

fortable and useful lifestyle. The Research Utilization Project is financed through Title IV, Administration on Aging, to the

Governor's Committee on Aging.

It is the first project of its kind in the United States related to aging.

INSIDE

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Governor Dolph Briscoe

We are proud to announce the first issue of the Governor's Committee on Aging publication *Research Utilization Report.*

The Research Utilization program is designed to assist administrators, practitioners, researchers and consumers with research on aging.

There are five primary objectives:

- 1. The identification of new information available.
- 2. Finding those who need and can benefit from the new information.



OPEN

SESSION

DO YOU KNOW ANY-

- —organizations, private or non-private, that might be interested in utilizing research findings?
- —ongoing research on aging? Who? Where? What?
- —completed research you are familiar with that could be utilized? Who? Where? What?

Your articles, opinions, reports on completed and ongoing research and community projects are welcomed. Please write the editor.

NASA ASSISTS STATE AGENCIES

On December 17, 1973, the Governor's Division of Planning Coordination held a planning session to review rural health care problems in Texas.

Twelve state agencies discussed their mutual problems and compiled a list of needs to be submitted to the NASA Technological Utilization Division of the LBJ Manned Space Center at Houston for technological assistance.

The meeting demonstrated the cooperative efforts and mutual interests between the state and national government in solving problems of its citizens.

The agencies represented at the meeting included: the Governor's Office of Comprehensive Health Planning, Texas Department of Public Safety, UT School of Public Health, UT School of Nursing, Texas Department of Community Affairs, OEO, Governor's Division of Planning Coordinator, Governor's Committee on Aging, and the Texas State Department of Health, Emergency Medical Services Division.

GCA ANNUAL MEETING

Open to all. Will be held March 25-26, 1974, at the Villa Capri in Austin, Texas.

INFORMATION SYSTEM

The Governor's Committee on Aging is developing an information and retrieval system for research related to aging.

This is a cooperative interagency effort between the Governor's Office of Information Services, the Texas State Department of Public Welfare and the Governor's Committee on Aging.

This fast, information retrieval system will be available to all state agencies, private organizations and individuals who have an interest in working with the aging.

BAPTIST PLAN FOR THE AGING

The Executive Board of the Baptist General Convention of Texas has created a task force study group to develop programs to meet the needs of the aging.

The task force met November 16, 1973, in Dallas under the direction of Dr. E. Eugene Greer, Program Planning Secretary.

Regular sessions of this group are scheduled to consider aging-related matters of more than 30 programs.

Those in attendance include Eula Mae Henderson, Darwin Farmer, Hazel Rodgers, Ed Laux, Robert Dixon, Bill Roe, Dr. James Basden and Anne T. Kohler, RU Project, Governor's Committee on Aging.

The task force is cooperating as part of the GCA-RU effort.

OPEN SESSION Continued on Page 20

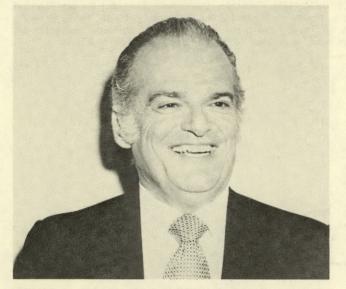
RESEARCH UTILIZATION FOR THE AGING Published quarterly by the: Governor's Committee on Aging Research Utilization Program P. O. Box 12786, Capitol Station Austin, Texas 78711

William T. Keenan, Executive Director Anne T. Kohler, Editor Marion R. Shofner, Assistant

An Equal Opportunity Employer



Better Services for Aging Through Research Utilization



HAROLD S. GELDON, Regional Program Director on Aging, Office of Human Development, Department of Health, Education and Welfare, Dallas, Texas.

*In 1965, the Older Americans Act was enacted by Congress and subsequently the Governor's Committee on Aging was designated as the State Agency on Aging to administer the provisions of the law within Texas.

The Older Americans Act provides Title III funds to State Agencies on Aging who, in turn, make grants throughout the State for services and programs for older citizens.

Title IV was established for Research and Development projects. The program has been in operation ever since the inception of the Older Americans Act—a little over seven years.

Dr. Marvin Taves in Washington, D.C., has been the officer in charge of the Title IV section of the Administration on Aging for these many years.

A little less than a year ago a meeting occurred in Puerto Rico. Attending were the project directors of the Title IV portion of the Older Americans Act, Central Office representatives and the regional program directors on aging.

The purpose of this two-day session was research utilization. Over the years a variety of research and demonstration projects had been funded.

Good results had come from the projects, but the matter of greater utilization of the research data was being sought.

At the end of the two day session . . . which occurred in December, 1972 . . . the regional people were asked to see what could be done in their regions to foster greater utilization of the research data from Title IV findings.

Region VI was fortunate. As a result of our concern, that of Washington, and GCA in Texas, a very good situation began to blend into a very positive effort.

As a result, an application was developed and submitted to Washington.

In July, the project was funded.

Region VI has the unique distinction of having the only project of this type in the United States.

A project that attempts on a systematic basis, to foster research utilization and develop a system at the State Office level that may be applied in other states and other regions.

We would like to see more activity along this line in Region VI.

This Research Utilization Program will include the dissemination of research information via a quarterly publication, through workshops, seminars, and conferences to administrators, practitioners, consumers and researchers with an interest.

If the RU model that is developed is successful, and we hope and feel it will be, we believe it will be of a beneficial nature to other State Agencies on Aging.

Of course, the whole intent of developing or attempting to develop an RU model is actually the result of a desire to provide better services and programs to older people at the community level.

^{*}Excerpts from a speech given in Austin, Texas, October 12, 1973.

ADVISORY COMMITTEE



DR. STANLEY BURNHAM, Director, Governor's Commission on Physical Fitness, Austin, is also a member of the Governor's Health Planning Team. Dr. Burnham is currently involved in physical rehabilitation research as related to the older population at the University of Texas, Austin.

DR. CHARLES M. GAITZ, Head of the Clinical and Sociological Research Division of Texas Research Institute of Mental Science, Houston. Dr. Gaitz is in the process of conducting several studies in the field of aging and has written numerous articles on the subject.





DR. CARL HALL, Associate Director of Family Economics at the University of Texas, Austin. Dr. Hall has a continuing interest in the problems of consumers and in the problems facing retired persons. He is a member of the National Consumers Advisory Committee, NRTA-AARP.

A. RAY JOHNSON, Chairperson of the Retired Members Affairs Committee, 1973 AFL-CIO State Annual Convention. Mr. Johnson was appointed by Governor Dolph Briscoe in 1973 to a six year term to the Governor's Committee on Aging.





D. NED LINEGAR, Regional Representative of the National Retired Teachers Association and the American Association of Retired Persons in Dallas. The combined associations provide many services for their members that include insurance, travel, home study courses, discount services, and a temporary employment program.



DOROTHY O'NEILL, Executive Director of Senior Community Services, Inc., San Antonio. Miss O'Neill administers and coordinates agencies both public and private providing services for the elderly on a cooperative basis.

DR. FRANCES PRICE, Assistant Professor of Rehabilitation Science Department, University of Texas School of Allied Health Sciences, Dallas. Dr. Price is currently involved in the development of a program in health care administration with an emphasis on gerontology and in review and survey of nursing home administration educational needs for North Texas area.





DR. JURGEN SCHMANDT, Professor of Public Affairs, LBJ School of Public Affairs, University of Texas, Austin. Dr. Schmandt is currently conducting a policy research project on SSI and Social Services in Texas. In 1972, he conducted a study of Texas Policies for the Aged (See page 12).

MRS. BERT K. SMITH, Executive Associate of the Hogg Foundation for Mental Health, University of Texas, Austin. Mrs. Smith has worked with many projects involving older people. Most recently she authored AGING IN AMERICA published by Beacon Press.





DR. HAROLD VIAILLE, Research and Demonstration Specialist, Social and Rehabilitation Service, Department of Health, Education, and Welfare, Dallas. Dr. Viaille's interest and experience is in the area of research development and research utilization.

The Researcher Speaks

RRI

Adaptations of Older Mexican-Americans: Some Preliminary Findings

During the summer of 1973 in a collaborative effort between the SRS Regional Research Institute of the University of Texas Health Science Center and Worden's School of Social Service, Our Lady of the Lake College, a survey was conducted of 200 older persons (123 women and 77 men) residing in San Antonio, Texas. Data suggested few were passively waiting for either the government or anyone else to come and make life easier for them.

The subjects were persons 55 years of age or older. Three-fourths of the persons interviewed lived in one census tract.

In 1970, 11,250 persons resided in the tract. Of this number 97.3 percent had Spanish surnames. Thirty percent were born in Mexico.

Almost 95 percent of the Mexican born have lived in the United States for 30 years or more. Over 70 percent have lived in San Antonio for more than 30 years.

Fifty-seven and 64 percent of the women and men, respectively, have obtained U.S. citizenship.

Almost 90 percent of the respondents reported they owned their own homes while 70 percent of the home owners reported having completed all payments on their homes.

Twenty-three percent of the homes were without indoor hot water. However, 95 percent had electric fans and 80 percent had telephones.

This implies that the ability to reach the elderly Mexican-Americans would not be too difficult.

The study showed that one-fourth of the women and about one-sixth of the men were *living alone*.

Two-thirds of the women reported present incomes of \$200 or less per month. Of the total women, almost 28 percent had \$100 or less income.

About one-fourth ranged between \$200 and \$300 per month and one-tenth had incomes in excess of \$300 per month.

Social Security was the single most important source of income for men as well as for women. Sixty-seven percent of the men and 60 percent of the women were receiving Social Security.



Sandra DeLeon, graduate student of the Worden School of Social Service interviews Mr. Jose Cortez, San Antonio, Texas.

The picture that emerges from the men and women interviewed is one of a hardy set of individuals, who despite meager beginnings and little education, sought to be self-sustaining with a surprising degree of success. The average age for the men was 69.8 years and the women 64.4 years.

Fifty-eight of the 200 had been hospitalized in the past two years.

This number represented 25 percent of the women and 36 percent of the men. The men also remained in the hospital longer than the women.

About one-third of the respondents reported that they had paid their own hospital bills and a fifth had their bills paid by health insurance.

The remainder had their bills paid by government sponsored programs.

Only one-fifth had obtained their hospital care in the city-county hospital, usually the primary source of such care for low income persons in the community.

The most surprising factor in this regard is that 80 percent chose not to go to the city-county hospital.

Most seemed to shun ideas of dependence on their children.

Children as "ideal" caretakers were mentioned by only 4 percent of the men and 6 percent of the women.

When asked if they would like to live in a nursing home, 65 percent of the men and 70 percent of the women said yes. Seventy percent accepted the idea because there was nothing else to do.

Although less than a fifth of the total sample voluntarily mentioned nursing homes, over twothirds accepted the idea of going to a nursing home as a possible solution, because nursing homes "take good care of people" or because the respondents did not want to be a "bother" to others.

The preliminary findings indicate that efforts should be made to find ways of helping people such as these to improve the quality of their lives where they are. Initial clues suggested that services organized on a large-scale, bureaucratic model may not be the best for these people.

These findings were not based on data from a *random sample* of older Mexican-Americans residing in San Antonio, and thus, generalizations are not warranted to any other population.

The research instrument, a 32-page schedule, is in both *Spanish and English* and includes inquiries on:

-educational and occupational experience

-marriage and family life

-housing and food

-kin and peer relationships

- —health—physical, mental and knowledge of maladies
- use and knowledge of health and welfare services
- -use of the mass media
- -attitudes toward youth
- -transportation

The initial design of the interview schedule was developed by Joseph M. Kaufert, Ph.D., and Gustavo M. Quesada at RRI.

Field supervisor for this study was by Juan A. Chavira and Ernesto A. Gomez.

The project was supported by a Social and Rehabilitation Service Grant and copies of the questionnaire are available upon request.

The instrument may be adapted to other areas with a high population of Mexican-Americans.

For further information, please write to:

Harry W. Martin, Ph.D. University of Texas Medical School 7703 Floyd Curl Drive San Antonio, Texas 78284 or Ernesto A. Gomez, Assistant Director El Centro Del Barrio Worden School of Social Service 411 Southwest 24th Street San Antonio, Texas 78207

Change in a Developing Field



DRUG INTERACTION

In an effort to assist the M.D. understand the effects of various drug interactions upon one another and their patient, Dr. Harry Lipscomb has turned to the computer for help.

The combination of heavy work schedules plus the ever growing list of drugs available to the physician have indicated this to be a felt need. This project was undertaken by Dr. Lipscomb, the Baylor College of Medicine and Mr. Arnold Muecke, computer analysist.

Currently there are 2,000 brand names and 1,300 generic names in the drug name dictionary.

The project is designed to actually detect the interaction of drugs and flag them for physician evaluation.

Each drug is then compared with all other drugs being taken and with the associated information in the patient's record.

If an interaction is detected between two drugs, a special report is written for the physician.

The drug interaction system relies heavily upon a data base which contains the drug names (generic, brand, compound, generic synonyms), class codes for each drug, interaction codes for each generic drug and a text message for each interaction possibility. The message (See page 9) contains the patient's number, essential information about the interaction (currently just the alpha numeric names of the two interacting drugs) and up to 150 characters of text information and severity level.

About one-third of the generic names, those listed in the PDR, have been classified. Class information is maintained on generic names only. Each drug (generic) can be put into as many as six separate classes. Classes can be based on structure or effect.

Each type of name belongs to a distinct type of code category, allowing the drug interaction module to retrieve the proper information from its files.

Such is the case with a compound drug which belongs to a special code category because it consists of two or more individual drugs—any of which might interact on an individual basis with other medications in the patient's records.

The need is for a larger and more diverse data base. Regular modifications will be needed.

The system which was developed can be easily adapted to a teleprocessing mode and the file structure is general enough to provide application to other fields of general pharmacological interest, i.e., I.V. interjections, contraindications according to diagnosis, etc.

At the present time, the drug interaction files do not contain contraindications according to diagnosis.

It is a simple process to include such information in a patient's record and in the main drug interaction file, but the large number of man hours required is not yet available to accomplish this.

For more information, please contact:

Harry Lipscomb, M.D., Managing Director Institute for Health Services Research Baylor College of Medicine 1200 Moursund Avenue Houston, Texas 77025

OFFICE OF THE MEDICAL DIRECTOR DRUG INTERACTION PROGRAM ST. ANTHONY CENTER

MM/DD/YY

PATIENT: **PHYSICIAN:** JOHN DOE JAMES SMITH

PATIENT #

PATIENT IS CURRENTLY TAKING 7 DRUGS. **PRN MEDICATIONS:** VALIUM DALMANE

TYLENOL DEMEROL CHLORAL HYDRATE PHENERGAN

REG MEDICATIONS:

PERI COLACE

INTERACTIONS FOUND:

- 1. VALIUM INTERACTS WITH DEMEROL. RESULTS:
 - (H) CONSCIOUSNESS DECREASED
 - (H) **RESPIRATORY DEPRESSION COUNTERACTED**

CARDIO VASCULAR DRUGS

- (H) ANALGESIC REQUIREMENT DECREASE
- 2. TYLENOL INTERACTS WITH CHLORAL HYDRATE. RESULTS:

 - (H) PAIN UNOBSERVED (H) SLEEP TIME NORMAL
- 3. DEMEROL INTERACTS WITH PHENERGAN. RESULTS:
 - (H) ANALGESIC EFFECT ENHANCED
 - (H) BLOOD PRESSURE DECREASED
 - (H) PAIN THRESHOLD DECREASED
 - (H) SEDATION

FREQUENCY OF OCCURRENCE BY NUMBER AND

PERCENT WITH RESPECT TO A DATA BASE OF 285 RECORDS

(100 PERCENT = 285 INDIVIDUALS)

CENTRAL NERVOUS SYSTEM DRUGS

	#'s	%'s
ANALGESICS ANTIPYRETICS		
DARVON	70	25
ASA	62	22
TYLENOL	29	10
ANTI CONVULSANTS		
DILANTIN	26	09
TRANQUILIZERS		
VALIUM	67	24
THORAZINE	33	12
MELLARIL	21	07
LIBRIUM	19	07
SEDATIVES & HYPNOTICS		
CHLORAL HYDRATE	35	12
DALMANE	25	09
PHENERGAN	25	09
(POSSIBLE USE)		
GASTO-INTESTINAL DRUGS		
ANTACIDS AND ABSORBANTS		
МОМ	95	33
MAALOX	24	08
ANTI-DIARRHEA AGENTS		
LOMOTIL	32	11
CARTHARTICS		
LAXATIVE (NON SPECIFIC)	36	13
DULCOLAX	34	12
ENEMA (NON SPECIFIC)	30	11
PERI COLACE	25	09

#'s	%'s
52	18
.22	08
ICE	
54	19
24	08
24	08
19	07
21	07
30	10
20	07
	52 22 NCE 54 24 24 19 21 30

OLDER TEXANS



Oak Cliff Tribune Dallas, Texas



Meals On Wheels Roll Again

The "Meals on Wheels" program of the Dallas Visiting Nurse Association begins at 7 a.m. daily at East Dallas Christian Church with supervisor Alice Grills and her staff preparing the food. The food is then taken to two sites—4606 Greenville, the Visiting Nurse Association, and 1617 W. Jefferson, the Oak Cliff Salvation Army Center. Senior citizen volunteers aid staff members in plating a total of 100 meals at the two sites for delivery by volunteers to the homes of those who need a hot meal for recuperation from surgery or chronic disease. As a result of equipment made possible for keeping the food hot and cold, 25 meals being prepared replace former TV dinners. Examiner McKinney, Texas

Lyman C. Robinson Conducts Special Drive-In Workshops

Lyman D. Robinson, Assistant to the Texas Director of the National Retired Teachers Association, with headquarters in Washington, D.C. has returned to McKinney after conducting Drive-In Workshops in Ft. Worth, Dallas, Paris and Tyler.

The Northeast Texas area, for which Robinson is responsible, consists of 47 counties including Tarrant and Dallas counties.

The National Retired Teachers Association is composed of former teachers and spouses and teachers in their last year of teaching who may become associate members. Associate members enjoy all the privileges and benefits of full membership except that they can not vote in organization matters and can not hold an office.

There are presently approximately 700,000 members in the National Retired Teachers Association. The Texas Retired Teachers Association is an affiliate of the national organization.

Mrs. Juanita Robinson, President of the McKiney Unit of the National Retired Teachers Association, accompanied her husband and acted as an assistant director of the workshops.



SENIOR CITIZENS SIT DOWN TO FIRST MEAL UNDER NEW FEDERAL PROGRAM ...400 oldsters turned out to participate in first meal

Sun Baytown, Texas

City To Provide Rides For Elderly Citizens

Pair Named To Governor's Aging Panel

AUSTIN (UPI)—Gov. Dclph Briscoe Thursday appointed A. R. Johnson of Arlington and reappointed Louise Massey of Monahans to the Governor's Committee on Aging.

Both will serve six-year terms to expire Aug. 30, 1979.

Johnson replaces Ida L. Kenny of San Antonio, whose term expired. Prior to his retirement, Johnson was a member of the International Brotherhood of Electrical Workers for 35 years and was president of the Longview Central Trade Council for six years.

Mrs. Massey has been honored as outstanding Texas club woman and as Monahans woman of the year The City of Baytown will begin a new service for elderly citizens who have no other means of transportation to see their doctor, go to the grocery or to the pharmacy.

A recommendation on the transportation service was presented by Mrs. Edna Gray, chairman of the Committee on the Elderly, Thursday night at the city council meeting.

Mrs. Gray said the city and committee have negotiated with the Baytown Ambulance Service to furnish this transportation at an estimated cost of \$700 per month.

The project will be financed with revenue sharing funds. The council recently allocated \$15,000 in revenue sharing funds for services to the elderly.

Cost for drivers will be \$351 a month: car rental \$135; liability insurance, \$30, and gas, oil and tires, \$200. The service will be limited to citizers of Baytown who must be at least 55 years old and meet qualifications of the screening committee.

It will be pre-scheduled service and limited to trips in Baytown.

Mrs. Gray said it may be possible to expand the program later but initially the committee felt that the most essential needs should be provided.

Using Data to Initiate Change



POLICIES FOR THE AGED: A Preliminary Blueprint

The Lyndon B. Johnson School of Public Affairs at the University of Texas was invited, along with other graduate schools across the nation, to participate in the study of the elderly initiated by the Alfred P. Sloan Foundation.

During the spring semester 1973 a group of second year students from the LBJ School under the direction of Dr. Jurgen Schmandt formed a task force on aging and developed a preliminary blueprint for Texas policies toward the aged.

The report is currently being prepared for publication.

This statement summarizes the contents and findings of the study.

The overall objective of the report is to provide information needed to develop a comprehensive statewide policy for the aged.

Section I of the report establishes a statistical foundation delineating the size, geographical location and ethnic characteristics of Texas elderly in order to provide policy-makers with some conception of the specially serious condition of the target population in the state.

The second section identifies the various needs of the elderly in order to prepare the ground for defining parameters for delivering services.

Section III examines discrepancies between needs and available program resources.

An analysis of the implications of HR 1 shows the need and provides possible justification for increased state involvement in the social service area at a time when federal government has assumed responsibility for cash assistance payments to the aged. The final and central section of the report discusses alternative delivery systems for meeting the needs of the elderly in a statewide and comprehensive fashion.

The objective is not to propose a definitive set of program alternatives, but rather to define the organizational characteristics of a statewide delivery system.

Three alternatives for program planning and implementation at the *state level* are analyzed:

- 1. A central state agency responsible for services and programs for the elderly;
- Extensions of the role of existing state agencies in dealing with the problems of the elderly;
- A regional approach for determining needs and setting priorities combined with technical assistance provided by a central state agency.

The report discusses advantages and disadvantages of these alternative approaches.

While no position is taken for or against a particular model, it urges the state to study its organizational structure for formulating and implementing policy for its older citizens.

Three reasons make such a reassessment timely and necessary:

- 1. The size of the elderly population poses a special problem in the State of Texas;
- 2. Social services for the elderly can be expected to expand more easily than for other population groups due to the somewhat less controversial nature to aid for the aged. It is also increasingly being realized that overemphasis on one service, institutionalization in *nursing homes*, has resulted in unsatisfactory and uneconomical problems.

 The role of the state is expected to become more active than in the past with a general shift of responsibilities from the national to state capitols.

This could take the form of incorporating a variety of federal problems in a comprehensive program of services for the elderly.

At the *local level* it is necessary to clearly distinguish delivery mechanisms for rural as against urban environments.

In rural areas a minimum effort is suggested which would be centered around the provision of adequate health care and transportation facilities to insure accessibility of health facilities.

In urban areas the creation of multi-service centers for the aged is suggested which would play a crucial role in providing new alternatives to institutional care.

Unlike earlier attempts at creating multi-service centers, it is suggested that the referral component be organized in such a way that actual delivery of services is insured and not left to the exclusive initiative of the service recipient.

Adequate transportation, once again, plays an important role in this respect.

Beyond this a variety of service needs to be available, so that a program needs to be tailored around the particular needs of individual applicants can be developed and reviewed regularly to assess success or failure.

For additional information, please write: Jurgen Schmandt, Ph.D. LBJ School of Public Affairs The University of Texas Austin, Texas 78712

Community Resources

Staying Young Thru Fitness



Maintenance of good health is important in the lives of senior adults.

"In many cases, individuals who have suffered hip fractures or hospitalization for illness or accidents are returned to active and meaningful lives more quickly when they have remained active and healthy," said Dr. Shelly E. Liss of the Rosewood Rehabilitation Hospital in Houston.

Recent research indicates, with increasing emphasis, that nutrition, physical activity and mental involvement retard the aging process and indeed may even reverse it.



One program, designed for senior adults, is the "Staying Young Thru Fitness" class at the Jewish Community Center in Houston.

The program was initiated by Dr. Liss on a visit to the Jewish Community Center when he saw the need for the senior citizens of that agency.



The object of the class is to improve the participant's agility, strengthen antigravity muscles and increase endurance.

Jewish Community Center

Combining his ideas with that of Sam Cohen, Director of Health and Physical Education at the Jewish Community Center, guidelines for a progressive exercise program was designed to improve the senior citizen's agility and to strengthen endurance.

The exercise program calls for strict monitoring and recording of the participant's physiological responses. Written permission is required from each individual's physician prior to enrolling.

The program includes warm-up exercises, breathing exercises, agility exercises, stand-up exercises, and step-up exercises.

The members meet every Monday, Wednesday, and Friday for one hour to be tested and given their exercise program for the day. They are to do these exercises daily at home.

Each week the program changes from stand-ups to step-ups and increases in activity until maintenance level is reached.

The program has been in operation at the Center for almost two years.

The program is part of the Center's overall plan for senior adults.

The guidelines developed at the Jewish Community Center are also used at the Jewish Home for the Aged, and the Rosewood General Hospital, Rehabilitation Center in Houston.

Each agency has made modifications to fit their own needs.

In nursing homes, the program can be modified for some patients to include bed exercise and sitting tolerance.

If motion is contraindicated or is impossible, another program based on static exercise can be considered.

The participant must be started at the level of exercise where strength and pulse responses indicate and may progress to the next level when pulse responses to exercise is within normal limits.

Exercises can be taken in a small space requiring available and minimal equipment.

Equipment to be used for step-ups should be a step at least 10" wide and 6" from the floor. A hand rail may be placed nearby for support if necessary.

A standard type arm chair with a hard level seat and a fairly straight back is desirable for stand-ups.

It is believed by many authorities that the adverse effects encountered by inactivity outweigh the chances taken with progressive mobilization.



The table used for safety and balance should be of such height as to prevent either pushing or pulling.

Cohen attributes popularity of the program, which draws from 20 to 25 men and women to the class three times a week, to several factors:

- They know the exercises and activity is good for them — they feel better, they walk straighter and they have more energy.
- 2. They have a great sense of camaraderie and many of them return because they have made friends there.
- 3. Most of all, they know we want them here.

The program has promoted socialization and enthusiasm in people who were leading a life of sitting and staring.

In this sense both physical and mental health have shown vast improvements.

The guidelines are available to groups interested in implementing a similar program in their community and may be obtained by writing:

Mr. Sam Cohen, Director Health and Physical Education Jewish Community Center 5601 South Braeswood Boulevard Houston, Texas 77035 Ph. 713-729-3200

 \star \star \star \star \star

ACTION ABSTRACT

Senior Citizens of Dade County, Inc.: Demonstration of Low Cost Meals for the Elderly

Reading Time - 1.5 minutes

This study, conducted in Dade County, Florida, tested the hypothesis that new social interaction, with a well-balanced Low Cost Meals program as its catalyst, would significantly improve social adjustment and combat isolationism among the elderly living in public housing and surrounding community.

Two hundred and twelve elderly persons took part in the program.

Questionnaires designed to elicit demographic and attitudinal data were administered before noonday meals served 5 days a week at senior citizen's centers.

The independent variable was the relative number of lunches eaten (that is, the number of times the opportunity to dine at a program center was taken advantage of).

Members who had social needs, those who were poor, and those who had no health problems had no higher degree of participation than others.

Ethnic membership or religious affiliation was not associated with a high lunch score.

In general, individuals with relatively high social participation, as evidenced by interest in outside news and high involvement in Senior Center programs and activities, had high lunch scores.

USAGE POTENTIAL: The project will interest public or voluntary social service agencies seeking to improve the health and social adjustment of the elderly by the provision of meals in group settings.

C. W. McLoud, Project Director Senior Centers of Dade County 390 West 2nd Street Miami, Florida 33218

RESEARCH LIBRARY



AA-0070 Nutrition and Aging: A Monograph for Practitioners. Gerontological Society, c/o Dr. Martin Loeb, School of Social Work, The University of Wisconsin, 1225 Observatory Drive, Madison, Wisconsin 53706, 1969.

AA-0358 Demonstration Program for a Citywide Nutrition Program for Chicago's Elderly. Daniel D. Howard Associates, Inc., 307 North Michigan Avenue, Chicago, Illinois 60601, March 1970.

Continuing Education

AA-0031 *The Project for Academic Motivation*. Winnetka Public Schools, 1155 Oak Street, Winnetka, Illinois 60093, Jan. 1969.

AA-0050 Seminars for Seniors: An Experiment in Educational Television for the Elderly. Twin City Area Educational Television Corporation, 1640 Como Avenue, St. Paul, Minnesota 55108, 1970.



Health

AA-0053 Physiological Effects of an Exercise Training Regimen Upon Men. Rossmoor-Cortese Institute, University of Southern California, Los Angeles, California 90007, 1969.





Food and Nutrition

AA-0014 Senior Centers of Dade County, Incorporated: Demonstration of Low Cost Meals for the Elderly. Senior Center of Dade County, 390 West 2nd Street, Miami, Florida 33128, July 1971.

AA-0016 A Food and Friendship Program—A Demonstration. Senior Citizens Activities, Inc., Temple, Texas 76501, 1969.

AA-0062 Nutrition and Health-Screening Services to the Aged. Associated YM-YWCA's of Greater New York, 33 West 60th Street, New York, New York 10023, September 1970.

Pre-Retirement

AA-0043 Drake University Preretirement Planning Center (Annual Report). Drake University, 25th and University, Des Moines, Iowa 50311, August 1969.

AA-0052A Preretirement Counseling, Retirement Adjustment, and the Older Employee. Graduate School of Management and Business, College of Business Administration, University of Oregon, Eugene, Oregon 97403, October 1969.

AA-5030 Planning for Retirement: How to Prepare and Present a Pre-retirement Program. Labor Relations and Research Center, University of Massachusetts, Amherst, Massachusetts 01002, 1970.

AA-503A An Inter-Union Preretirement Training Program. Labor Relations and Research Center, University of Massachusetts, Amherst, Massachusetts 01002, 1970.



Recreation

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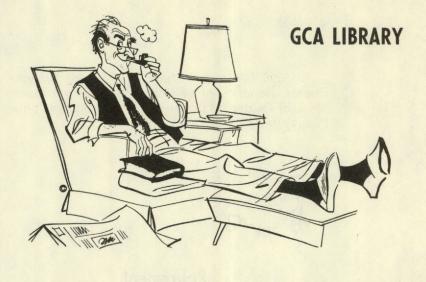
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For copies of the abstracts, please write: Mrs. Anne T. Kohler Research Utilization Program Governor's Committee on Aging P. O. Box 12786, Capitol Station Austin, Texas 78711



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-Recent Additions

PUBLICATIONS LISTED BELOW MAY BE CHECKED OUT ON A TWO-WEEK LOAN BASIS

- The Aging Consumer. by Sidney Margolius, Peter S. Barash, et. al., (Occasional Papers in Gerontology, No. 8) Ann Arbor, Michigan. The University of Michigan—Wayne State University, Institute of Gerontology. 1969. 54 p.
- Back to Work After Retirement. U.S. Department of Labor. Manpower Administration. Washington, D.C. U.S. Government Printing Office. 1971. 20 p.
- Basic Concepts of Aging: A Programmed Manual. By Thomas A. Rich and Alden S. Gilmore. Washington, D.C. Administration on Aging. 1970. 153 p.
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- *Employment Referral.* Administration on Aging. (Designs for Action for Older Americans). Washington, D.C. 1969. 4 p.
- Establishing Telephone Reassurance Services. By Sondra K. Match. (SOS-14) Washington, D.C. National Council on the Aging. 1972. 21 p.
- Food Guide for Older Folks. By Mabel A. Walker and Mary M. Hill. Washington, D.C. Agricultural Research Service. Consumer and Food Economics Research Division. 1972. 19 p.
- A Future for the Aged: Victoria Plaza and Its Residents. By Frances Merchant Carp. Austin, University of Texas Press. 1966. 287 p.

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Protective Services Project for Older Adults. DHEW. Social and Rehabilitation Service. Community Services Administration. Washington, D.C. 1971. 153 p.

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Toward a National Policy on Aging. Vols. I and II. Proceedings of the 1971 White House Conference on Aging, November 28-December 2, Washington, D.C. U.S. Government Printing Office. 1973.

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OPEN SESSION Continued from Page 2

BRAINSTORMING PROJECT

The UT School of Allied Health Sciences at Dallas held a *Brainstorming Session* November 15, 1973.

The theme of the session was "Unmet health needs for the elderly and chronically ill."

The program was a part of a developing health care administration program being developed by the University of Texas School of Allied Health Sciences where there is great emphasis on the entire area of aging.

Attending the meeting were Mr. Reagan Brown of the Governor's Office and Mr. William T. Keenan of the Governor's Committee on Aging.

The areas of concern included education, health maintenance, public and professional involvement, and funding mechanisms.

The program was coordinated by Dr. Frances F. Price, Assistant Professor, School of Allied Health Sciences, and hosted by Dr. John W. Schermerhorn, Dean, School of Allied Health Sciences.

TRIMS RESEARCH FORUM ON AGING

Simon Bergman of Tel Aviv, Israel, Deputy Director, Medical Care and Services, Malben American Joint Distribution Committee, was a speaker at the conference of Texas gerontologists at TRIMS October 29.

Mr. Bergman's topic for the conference was "Some aspects of Aging in a Forming Society."

Dr. Charles Gaitz, head of the clinical and social research at TRIMS, invited researchers from universities, social agencies and hospitals in Texas to discuss their studies and their implications for use.

Speakers at the conference included Dr. Walter Cartwright of Texas Tech University in Lubbock, Dr. Cora Martin and Dr. Leo Estrada of North Texas State University in Denton, Dr. Harry Lipscomb of Baylor College of Medicine, Anne T. Kohler of the Governor's Committee on Aging, Drs. Chad Gordon and Georges Antunes of Rice University, and Dr. Gaitz, Dr. Roy Varner, and Rosemary McCaslin of the TRIMS geriatric and gerontology staff.

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