gerontology, Older Americans legislation, and short-term training techniques. Resource persons were to include Rocky Mountain Gerontology Center (R.M.G.C.) staff, representatives from the Administration on Aging and the Senate Special Committee on Aging, and other consultants as needed.

Under the initial grant, two symposia were to be conducted around the topics mentioned. These two sessions were held on December 12-14, 1974 and January 16-17, 1975 (identical sessions). There were enough funds then remaining to hold one more workshop on June 21, 1975, which was entitled "Education for Aging".

The RMGC Symposia Coordinator felt that the project's intent could best be achieved by combining a variety of topics and methods so that for each segment of the workshop participants would be examining both content and process for possible use in their own programs.

Since the sessions were to be only 2-2½ days long, it was recognized that skill development was not an appropriate goal for the workshops and the focus must be on increasing the awareness of ideas, techniques and resources which might be of future value to participants in their training efforts.

It was expected that as a result of the Symposia participants would have:

1. Increased their knowledge and understanding of techniques for planning and implementing short-term training;

2. Increased their knowledge and understanding of selected problems facing the elderly, and legislative action passed or needed to deal with these problems (to include the Title IV-A training provisions of the Older Americans Act);

3. Increased their awareness of materials, content, and resources in gerontology.

Planning the Symposia

A. Agenda

In order to identify specific content for the workshops, telephone interviews were held with the directors or training coordinators of the state offices on aging, and a Pre-Registration Needs Assessment (See Appendix I) was sent to all persons identified by HEW Region VIII state offices on aging as having current or potential responsibility for training in aging. The needs assessment was limited by the fact that most of the states did not have their training plans fully developed and did not know who might be offering courses or training. Hence, a most basic
program planning function, the identification and survey of potential audience, could not be done thoroughly.

However, based on existing grant guidelines and available information, the Symposia agenda was designed to include the following: (See Appendix I for complete agenda):

Planning and Implementing Short-Term Training A Model for Short-Term Training
R. Connelly, Oregon State University
D. Hansen
Rocky Mountain Gerontology Center

... Needs Assessment/Objectives Setting
Phil Robinson
Brigham Young University

Evaluation Techniques
Connelly and Hansen

Role Play in Short-Term Training
S. Reese
University of Utah

Perspectives on Older Americans Legislation
Public Policy and the Aging.
D. Kilmer
U.S. Senate Committee on Aging

... Long-Term Care
V. Halamandaris
U.S. Senate Committee on Aging

Special Issues in Aging
... Planning Pre-Retirement Programs
G. Marsh
Rocky Mountain Gerontology Center

Community Resource Development
R. Van Orman
Rocky Mountain Gerontology Center

Advocacy and the Elderly

M. White
Rocky Mountain Gerontology Center

Legal Problems and the Elderly
L. Frankel
University of Utah

Introductions to Gerontology
M. White and D. Hansen
Rocky Mountain Gerontology Center

Materials and Media Fair - The best in gerontology.

RMGC Student Trainees

B. Site and Dates

After some debate on whether or not the Symposia should be held in two different locations so that participants would not have to travel a great distance, the RMGC staff decided that since the workshop would involve a comprehensive materials display, large amounts of training materials, a reception, lunch, and several other informal activities, the objectives of the Symposia could best be met by holding both sessions in Salt Lake City. A conference site was selected (Hotel Utah Motor Inn) which combined excellent facilities with proximity to central downtown sites. All participants received brochures on thing to do and places to eat.

The dates of December 12-14 and January 16-17 were selected as the best available times which could be arranged to fit everyone's crowded schedule. The December Symposium was 2½ days long, the last half day being a Saturday. Based on evaluations of that session, the January Symposium was shortened to a more intensive 2-day workshop which ended Friday evening.
As provided in the grant, RMGC paid travel and per diem expenses of persons approved by their state as being current or potential Title IV-A trainers. The Symposia were open to other interested persons on a space-available basis with the understanding that they would have to pay their own expenses. Two participants attended on those terms, including one from Oregon and one from California.

C. Training Materials

The Center was responsible under the Symposia grant for developing a set of training materials which would help participants with their program planning. The Symposia coordinator decided that these materials should be supplemental and referential in nature to expand the scope of information which could be covered in such a short session.

Participants first received a set of pre-workshop articles which they were to read before the session so that everyone would have one common starting point.

Included in the pre-Symposia mailing were:

1. Tentative Symposia Agenda and statement of objectives.


5. "The New Older Americans Act" by U.S. Senate Special Committee on Aging. From Developments in Aging: 1973 and January-March 1974, Chapter VII.

At the Symposia, participants received a training manual and several publications:

1. Training Manual Contents

(a). Resources in Gerontology
   Directory of Organizations and Publications
   Films on Aging
   Gerontology Bibliographies
   Demographic Profiles

(b). Resources in Short-Term Training
   Bibliography
   Program Planning Tool Kit
   Planning Educational Conferences
   Assessment and Evaluation in Continuing Education
   Simulation Games
   Helping Adults to Learn

2. Publications

(a). Developments in Aging: 1973 and January-March 1974. U.S. Senate Special Committee on Aging

(b). Older Americans Comprehensive Services Amendment of 1973. U.S. Senate Special Committee on Aging

A number of bibliographies, articles and brochures were also available at the Materials and Media Fair held on Thursday night of each session.

D. Student Research Assistant Component

The Symposia grant provided for the hiring of student research assistants to help with materials development and workshop implementation. This provision allowed trainees to be directly involved with an actual program and to contribute materially to its content. Ten research assistants were hired to:

110

121
1. Develop the gerontology bibliographies.
2. Organize and host the Materials and Media Fair.
3. Organize and host the Thursday evening reception.
4. Assist with workshop details such as recording, note-taking, setting up equipment.
5. Assist with compilation of Symposia evaluations.

Results

A. Participants, Program and Materials

The Symposia for Trainers in Aging were attended by 77 persons from all six states in HEW Region VIII as well as one person from Oregon and one from California. Twenty-three attended the December Symposium, and 54 attended the January session. Level of education and experience, plus current organizational affiliation, are shown in the tally below. (See Appendix IV for the lists of participants).

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<tr>
<th>Level of Education</th>
<th>Dec.</th>
<th>Jan.</th>
<th>Total</th>
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<tbody>
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<td>Bachelors or less</td>
<td>5</td>
<td>15</td>
<td>20</td>
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<tr>
<td>Post-Bachelors to</td>
<td>11</td>
<td>24</td>
<td>35</td>
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<tr>
<td>Masters</td>
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<tr>
<td>Ph.D.</td>
<td>5</td>
<td>12</td>
<td>17</td>
</tr>
<tr>
<td>Other</td>
<td>2</td>
<td>3</td>
<td>5</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td>23</td>
<td>54</td>
<td>77</td>
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<table>
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<th>Years Experience in Aging</th>
<th>Dec.</th>
<th>Jan.</th>
<th>Total</th>
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<tbody>
<tr>
<td>December</td>
<td>2.85</td>
<td>years average</td>
<td></td>
</tr>
<tr>
<td>January</td>
<td>2.1</td>
<td>years average</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>2.3</td>
<td>years average</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
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<th>Current Organizational Affiliation</th>
<th>Dec.</th>
<th>Jan.</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>College or university</td>
<td>15</td>
<td>29</td>
<td>44</td>
</tr>
<tr>
<td>State or local program on aging</td>
<td>6</td>
<td>15</td>
<td>21</td>
</tr>
<tr>
<td>Other</td>
<td>2</td>
<td>10</td>
<td>12</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td>23</td>
<td>54</td>
<td>77</td>
</tr>
</tbody>
</table>

On the pre-session questionnaire (See Appendix II), participants reported that they were looking forward to the Symposia “to a great extent” (4.1 average on a 5-point rating) and that their objectives in attending were to increase their knowledge about short-term training and gerontology. It seemed, therefore, that in general participant objectives paralleled the stated program objectives, which might suggest that workshop objectives were responsive to needs in the region, or that pre-workshop publicity was thorough and clear enough to attract only those with interest in stated workshop content. At any rate, few participants attended the sessions expecting content not on the program.

The agenda was presented largely as written, with some minor shifts in response to participant interests and with some adjustments from December to January. The changes made in the January agenda were primarily ones of tightening up the slack times and eliminating repetitious sections. Content remained the same and method seemed to vary enough, especially at the January Symposium, so that participants remained involved and interested.

Facilities were excellent, which contributed greatly to the Symposia’s success. Meeting areas were comfortable, well-lighted, well-equipped, acoustically good, and secluded from distractions. Hotel staff were outstanding in their cooperativeness and attention to detail. These points are mentioned to stress that physical facility is crucial to a good program. Skimping on environment only creates an unnecessary barrier to good training.

Interaction of participants was high due to several factors, most of which can be and were planned for:

1. Participants’ interest in Symposia content.
2. Participants staying in same lodging.
3. Trainers’ concern that participant comments and questions be integral to the sessions.
4. Multiple opportunities for informal interaction:

a. Daily pre-session coffee and rolls time (cost covered by participant-paid special Incidental Fee)

b. Morning and afternoon breaks.

c. Group lunch at nutrition site.

d. Wednesday evening informal get-together and rap session on Basic Gerontology.

e. Thursday evening reception and display.

f. Friday evening buffet at University of Utah (January session).

The training materials were extremely well-received, with numerous compliments on their usefulness and many requests for extra copies. RMGC also received requests for the materials after the Symposia.

A high point of both Symposia was the Materials and Media Fair organized and hosted by the RMGC trainees. Trainees compiled annotated bibliographies on the major topics in gerontology and also on film resources for gerontological materials. (Included in this volume). Students then organized the collection and showing of representative books, journals, simulations, and films in the field of aging. One trainee organized a display on organizations and their activities in aging.

Participants, many of whom were very new to the field, thereby had an opportunity to become familiar with the range of materials available. Guest speaker Dr. Howard McClusky said the Fair was one of the most comprehensive displays he had seen. The Center has since received numerous requests about materials and media, especially about the film "Peege" which was shown.

B. Participant Evaluations

Pre- and post-session surveys were done at both Symposia (See Appendix III). Participants also filled out a daily evaluation to give trainers ongoing feedback. Another evaluation device used was the "Speed Note", an idea taken from Alford as described in his article on "Assessment and Evaluation."

The Speed Note is a 5½ x 8” self-carbon duplicate sheet on which participants are asked to write down any suggestions, criticisms or requests that occur to them through the session. The Speed Note provides immediate feedback on details that might not be included in the other evaluations. The Speed Note was of great help in resolving mini-crisis and is highly recommended for workshop use, especially with large groups.

The questionnaire and evaluation forms were structured primarily around a 5-point rating scale defined as:

5 = To a very great extent
4 = To a great extent
3 = To some extent
2 = To a little extent
1 = To a very little extent

The return rate on the assessment device was 99% on the first day’s Background Survey, and 86% on the final day’s Evaluation. A more complete breakdown by session follows:

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>No. Returning Pre-Session Background Survey (first day)</td>
<td>23</td>
<td>54</td>
<td>77</td>
</tr>
<tr>
<td>No. Returning Final Evaluation (last day)</td>
<td>22</td>
<td>54</td>
<td>76 (99%)</td>
</tr>
<tr>
<td></td>
<td>15 (68%)</td>
<td>51 (94%)</td>
<td>66 (86%)</td>
</tr>
</tbody>
</table>

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Participants reported that their personal objectives in attending the Symposia had been met at close to the "great extent" level (average rating = 3.8 out of 5). They also felt they would be able to use Symposia information "to a great extent" (Average rating = 3.8 out of 5). They saw the workshop's objectives as being clearly stated (3.7) and largely met (3.8). Respondents felt that as a result of the Symposia they would be more effective as trainers "to a great extent" (Average rating = 3.9 out of 5). The ratings by session are:

<table>
<thead>
<tr>
<th>Session</th>
<th>Dec.</th>
<th>Jan.</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participant objectives met</td>
<td>3.9</td>
<td>3.8</td>
<td>3.8</td>
</tr>
<tr>
<td>Usefulness of Symposia</td>
<td>4.0</td>
<td>3.7</td>
<td>3.8</td>
</tr>
<tr>
<td>Extent to which objectives clear</td>
<td>3.6</td>
<td>3.7</td>
<td>3.7</td>
</tr>
<tr>
<td>Extent to which objectives met</td>
<td>3.9</td>
<td>3.8</td>
<td>3.8</td>
</tr>
<tr>
<td>Extent to which Symposia will help in being more effective trainer</td>
<td>3.8</td>
<td>3.9</td>
<td>3.9</td>
</tr>
</tbody>
</table>

Methods, speakers and the Materials Fair were rated overall as being useful "to a great extent" (Average rating ranged 3.6-4.1 out of 5), with ratings as follows:

<table>
<thead>
<tr>
<th>Measure</th>
<th>Dec.</th>
<th>Jan.</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Effectiveness of methods</td>
<td>3.7</td>
<td>3.6</td>
<td>3.6</td>
</tr>
<tr>
<td>Helpfulness of speakers</td>
<td>4.3</td>
<td>3.9</td>
<td>4.0</td>
</tr>
<tr>
<td>Usefulness of Materials Fair</td>
<td>3.9</td>
<td>4.1</td>
<td>4.1</td>
</tr>
</tbody>
</table>

The measures which are probably of greatest interest are the Before-and-After ratings which in a rough way indicate whether any change took place as a result of the Symposia. Self-ratings from both sessions on all three pre- and post-measures indicated substantial gain.

Participants felt that as a result of the Symposia their knowledge about Title IV-A training, short-term training, and gerontology materials increased. The before and after scores are:

1. Understand roles/responsibilities of Title IV-A trainer
   - Pre-Session: 2.5
   - Post-Session: 3.6
   - Change: Up 1.1

2. Aware of techniques for planning and implementing short-term training
   - Pre-Session: 2.7
   - Post-Session: 4.0
   - Change: Up 1.3

3. Aware of materials in gerontology
   - Pre-Session: 2.6
   - Post-Session: 3.9
   - Change: Up 1.3

On all three measures participants reported at least a one-point (on a scale of five) increase in their awareness, which strongly suggests that the Symposia fulfilled their purpose.

The overall evaluation for the Symposia was 4.1 on the following five-point scale (developed by Alan Knox, University of Illinois):

- 5 ( ) Really outstanding
- 4 ( ) Very Satisfactory
- 3 ( ) Average
- 2 ( ) Just Acceptable
- 1 ( ) Needs Improvement

C. Follow-Up Evaluation

Since the grant did not expire until June 30, 1976, there was time to do a six-month follow-up survey to assess the longer-term impact of the Symposia (See Appendix III for the follow-up instrument). Of the 77 surveys sent out, 42 were returned (55% response).

In general, the follow-up showed a slight drop in ratings. Of the ten follow-up rating changes, eight were negative or lower and two were positive or higher. Average change was .2

The largest drops were on measures that had to do with the usefulness of techniques or materials for training. Comments made it clear, however, that many of the lower ratings were a function of participants not having had responsibility for Title IV-A training subsequent to the Symposia. Many respondents still felt the workshop was a valuable experience, but they had simply not had the occasion to use the knowledge.

A summary of evaluation and follow-up ratings is given below (same 1-5 rating scale used):
D. Summary - Were Objectives Met?

Seventy-seven educators and aging services staff attended two Symposia for Trainers in Aging, the purpose of which was to increase knowledge about short-term training techniques, Older Americans legislation (with attention to the Title IV-A training provisions), and selected topics and materials in aging. According to self-ratings by participants on these three objectives, knowledge and awareness were increased by at least one rating point (on a 5-point scale) for all three measures. A six-month follow-up evaluation revealed slight drops in the ratings, but generally the same results held.

From written and verbal feedback, it appears that the Symposia were of interest and value to most participants. The question raised by the follow-up evaluation, however, is to what extent the Symposia were subsequently relevant to back-home responsibilities, since many respondents reported they had not had the opportunity to do much training. Perhaps states are not involving Symposia participants in their training programs to the extent anticipated, or perhaps staff development is taking other directions.

If those attending the Symposia are not in fact involved in back-home training, then the Symposia may have been premature (since most states did not have their training plans entirely developed) or else participant-recruitment was misdirected.

In order to correct for this possibility and to assure a continuing supply of well-trained trainers, it is recommended that a progression of sessions, similar to the Symposia, be designed specifically for: (1) Persons who are new to aging and/or short-term training (which has its own unique possibilities and problems) but who have specific training responsibilities in those areas; and (2) professionals already in aging who need to become more sophisticated in certain areas of gerontology and program planning.

The Symposia workshops conducted by RMGC in December 1974 and January 1975 might serve as models for the Beginning Trainers in Aging series, while a set of more sophisticated and focused sessions would be planned for those who needed to enrich their basic knowledge.

Education for Aging: A Life-Span Approach Workshop (June 21, 1975)

Since there were some monies left after conducting the sessions required under the grant contract, RMGC, with approval of the Administration on Aging, decided to hold a third session. This workshop was held in conjunction with the Center’s Summer Gerontology Workshops so that others would have a chance to meet and learn from experts brought in for the third Symposia program.

After considerable discussion and review of previous evaluations, the RMGC Director and Symposia Coordinator selected the topic of “Education for Aging: A Life-Span Approach.” The rationale for this choice was that education and training for aging need to be examined in a much broader framework than simply staff development if the problems of age are...
ultimately to be ameliorated. Therefore, a one-day workshop was planned for Symposia participants and other interested students, professionals and citizens.

The session's purpose was to examine goals, roles, and strategies which various institutions might take to prepare people of all ages for growing old and, indirectly, for working with the elderly.

In cooperation with Dr. Sue Harry of the University of Utah's Department of Education, the following program was planned and guest speakers recruited (See Appendix I for complete agenda):

Education for Aging: A Life-Span Approach
H. Mason Atwood
Center for Lifelong Education
Ball State University

Viewpoints on Goals, Roles and Strategies in Education for Aging

1. Elementary and Secondary Education
H. Mason Atwood

2. Higher Education
Melvin A. White
Rocky Mountain Gerontology Center

3. Retirement Education
Gary B. Marsh
Rocky Mountain Gerontology Center

4. Educational Programs for Older Adults
Leroy E. Hixson
Institute of Lifetime Learning
AARP/NRTA

Group Discussions

Fifty-eight persons from throughout H.E.W. Region VIII attended the June 21 session, which was held on the University of Utah campus. Participants included:

| 1. Symposia Participants (or representative from December-January sessions) | 15 |
| New letter professionals, students, citizens | 43 |
| 2. Organizational Affiliation |
| College or university | 15 |
| Aging programs | 23 |
| Students | 20 |
| 3. Level of Education |
| Bachelors | 20 |
| Masters | 9 |
| Doctorate | 9 |
| Other | 3 |
| No Response | 16 |

The workshop evaluation was designed on a different format from previous Symposia, primarily for experimental purposes. Respondents used the following rankings (See Appendix III for form):

YES! (= score of 4)
Yes (= score of 3)
No (= score of 2)
NO! (= score of 1)

Results for the overall session were:

Average Rating (n=42)

1. Participant objective met? 3.2
2. Satisfied with knowledge gained? 3.2
3. Speakers helpful? 3.3
4. Satisfaction with packets? 3.4
5. Afternoon discussion value? 3.3
6. Interest in follow-up workshop on Education for Aging? 3.3

Overall rating for the workshop was 3.94 (out of 5).

Participants felt that the afternoon discussions were of greatest value but that there was too much information and too little time. Although the workshop was specifically intended to cover education on aging for all ages, many participants' expressed interest was in educational programs for older adults. Hence, that segment was especially popular.
The number of positive comments far outweighed the negative, but some nagging doubts remain about what a successful program is. The topic of the "Education for Aging" Workshop was very broad, perhaps attempting too much for one day. Yet it is a pioneer topic where not much has been done. So, was it worth the criticism of "too broad a topic" to try to increase awareness and stimulate new thought?

The dilemma of program boundaries seems to arise continually and the experience at the Rocky Mountain Gerontology Center suggests that Mr. Lincoln's quip on the impossibility of pleasing all of the people all of the time definitely applies to short-term training.
VI. APPENDICES
APPENDIX I-a.

MASTER AGENDA

SYMPOSIA FOR TRAINERS IN AGING
ROCKY MOUNTAIN GERONTOLOGY CENTER
UNIVERSITY OF UTAH

December 12-14, 1974 and January 16-17, 1975
Hotel Utah Motor Inn - Salt Lake City

THURSDAY

8:30 AM REGISTRATION - Coffee - Juice - Rolls
Lower Level - East Building,

9:00 AM WELCOME AND INTRODUCTIONS (Room A)

Dr. R.J. Snow
Assistant to the President
University of Utah

Melvin A. White, Ph.D., Director
Rocky Mountain Gerontology Center

Ginger M. Walmsley, MSW, Coordinator
Symposium for Trainers in Aging

10:00 AM PERSPECTIVES ON THE OLDER AMERICANS ACT: STATUS OF TRAINING (Room A)

Val J. Halamandaris, Associate Counsel
U.S. Senate Special Committee on Aging

Rob Schween, Program Specialist
Region VIII (Denver) Office
Administration on Aging

10:45 AM Break

11:00 AM A MODEL FOR SHORT-TERM TRAINING (Room A)

Richard Connelly, Ph.D., Director
Gerontology Education Program
Oregon State University

David Hansen, Practicum Coordinator
Rocky Mountain Gerontology Center

12:15 PM LUNCH - "Field Trip" visit to nearby nutrition site
Horace Mann School, 233 West 200 North
1:30 PM  WORK GROUPS (Room A)
          Rich Connelly and Dave Hansen

3:15 PM  Break

3:30 PM  SPECIAL INTEREST SECTIONS:

1. Advocacy and the Elderly: How to's  (Room C)
   Melvin White

2. Community Resource Development  (Room A)
   Roy Van Orman, MSW, MPA
   Assistant Director, Community Service Programs
   Rocky Mountain Gerontology Center

4:30 PM  EVALUATION OF DAY'S PROGRAM - ADJOURN
          (Dinner: On your own)

6:00 PM  MATERIALS AND MEDIA FAIR (Rooms A and C)
          A showing of:
          Publications in the field of aging
          Simulation materials in aging
          Films on aging
          Coordinated by RMGC Gerontology Trainees

7:00 PM  PUBLIC POLICY AND THE AGING: A PROGRESS REPORT (Room C)
          Deborah Kilmer (December), Val J. Halamandaris (January)
          U.S. Senate Special Committee on Aging
          Washington, D.C.

8:00 to 10:00 PM  RECEPTION AND CONTINUATION OF MATERIALS AND MEDIA FAIR
          Reception sponsored by Student Gerontology Organization and RMGC.

FRIDAY

8:30 AM  Coffee, Juice, Rolls and Visiting  (Room A)

9:00 AM  NEEDS ASSESSMENT AND OBJECTIVES SETTING IN SHORT-TERM TRAINING (Room A)
          Phileon B. Robinson, Ph.D., Assistant Dean
          Division of Continuing Education
          Brigham Young University

10:15 AM  Break

10:30 AM  EVALUATION IN SHORT-TERM TRAINING (Room A)
          Rich Connelly and Dave Hansen
11:45 AM LUNCH - Free Time

1:30 PM SPECIAL INTEREST SECTIONS:

1. Role Playing as a Technique in Short-Term Training (Room C)
   Sherry Reese, MSW, Assistant Professor
   Graduate School of Social Work
   University of Utah

2. Planning Pre-Retirement Programs (Room A)
   Gary Marsh, MS
   Retirement Training Consultant
   Rocky Mountain Gerontology Center

3:00 PM Break

3:15 PM LEARNING IN THE LATER YEARS: CURRENT FINDINGS AND THEIR IMPLICATIONS: (Room A)

   Howard Y. McClusky
   Chairman of Educational Gerontology and
   Professor of Educational Psychology
   University of Michigan at Ann Arbor

4:30 PM FINAL EVALUATION AND FAREWELL

   Ginger Walmsley and Mel White

5:30 PM Bus arrives in front of Hotel Utah Motor Inn
5:45 PM Bus leaves Hotel Utah Motor Inn for Union Building, U of U

6:30 PM CANDLELIGHT BUFFET

   Panorama Room - Union Building, University of Utah

   Reservations due by NOON, Thursday, January 16.

9:00 PM Bus leaves Union Building for Hotel Utah Motor Inn

WELCOME
APPENDIX I-b.

AGENDA

EDUCATION FOR AGING: A LIFE-SPAN APPROACH (Ed 579R-4)
June 21, 1975 - 8:30 AM to 4:30 PM
University of Utah - 101 Behavioral Science Bldg.

AGENDA

A.M.
8:30 REGISTRATION

9:00 WELCOME AND INTRODUCTIONS
Dr. Shizuko N. Harry, Professor of Education, Univ. of Utah
Ginger M. Walmsley, Program Coordinator, Rocky Mountain Gerontology Center, University of Utah

9:15 KEYNOTE ADDRESS: "Education for Aging: A Life-Span Approach"
Dr. H. Mason Atwood, Associate Professor
Adult and Community Education
Director, Teacher Education Program on Aging
Coordinator, Short-Term Training in Aging for Indiana
% Ball State University, Muncie, Indiana

10:00 BREAK

10:15 VIEWPOINTS ON GOALS, STRATEGIES AND INSTITUTIONAL ROLES IN EDUCATION FOR AGING - Dr. Sue Harry, Moderator

  a. Elementary and Secondary Education
     Dr. H. Mason Atwood
  b. Higher Education
     Dr. Melvin A. White, Director
        Rocky Mountain Gerontology Center, U of U
  c. Retirement Planning
     Gaily Marsh, Retirement Training Specialist
        Rocky Mountain Gerontology Center
  d. Educational Programs for Older Adults
     Leroy Hixson, Dean
        Institute of Lifetime Learning (AARP/NTA)
        Long Beach, California

11:45 LUNCH - Student Union Building

P.M.
1:00 DISCUSSION SECTIONS (Meet in Room 101 for room assignments)

  a. Elementary and Secondary Education (Atwood)
  b. Higher Education (White)
  c. Retirement Planning (Marsh)
  d. Continuing Education (Hixson)
2:15 BREAK

2:30 DISCUSSION SECTIONS (Repeated. Participants will attend a different section).

3:30 SUMMATION FROM DISCUSSION GROUP LEADERS (Atwood, White, Marsh, Hixson) (5 minutes summary remarks from each).

4:00 WRAP-UP AND FAREWELL - Ginger Walmsley

***Please fill out and return evaluation form before leaving workshop***
APPENDIX II

NEEDS ASSESSMENT FORM FOR DECEMBER AND JANUARY SYMPOSIA

I am tentatively planning to attend: (Mark one)

___ Symposium No. 1 - December 12-14
___ Symposium No. 2 - January 16-17
___ Neither

I am ___ am not ___ a trainer or training coordinator involved with a Title IV-A training project.

I. RESPONSE TO TENTATIVE AGENDA:

A. "Introduction to Gerontology" Session:

I am ___ am not ___ interested in attending a special "Introduction to Gerontology" session the evening before the Symposium starts (Dec. 11 or Jan. 15). This session is planned for those with little or no background in the field of aging.

B. "Issues in Aging" Section Preferences

Please indicate which four areas you would like included in the agenda. Put a "1" by your first choice, a "2" by your second choice, etc.

*** Areas of greatest interest to most participants will be included in the agenda. ***

- Biology of Aging - Current Findings and Action Implications
- Psychology of Aging
- Sociology of Aging
- Death and Dying
- Employment and Age Discrimination
- Health and Mental Health - Problems, Progress, Trends
- Housing
- Income
- Legal and Consumer Protection
- Leisure and the Elderly
- Minority Aged
- Revenue Sharing and the Elderly - Who's Getting It and How
- Transportation - Problems, Progress, Trends
- Other Topics: (List)

C. "Special Interest Sections on Resources for Trainers" - Section Preferences

Instructions same as I.B. above. At Special Interest sessions information will be shared by a facilitator and other participants on resources which trainers might want to draw on for their training projects.
Advocacy for the Elderly
Community Resource Development
Discussion Techniques
Information and Referral Services
Planning and Evaluating Short-Term Training
Pre-Retirement Planning
Protective Services
Role Playing Techniques
Teaching Gerontology
Training Paraprofessionals
Transportation Services
Voluntarism - Developing Volunteer Services
Working with Minority-Aged
Other Topics: (List)

D. COMMENTS ON TENTATIVE AGENDA!!

Will this agenda meet your needs as a trainer? Yes ____, No ____ If not, why not? How should the program be changed?

E. Recommendations for Guest Speakers and Resource People: (Please list person, specialty, and where person can be located)

II. PARTICIPANT BACKGROUND INFORMATION: (You may send a vita in lieu of the items below, BUT make sure you include information requested in C, E, and F. Please type if possible.

A. NAME:
   TITLE:
   ORGANIZATION/AGENCY:
   Mailing address:
   - Phone Number: (Area Code: )

B. EDUCATIONAL BACKGROUND:

C. SPECIAL TRAINING, MAJOR OR DISCIPLINE (Please describe specifically any training in gerontology)

D. WORK EXPERIENCE:

E. YEARS IN FIELD OF AGING:

F. IV-A TRAINING RESPONSIBILITY: 124

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APPENDIX III - a.

BACKGROUND SURVEY FOR DECEMBER/JANUARY SYMPOSIA

THURSDAY A.M.

INSTRUCTIONS: Please circle the response that best describes your opinion at this point in time.

1. How much were you looking forward to attending this Symposium? 1 2 3 4 5

2. How much did you prepare to attend this Symposium? 1 2 3 4 5

3. How much do you understand the role and responsibilities of a trainer working under a Title IV-A training contract with the State Office on Aging? 1 2 3 4 5

4. How much are you aware of techniques for planning and implementing short-term training programs? 1 2 3 4 5

5. How much are you familiar with materials (publications, films, etc.) in gerontology? 1 2 3 4 5

6. How much do the objectives previously stated for this Symposium meet your objectives? 1 2 3 4 5

7. What are your major objectives in attending this Symposium? Be specific.
   a. 
   b. 

8. Check the highest level of formal education that you have achieved.
   1 ( ) less than 2 years of college
   2 ( ) Bachelor's degree
   3 ( ) Master's degree or equivalent
   4 ( ) Two or more years of graduate study
   5 ( ) Other ________________________ (Specify)

9. Number of years experience in the field of aging:

10. What is your current occupation:

11. Check the type of organization for which you currently work:
   1 ( ) College or university
   2 ( ) State or local agency on aging
   3 ( ) Other ________________________ (Specify)
THURSDAY AFTERNOON EVALUATION (Dec./Jan. Symposia)

INSTRUCTIONS: Please circle the response that best describes your opinion at this point in time.

<table>
<thead>
<tr>
<th></th>
<th>To a very little extent</th>
<th>To a little extent</th>
<th>To some extent</th>
<th>To a great extent</th>
<th>To a very great extent</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>To what extent are you satisfied with what you learned today?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>2.</td>
<td>To what extent do you believe the ideas and materials presented today will be of use to you in your own training efforts?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>3.</td>
<td>To what extent were the methods used today effective?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>4.</td>
<td>To what extent was the Perspectives on Older Americans Legislation (10:00 A.M.) useful to you?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>5.</td>
<td>To what extent was the presentation on a Model for Short-Term Training (11:00 A.M.) useful to you?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>6.</td>
<td>To what extent was the Work Group Session (1:30 P.M.) helpful to you?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>7.</td>
<td>To what extent was the Special Interest Section (3:30 P.M.) useful to you?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

Check section attended:

- Advocacy (White)
- Comm. Resource Development (Van Orman)

8. What was most useful to you in today’s program? Why?
9. What was least useful to you in today’s program? Why?

COMMENTS? SUGGESTIONS?

/126
FRIDAY FINAL EVALUATION (Dec./Jan. Symposium)

INSTRUCTIONS: Please circle the response that best describes your opinion at this point in time.

1. EVALUATION OF THURSDAY EVENING & FRIDAY SESSION:
   1. To what extent are you satisfied with what you have learned today? 1 2 3 4 5
   2. To what extent do you believe the ideas and materials presented today will be of use to you in your own training efforts? 1 2 3 4 5
   3. To what extent were the methods used today effective? 1 2 3 4 5
   4. To what extent were the following sessions of use to you?
      a. Lecture on "Public Policy and the Aging" (Thurs., 7:00 P.M.) 1 2 3 4 5
      b. Materials and Media Fair (Thurs., 6-7 & 8-10 PM) 1 2 3 4 5
      c. Needs Assessment & Objectives Setting (Fri., 9:00 A.M.) 1 2 3 4 5
      d. Evaluation in Short-Term Training (Fri., 10:30 AM) 1 2 3 4 5
      e. Special Interest Section (Fri., 1:30 P.M.)
         Check section you attended:
         Role-Play (Reese) 1 2 3 4 5
         Pre-Retirement (Marsh) 1 2 3 4 5
      f. Learning in the Later Years (Fri., 3:15 P.M.) 1 2 3 4 5

II. EVALUATION OF SYMPOSIUM:
   1. To what extent will you be able to use what you have learned at this Symposium? 1 2 3 4 5
   2. To what extent were your objectives met in attending the Symposium? 1 2 3 4 5
   3. To what extent were the Symposium objectives clear? 1 2 3 4 5
   4. To what extent were the objectives achieved? 1 2 3 4 5
   5. To what extent were the methods used effective? 1 2 3 4 5

Number _____
APPENDIX III - a. (cont.)

6. To what extent were the speakers helpful?  
   Number _________  
   1 2 3 4 5

7. To what extent do you now understand the role and responsibilities of a Title IV-A Trainer?  
   Number _________  
   1 2 3 4 5

8. To what extent are you now aware of techniques for planning and implementing short-term training programs?  
   Number _________  
   1 2 3 4 5

9. To what extent are you now aware of materials in gerontology?  
   Number _________  
   1 2 3 4 5

10. To what extent do you believe this Symposium will assist you in being more effective as a trainer?  
    Number _________  
    1 2 3 4 5

11. What have you learned at the Symposium that you intend to use in planning and/or implementing your own training program? Be specific.
   a. 
   b. 
   c. 

12. What was the single most effective learning experience for you at the Symposium? Why?  

13. What was the single least effective learning experience for you at the Symposium? Why?  

14. What is your overall evaluation of this Symposium?  
   5 ( ) Really Outstanding
   4 ( ) Very Satisfactory
   3 ( ) Average
   2 ( ) Just Acceptable
   1 ( ) Needs Improvement

COMMENTS: (Please use other side of page)
APPENDIX III - b.

Your Name ____________________________
(Optional, but we'd appreciate it)

Rocky Mt. Gerontology Center
University of Utah
Salt Lake City, Utah 84112

SIX-MONTH FOLLOW-UP EVALUATION
SYMPOSIA FOR TRAINERS IN AGING (Dec. 1974 and Jan. 1975)

Please help us with our project evaluation by answering and returning this evaluation as soon as possible. Thank you.

INSTRUCTIONS: Please circle the response that best described your opinion at this point in time.

1. To what extent have you been able to use what you learned at the Symposium? 1 2 3 4 5
2. To what extent do you believe your objectives were met in attending the Symposium? 1 2 3 4 5
3. To what extent do you believe the methods used at the Symposium were effective? 1 2 3 4 5
4. To what extent do you believe the speakers were helpful? 1 2 3 4 5
5. To what extent has the information available at the Materials & Media Fair been of use to you? 1 2 3 4 5
6. To what extent did the Symposium help you to understand the roles and responsibilities of Title IV-A trainers? 1 2 3 4 5
7. To what extent did the Symposium make you more aware of techniques for planning and implementing short-term training programs? 1 2 3 4 5
8. To what extent did the Symposium make you aware of materials in gerontology? 1 2 3 4 5
9. To what extent has the Symposium helped you in being more effective as a trainer? 1 2 3 4 5
10. What do you now believe was the single most effective learning experience for you at the Symposium? Why? 1 2 3 4 5
11. What do you now believe was the single least effective learning experience for you at the Symposium? Why? 1 2 3 4 5
12. What is your overall evaluation of the Symposium? 5 ( ) Really Outstanding
                                               4 ( ) Very Satisfactory
                                               3 ( ) Average
                                               2 ( ) Just Acceptable
                                               1 ( ) Needed Improvement
EVALUATION FORM: EDUCATION FOR AGING WORKSHOP (June 21, 1975)

***Please fill out at the end of the Workshop and return to Ginger***

NAME

1. Organizational Affiliation: (Check one)
   - College/Univ. Faculty
   - Aging Office or Program
   - Other (List):

2. Highest Level of Education Reached to Date: (Check one)
   - Bachelors
   - Masters
   - Doctorate
   - Other (List):

3. What was your objective in attending this Workshop?

Check one answer for each question:

4. Was your objective met? [YES/YES NO]

5. Are you satisfied with what you learned? [YES/YES NO]

6. Were the speakers helpful? [YES/YES NO]

7. Was the main address ("Education for Aging: A Life-Span Approach" 9:15 AM) informative? [YES/YES NO]

8. Were the VIEWPOINTS (Atwood, White, Marsh, Hixson - 10:15 AM) informative? [YES/YES NO]

9. Are you satisfied with the Workshop packet? [YES/YES NO]

10. Were the afternoon discussion sections valuable to you? [YES/YES NO]

11. Did you feel free to ask questions and seek clarification throughout the workshop? [YES/YES NO]

12. Were the lunch arrangements satisfactory? [YES/YES NO]

13. Would you be interested in a follow-up activity on "Education for Aging?" [YES/YES NO]

14. What is your overall rating of this workshop: (Check one).
   - (5) Outstanding
   - (4) Very Satisfactory
   - (3) Average
   - (2) Just Acceptable
   - (1) Needs Improvement

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15. What was most useful to you in today's Workshop?

16. What was least useful to you in today's Workshop?

17. COMMENTS PLEASE:

*** GLAD YOU COULD ATTEND! ***
APPENDIX IV-a

PARTICIPANT LIST
SYMPOSIUM FOR TRAINERS IN AGING
December 12-14, 1974

Robert Adams
University of South Dakota
Vermillion, South Dakota

David N. Bertils
Mary College
Bismarck, North Dakota

John P. Cagley
University of Northern Colorado
Greeley, Colorado

Kate Cusack
State Division of Services for the Aging
Denver, Colorado

William DeHart
Utah State University
Logan, Utah

Ernst-Ekkeberg
Mayville State College
Mayville, North Dakota

Dale Elhardt
Minot State College
Minot, North Dakota

L. Milton Erickson
Older American Program
Sioux Falls, South Dakota

Bobbie Gibbons
SOS Nutrition Program
Provo, Utah

Demont H. Howell
Snow College
Ephraim, Utah

Robert Klinkhammer
University of North Dakota
Grand Forks, North Dakota

John L. Owen
Utah State University
Logan, Utah

Catherine Porter
University of Oregon
Eugene, Oregon

George P. Rowe
North Dakota State University
Fargo, North Dakota

Ivanne Salazar
SPAN Outreach Program
Salt Lake City, Utah

Lynn Samser
Utah Division of Aging
Salt Lake City, Utah

Dallas Shafer
El Paso Community College
Colorado Springs, Colorado

Max Shirley
University of Northern Colorado
Greeley, Colorado

Jerry Skillman
State Aging Services Bureau
Helena, Montana

Lynn C. Smith
Utah Division of Aging
Salt Lake City, Utah

Robert Stoddard
Snit College
Ephraim, Utah

Michael Teague
University of Northern Colorado
Greeley, Colorado

Clarissa Ward
Legal Assistance Seniors Program
San Francisco, California
APPENDIX IV-b.

PARTICIPANT LIST
SYMPOSIUM FOR TRAINERS IN AGING
January 16-17, 1975

Jocelyn Allen
Area Agency on Aging
Casper, Wyoming

George E. Armstrong
Wasatch Front Regional Council
Farmington, Utah

Lucy Ascoli
Utah State University
Logan, Utah

Byron Benson
Dakota Wesleyan University
Mitchell, South Dakota

Dixie Boyce
University of Wyoming
Laramie, Wyoming

Dorothy Brown
Community Action Program
Lake Andes, South Dakota

Jan Christie
Community Senior Meals
Devils Lake, North Dakota

Evelyn Cichonski
Area Agency on Aging
Casper, Wyoming

LeRoy Day
Sioux Falls College
Sioux Falls, South Dakota

Larry Dewhurst
Council on Aging
Williston, North Dakota

Robert Day
Colorado Northwest Community College
Rangely, Colorado

Sandra Durick
First Planning-District
Watertown, South Dakota

Don Eden
Adams State College
Alamosa, Colorado

J.R. Fox
Jamestown College
Jamestown, North Dakota

Virginia Fraser
Loretto Heights College
Denver, Colorado

Duane Gall
Gray Panthers
Denver, Colorado

James M. Hammer
Aging Services
Cheyenne, Wyoming

Ron Hampton
Utah Division of Aging
Salt Lake City, Utah

Myrle G. Hanson
Northern State College
Aberdeen, South Dakota

Steven Heiner
Brigham Young University
Provo, Utah

Claire Kerr
Colorado Mountain College
Carbondale, Colorado

Loretta Knight
State Aging Services
Bismarck, North Dakota

L. W. Kreiner
University of South Dakota
Springfield, South Dakota

Annette Lopez
Aims Community College
Greeley, Colorado

Maysil Malard
Bismarck Hospital
Bismarck, North Dakota

Robert McCulloch
Western State College
Gunnison, Colorado

Karen Miles
AARP-NRTA
Salt Lake City, Utah

Alice Moore
Area Agency on Aging
Riverton, Wyoming

Catherine Newman
Office on Aging
Brookings, South Dakota

David A. Nichols
Huron College
Huron, South Dakota

Greg Pearson
Senior Nutrition Program
Denver, Colorado

Bob Peterson
Arapahoe Community College
Littleton, Colorado
APPENDIX IV-c.

PARTICIPANT LIST
EDUCATION FOR AGING: A LIFE-SPAN APPROACH
June 21, 1975

Lee Allen (RMGC Trainee)
University of Utah
Salt Lake City, Utah

Judy Allen (RMGC Trainee)
University of Utah
Salt Lake City, Utah

Garth Beacham
Snow College
Ephraim, Utah

Jerry Borup
Weber State College
Ogden, Utah

Docthy Brown
Office on Aging
Lake Andes, South Dakota

Brent Bryson
Texas Research Institute of Mental Sciences
Houston, Texas

Elizabth Brown (RMGC Trainee)
Brigham Young University
Provo, Utah

Janice Carlson (RMGC Trainee)
Brigham Young University
Provo, Utah

John P. Cogley
University of Northern Colorado
Greeley, Colorado

Patrick Costello (RMGC Trainee)
University of Utah
Salt Lake City, Utah

Paul B. Davis (RMGC Trainee)
University of Utah
Salt Lake City, Utah

Lloyd A. Diny
Utah State University
Logan, Utah

Don Eden
Adams State College
Alamosa, Colorado

L. Milton Erickson
Older American Program
Sioux Falls, South Dakota

George Fenstermacher (RMGC Trainee)
University of Utah
Salt Lake City, Utah

Andrea Friedi
RSVP
Great Falls, Montana

Jan Gabriel
Regional Aging Office
Fargo, North Dakota

Molly Gallagher (RMGC Trainee)
University of Utah
Salt Lake City, Utah

Tia Gibica
Aging Services
Boise, Idaho

Dellmar Gott
Dixie College
St. George, Utah

Myrl Hanson
Northern State College
Aberdeen, South Dakota

Gerard E. Hegstad
State Aging Services
Bismarck, North Dakota

Barbara Hermanek
University of South Dakota
Springfield, South Dakota

Jo Hildebrant
State Aging Services
Bismarck, North Dakota

Connie Hosick (RMGC Trainee)
Brigham Young University
Provo, Utah

Suzanne Izatt
RSVP
Farmington, Utah

Glenn Johnson
Senior Citizen Executive Assoc.
Salt Lake City, Utah

Rich King
State Aging Services
Helena, Montana

Cheryl Knoll
RSVP
Glenwood Springs, Colorado

Leon W. Kreiner
University of South Dakota
Springfield, South Dakota

Myron Kuropas
ACTION
Chicago, Illinois

Donna Lewis
RSVP
Anchorage, Alaska