



THE JACOB RADER MARCUS CENTER OF THE  
AMERICAN JEWISH ARCHIVES

*Preserving American Jewish History*

MS-603: Rabbi Marc H. Tanenbaum Collection, 1945-1992.

Series E: General Alphabetical Files. 1960-1992

Box 93, Folder 1, White House Conference on Aging, 1960.



WHITE HOUSE CONFERENCE ON AGING



January 9-12 1961

## Background Paper

on  
AMERICAN JEWISH  
**SERVICES OF RELIGIOUS GROUPS FOR THE AGING**

Prepared under direction of Committee

Religion and Aging

Co-Chairmen

Monsignor Raymond J. Gallagher  
Rabbi Marc H. Tanenbaum  
The Rev. William J. Villaume

Committee Members

Mrs. Marjorie M. Jones  
Mrs. Minnette B. Roberts  
Mr. Morris Sider

November, 1960



The views in this article do not necessarily represent the official position of the Federal Government of the United States.



It is our hope that these working papers will be of value to the State and local conferences which will be held in preparation for the White House Conference on Aging. They have been prepared under the direction of the committees of the National Advisory Committee, assisted by technical directors and consultants, with the hope of saving much time and duplication of effort at the local level when seeking background and factual information on the various problems of the aging.

National Advisory Committee for the  
White House Conference on Aging

A handwritten signature in cursive script that reads "Robert W. Kean".

Robert W. Kean  
Chairman

The Planning Committee on Religion offers this second Background Paper. In producing the basic paper, "Religion and the Aging", it was felt that the primary purpose of that work was one of setting forth basic philosophical concepts. What of the manifold services that are being offered to this group under the aegis of various religious groups? This second paper is an attempt on the part of the Planning Committee on Religion to complete the literature of this White House Conference on Aging by listing the many and varied services provided by churches and synagogues. It is hoped that the contribution of religion in these other areas will be duly considered by the discussants in other subject area programs.

Rt. Rev. Monsignor Raymond J. Gallagher

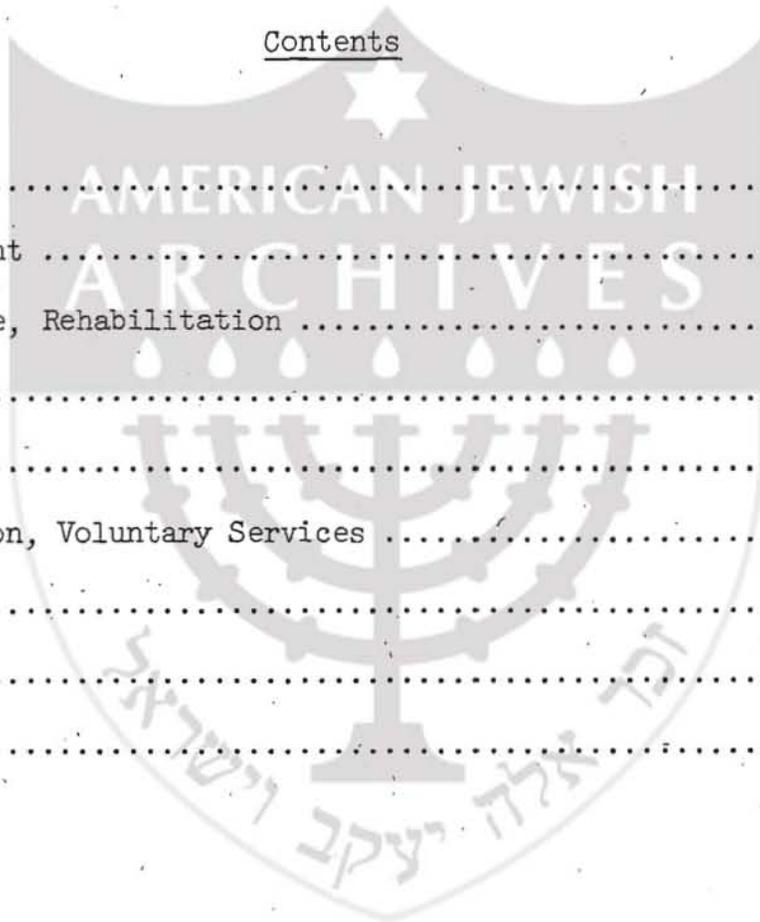
Rabbi Marc H. Tanenbaum

The Rev. William J. Villaume

Co-Chairmen  
Committee on Religion

Contents

	Page
Introduction .....	1
Income and Employment .....	3
Health, Medical Care, Rehabilitation .....	6
Housing .....	18
Education .....	25
Free Time, Recreation, Voluntary Services .....	30
Religion .....	34
Research .....	35
Organization .....	37



## WHAT RELIGIOUS GROUPS ARE DOING IN THE FIELD OF AGING

### Introduction

The rapidly increasing proportion of older people in the community is reflected in church and synogogue membership. Therefore, whether religious bodies think in terms of responsibility to their members or to the community, they must rethink their programs in terms of aging.

Like our overall culture, organized religion has, during the past decades, been amazingly youth-centered. Only very recently has there except for persons in institutions, been a focus on the problems and opportunities of age. Moreover, because of the varied and complex structure of American religious life, response has been spotty. Persons with a "concern" about aging have taken advantage of opportunities and budgets where available, in order to get at least some facets of the program under way; few religious groups, if any, would claim a well-rounded overall approach. Many of the things they are doing are actually pilot projects.

Yet in the total of American religious life a great deal is being done by and for the elderly, and the scope and implications of this work are beginning to emerge as a recognizable and rather well defined program. Religious leaders are, moreover, beginning to see the challenge of aging in its broader aspects. Spot programs which started with concern for recreation, social service, institutional ministries, housing, or counselling for the aged, have expanded in scope and merged. There are still, and will continue to be, many specialized and isolated programs, but these are increasingly seen in perspective and in relation to the overall demand which our changing culture lays upon men of good will, to speak out in the field of aging.

This paper is not a theological treatise; it is not an overall treatment of gerontology. It is not a statistical statement about church programs, nor a discussion of what the churches and synogogues ought to be doing. It simply aims to make available a brief description of some of the things religious groups actually are doing to meet this new challenge. We shall try to set forth some of the pertinent traditional services, which may be taking on additional significance in light of the present interest in aging. We shall also describe some of the problems of which religious groups have become aware, and some of the solutions that have been found satisfactory, or which are still in the experimental stage.

Extreme emphasis on youth; breakdown of the three-generation family living pattern; mobility of population; the growing importance of government in social welfare, have put their mark on religious institutions as well as community patterns. Yet basic to all religious thinking is the concept of the family--both the biological family and the extended family of the religious community, in both of which the older person is a respected member.

Much of the religion-motivated program concerning aging which has been carried on in the past decade has developed at the local level. There has been a good deal of unofficial interfaith cooperation, and

councils of churches and Jewish federations have frequently given valuable leadership. The grass-roots aspect of the movement has given it a freedom to experiment and move unhampered by restrictions (but also unaided by budget) into areas of need which differ widely with geography, proportion of seniors in the population, the housing situation, economic and cultural conditions, and other determining factors.

Like most movements in their early stages, the new senior program owes much of its effectiveness to individuals of devotion and vision who have not waited for organizational plans and budgets, but have accepted sponsorship on a pragmatic basis from whatever department offered shelter. Increasingly, however, the major faiths are recognizing aging as a horizontal type of program to which practically every aspect of their work is related. Religious leaders are also increasingly ready to call the attention of workers in other disciplines to religion's own special resources--some of which are unique--and to offer those resources to the community; in the same way most religious workers are not reluctant to refer persons to community resources for technical services and counsel.

Just as problems of aging have a remarkable similarity wherever they are studied, so too have the answers that are being tried out. The same programs seem to have sprung up simultaneously in New York, Ohio, Wisconsin or California, with, of course, embellishments that reflect local conditions. A similar statement would be true concerning programs of the different faiths and denominations, with diversity accounted for by polity, historic background, unmet needs, available personnel, budget, etc. We will refrain, therefore, from giving "credit" for any type of program or activity, except when there is some special reason which makes this information important. Every program is "unique" but there is space to mention only a few.

A survey of the actual programs of religious groups suggests the following as generally accepted approaches to helping the senior:

1. Strengthen the older individual as a person so he can cope with as many as possible of his own problems.
2. Counsel and guide him in relation to specific problems of aging: counsel to be based not on just good will but a competent understanding of gerontology, knowledge of available facilities, and a basically religious conviction.
3. Refer when indicated to community or private resources.
4. Set up church and synogogue programs--things the religious group is uniquely competent to carry out (including work in areas in which it feels it must supplement secular or civic programs, or start pilot projects).
5. Offer seniors avenues of service, either through their own religious organization or community programs.
6. Speak out--officially, through organizations, or through members, on behalf of needed care, legislation, or changed public attitudes.
7. Make available to older people the warmth, fellowship, fun and understanding which people of all ages crave.

We can see one or more of these approaches related to each field of interest to be considered in the various sections of the White House Conference. This will be evident as we comment on religious programs, using the headings of the Conference.

Unevenness in length of these comments under the different headings means simply that the religious groups have done much more in some areas than in others.

It might be well at this point for the person reading this paper as a whole to refer to the final chapter on "Organization". Our arrangement of materials tries to follow the White House listing of topics, for ready cross-reference by persons in other sections. It will be helpful, however, for the reader to get a quick glimpse of the frameworks under which the work concerning aging is carried on.

### Income and Employment

The acute problems of income and employment for the elderly challenge religious concepts of social justice. The National Council of Churches has taken note of the special needs of the elderly in its pronouncements on the Churches' Concern for Housing (1953) Public Assistance (1958) and Health Services (1960). The Synagogue Council of America adopted a forthright statement on old age assistance (1959) and the Council of Jewish Federations and Welfare Funds has taken strong public stands on the whole gamut of such issues in the field of aging.

However many persons of strong religious conviction have expressed concern that the religious groups to which they belong have not taken more official action, and have too infrequently stood up to be counted in regard to proposed national legislation to broaden the base of social security, provide adequate health insurance for the aging, make surplus food available to older adults, bar job discrimination on a basis of age, abolish the \$1200 limit on retirement earnings, provide more liberal old age assistance geared to cost of living, etc.

Informed concern has been obvious in speeches at conferences on aging and in the publications of the various religious groups, but to take specific action on that concern has been largely up to the individual. One reason for this is organizational--most churches at the national level are highly departmentalized, and in many denominations it is not yet evident who is carrying the overall responsibility for the program concerning aging. Within one denomination there may be a variety of programs for the aging--under social welfare, recreation, health services, etc., but often there is no one office or staff to consider the total needs of the aging person. Conferences on aging have been very vocal about what the churches should be doing, but usually do not control organizational power or budget to implement their proposed programs.

It is certainly true, however, that many individuals raised in the tradition of the Jewish-Christian faith, their convictions sharpened by these discussions, have written their congressmen and editors, or taken whatever personal action seemed indicated by the circumstances. There is a widespread feeling that the voice of religion, which spoke out against

child labor, slavery, genocide, for instance, must find a voice to speak out now, in legislative circles, against age discrimination, substandard housing, and inadequate health care for the aging.

There has been much unofficial discussion of these problems in church and synagogue study groups, senior centers, adult Bible classes. As the issues-- which came upon society so abruptly--are clarified and people become better informed, this grass-roots interest will increasingly become an official concern of religion.

Meanwhile religious groups have tried to help the older individual meet the economic problems of aging as they affect him personally.

Many churches and synagogues use older workers for paid part time jobs. At first there was a tendency to think in terms of rather menial and occasional work, and in some cases there was undoubtedly a temptation to exploit the older person. Religious groups have, however, come to realize that their own as well as the older person's best interests are served by allowing the senior to work at his highest capacity. By using the talents of retired business men, some churches have for the first time had top notch financial administration, construction supervision, landscape gardening, public relations. At the same time the clergyman has been freed for teaching, pastoral, and counselling responsibilities which are more in line with his own talents. This use of senior talents takes some rethinking of the personnel needs and budget of the church and synagogue but this use of senior laymen paid for specialized part-time work in areas in which they are thoroughly experienced, has been mentioned as a possible answer to the much-discussed ministerial shortages in many parts of the country.

Employment exchanges for older persons within the religious group have met with some success. Sometimes this has been in the nature of rather informal and direct exchanges within a senior circle--transportation in return for a sewing job, painting a room in return for garden work. In other cases--usually where a staff person is available to suggest contacts and keep records--more complicated patterns of exchange, but still under the barter system, are possible. The amount involved may seem trivial to the person with a full-time income, but to the person with less than \$1000 cash income (which includes over half our aging population) this opportunity to "swap" services means extras one would otherwise have to do without, plus a sense of one's own continuing usefulness.

Some groups have a capable executive who will actually take calls for older persons to work as gardeners, handy-men, baby sitters, and relay these calls to members, but this pattern at its best involves responsibilities which most groups much prefer to turn over to the State Employment Office.

Many centers report that through a staff or committee contact they keep in touch with the person in the state employment office who is an expert on work with older people or who carries this responsibility as a part of his assignment. This person (and there is such a person in most areas) sometimes holds job clinics at his office, or will come to speak to a group of seniors or senior counsellors, advising them as to possible openings in the community, how seniors might best try to sell their services direct to prospective employers, what things to do or avoid doing when approaching a prospective employer so as not to run afoul of prejudices he may have against the aging.

One council of churches in an industrial town saw to it that it had an energetic retired layman, well informed on labor relations, serving on the labor relations board, to speak up and report back especially on retirement policies, pensions, pre-retirement counselling, post-retirement jobs, etc.

Three Jewish homes in Chicago have been experimenting with a vocational service plan. From commercial firms they have obtained work of a suitable nature to be done on a contract basis and with no urgent time limits. Residents who want or need to work for either therapeutic or financial reasons can do so, putting in as much or as little time as seems advisable.

A center in northwest Chicago, concerned with giving special help to men over 50 on finding employment, served some 1300 persons over a three-year period, and actually placed 603. They are now planning a "sheltered workshop" with contract work for persons who cannot fit into the regular labor market.

Guided discussions in the senior fellowship often suggest ways of supplementing incomes by performing various tasks for oneself or others. Sewing, knitting, weaving, gardening, training pedigreed dogs or canary birds, bookbinding, leatherwork, making hand-decorated Christmas cards, writing for publication, practical nursing, putting food delicacies on the market, or handling a mail order business, can be learned in adult classes involving younger adults as well as retirees. For the retiree, however, launching a new project often involves personal investment, personality or interpersonal problems, lack of confidence, or overconfidence. For this type of help he may call on a church counsellor or on his peer group in the senior fellowship, in much the same spirit a younger person would talk such matters over with his immediate family.

Religious groups have been very aware of the need for retirement counselling--preferably a long time before the fatal day. Sometimes they have tried to organize pre-retirement groups in a church, or persuade the city's adult schools to give courses or a series of lectures. Many reports indicate, however, that it is hard to recruit for such classes. Those who probably need them most have an ostrich attitude toward their own retirement. Large industries often expect their employees to attend pre-retirement planning groups and invite a representative of the local council of churches, for instance, to act as a resource person.

Pre-retirement group counselling is frequently acceptable when integrated into the adult study and discussion programs of the church or synagogue, or into the program of the senior center.

Actually the religious groups feel that their own basic teachings concerning the worth of every human being as a child of God, respect for the older person as part of the ongoing stream of existence, the ethical admonition to care for the dispossessed and lonely, and the teaching of stewardship of time, money and talents--whether one's allotment be large or small, are all excellent pre-retirement training, which begins in kindergarten.

Even for the person with a reasonably adequate income, the sociological and psychological effects of forced retirement are very difficult in our work-centered culture. Many pastors make a point of assuring retirees that they are as welcome as always, even though their contribution must be radically curtailed. Sometimes churches suggest work that can be given in lieu of the larger contribution.

Since the wealthiest as well as the poorest of the congregation are likely to be found among the retirees, the pastor sometimes finds it desirable to talk about wills and legacies. Legacies of which the religious group is the beneficiary are not the only ones in which they may be interested. In one western city a prominent churchman is arranging to leave his palatial home, and a 25-year endowment, as a memorial to his wife, for use as a research center for the study of senescence, and for senior fellowship.

Some churches have recruited retired experts on business and economics to their list of church counsellors. In one church a retired tax investment expert will call on shut-ins on request, to help them with applications for old age assistance, budgets, transfer of funds or property, etc. In another church a retired investment counsellor has become so interested--through church work--in the financial aspects of aging, that he is writing a pre-retirement book on the subject.

A study done in several Catholic parishes of large cities indicated that for the most part, Catholic older people live with, or closely related to, other members of the family, and that

"It would be difficult to find specific problems of the aging in these parishes that could not be handled by their own members, including the clergy, and existing parish organizations, with perhaps some modifications. When many of the respondents said they felt something more should be done for older people, they probably meant that their existence in the community should be recognized. Certainly their physical needs were not great compared to the general lot of mankind." (The Aging of Three Parishes--National Conference of Catholic Charities 1957.)

Persons who made the survey admitted, however, that this picture was far from being typical of the overall picture of aging. It was suggested that persons living within the protection of a religious group are, for many reasons, not as afflicted as the unattached person in the community, and that the religious groups will increasingly be looking at economic problems of aging from the standpoint of state and national legislation to make a just and adequate economic pattern possible for all older people.

#### Health, Medical Care, Rehabilitation

Surveys indicate that for many older people the church and synagogue and their related programs provide the one consistent activity outside the home. The physical and mental stimuli of regular attendance, the friendship and fellowship of the religious community, the knowledge that a person is missed if not there, the expected visit or phone call if absent, are the best sort of preventive treatment for the person tempted to "let down" as he grows older. This is particularly true of the person living alone.

Many pastors, aware of the problems of aging, try to add something to every sermon which will bolster the mental health of the aged in the congregation or listening over the radio. Family programs, use of older people for all sorts of volunteer work, the adoption of grandparents by Sunday school classes or scout troops--these are all incentives for the older person to stay on his feet and keep functioning.

The therapy of belonging to a senior group connected with the church or synagogue, especially one which under intelligent leadership interprets its function as "re-creation not wreckreation" often brings astounding results. More specifically, fellowship groups often have lectures, movies, and discussions on the health and safety problems of the older person. Lecturers from the heart, cancer, T-B or mental health agencies are almost always popular. Sometimes younger (mid-age) groups are invited--a subtle form of pre-retirement counsel. Frequently such lectures result in members of the group taking up a work project on behalf of the organization whose work is presented. In one church, a graduate nurse, herself retired, volunteers to counsel with older shut-ins or their families about health care, mental hygiene, diet, etc. In another church a senior group maintain a "library" of sick room equipment--a hospital bed, wheel chair, bed pans, canes, etc.--to loan to older people who need them.

Many churches have lists of doctors who will give special attention to older people living alone or unable to pay. Most religious organizations have someone on their staff or board who can advise in an emergency about hospitals, nursing homes, funeral arrangements..

In New York a volunteer nursing service, established under the sponsorship of the Archdiocesan Council of Catholic Nurses, to aid the sick and infirm, gives a great deal of help to older people in their homes.

The idea of "friendly visiting," traditional in the churches, takes on new significance in relation to our new picture of aging. In Judaism, friendly visiting is considered a religious duty--"bikkur cholim". The "Code of Jewish Law" asserts, "He who visits the sick frequently is praiseworthy. . ."

The concern of friends, and their practical help, can often tide the older person over an illness and get him on his feet again--the best kind of therapy. As he becomes older and his contacts more limited, this friendly visiting from the people of his religious fellowship takes on added importance. It is, moreover, impossible even to estimate the extent to which religion-motivated visiting and informal help to older people is going on in every community. This was one of the points brought out in the much-discussed survey of urban Catholic parishes in the Mid-west. (See Social Services.) There is apparently far more family, neighborhood and religious concern than the skeptics know about. But this does not mean that it is sufficient to solve all the problems of the aging.

In the larger churches and synagogues, visiting the sick is usually put on some sort of an organized basis, especially for the home-bound or chronically ill. Each group has its own system of reporting and calling. This is often in the hands of trained lay people. In the Catholic Church the Dominican Sisters are especially devoted to this ministry. In churches where there is a senior fellowship, they often accept keeping in touch with

their own members as a responsibility, reporting to the pastor or the person he designates. In some churches calling on the home-bound is assigned to the deacons and deaconesses.

Choirs and drama groups often visit homes for the aging on holidays, when those without relatives to visit are especially lonesome. A radio technician records sermon, music, sometimes an entire worship service, and makes copies of the tape available to his denomination's home for the aged. Flowers from the church services are taken to the home-bound.

Religiously oriented seniors themselves often have a strong service motivation and take special satisfaction in working with the sick or incapacitated. Senior groups like to plan programs for hospitals and homes. Individuals take non-ambulatory people for short trips in their cars, sit with the bed-ridden while members of the family get out for some air or to shop. Senior volunteers help in hospitals as grey ladies, feeders, clerical workers. One group of volunteers from the city's churches has taken special training to help with older people in a municipal psychiatric hospital. A group of older church women organized a volunteer homemaker service, which the city later took over and made a community function.

Showing their concern for the health of the aging in another way, religious groups and individuals have taken note of legislative matters. Many were interested in the Hill Burton Bill, which has made more adequate health facilities available to so many seniors. They have informed themselves on the urgent need for adequate health insurance and have suggested that groups and individuals speak out on proposed measures and write their congressmen their convictions. They have studied the problem of the high cost of drugs, and bills calling for additional rehabilitation and research facilities.

The Oakland Council of Churches recently officially endorsed, worked for, and recommended strong support from the religious bodies of the community for a State of California bill which would provide funds for psychiatric treatment in local hospitals, thus making it possible for many borderline older cases to receive help, yet remain in their own homes, instead of being transplanted to state hospitals.

Social action groups in councils of churches often maintain a watchdog operation in connection with community health services. When a county agency, making a bid for votes as champions of economy, proposed moving all persons-receiving old age assistance from scattered private nursing homes to a central facility, church councils spread the word that the proposed housing was completely unsuitable, isolated, had poor transportation and was far from any adequate labor supply. This "back to the poorhouse" movement did not get very far.

Senior fellowship groups have warned their members about fraudulent practices, "quacks", the fine print in insurance policies, the funeral racketeers, and have urged them to pass this information on to others. They have propogandized for periodic health checks and early diagnosis, heeding safety rules and diet regulations. They have distributed reliable information as to how medical, home nursing, psychiatric, dental or foot care, homemaker service, etc., can be obtained.

Turning to the more formal manifestation of religion's concern for health, we find that many hospitals have been founded under religious auspices. These hospitals are not, as a rule, designated as for older people, but older people fill about half the beds. Some have chronic illnesses; a great many are mentally disturbed. Too many are designated as "terminal cases." With lengthening life span, but without the hoped-for breakthrough in the special problems of aging, it seems as if the acute shortage of hospital beds will continue to increase.

Religious groups also maintain nursing homes for older people not yet needing full hospital care. In many such institutions there is now infirmary service to take care of short term illnesses; also, increasingly, social work, therapy, dental and other related services. The shortage of hospital beds is turning more and more "Homes" into "nursing homes" which approach being hospitals for the chronically ill.

Out of various church conferences involving institutional care of the aging, comes this general strategy:

1. Amplify community services (visiting nurse, homemaker, etc.) which will enable well ambulatory older persons to stay longer in their own homes.
2. Provide more care and nursing services in the homes for the aged to keep residents from having to go to the hospitals.
3. Set up more all-purpose facilities where various degrees of service are available, to make moving from one type of care to another less drastic.
4. In both hospitals and Homes provide more case work, counselling, chaplaincy service, remotivation, rehabilitation, to help people move back, as quickly and permanently as their physical condition allows, to normal conditions of community life.

Religious groups are concerned with this whole pattern, both as it relates to the aging and aged who are in institutions and the 90% who are leading reasonably normal lives in the community. The medical profession have been very vocal in agreeing that programs of the churches and synagogues for aging can do much to keep an older person functioning happily and usefully in a normal community pattern, instead of becoming a long-drawn-out "terminal case" in a hospital bed.

Statistics about hospitals are not much use unless we go into the matter far deeper than we can in this survey. We know that the 65-plus population require two or three times as much hospital care as the population as a whole, but that their incomes are only one third as much as the average. A U.S. Public Health Service report (1959) on the shortage of civilian beds in the country's hospitals reveals that 413,000 more beds for mental patients and 261,000 for chronic patients are essential--most of them, presumably, for older persons. We also know that two out of three of all persons over 65 have no health insurance and that most of the policies they have are inadequate; also, that of 1000 people "well" at 60, 25% will require major medical attention within 5 years; at 70, 40% will require such care within 5 years. Many older people will not ask for

the care they need--rather than just use up their savings, they will prefer to take a calculated risk on dying. The religious groups of the country are well aware of the problems, but do not see that filling the "homes" with hospital cases, and keeping the ambulatory in the community, is a final answer, especially since we also have a drastic shortage of both housing and social workers in the community.

The Protestant churches maintain some 600 hospitals and 700 homes for the aged. The United Presbyterian Church General Assembly Report for 1959 lists 60 health and hospital services, including the huge 1500 bed center in Manhattan, and another large center being built in California. The Methodists list 75 hospitals across the country. These great denominational hospitals, and those of most other Protestant denominations, make no restrictions as to admittance.

The eight Lutheran bodies in the National Lutheran Council say their 128 homes with beds for 8,866, tend more and more to admit the chronically ill; 20 homes under construction to care for another 1000 older persons, have the chronically ill as a major concern.

In every Jewish community of 30,000 except Washington, D. C., there is at least one hospital under Jewish auspices; 76 such hospitals are listed in the 1958-59 Directory of Jewish Health and Welfare Agencies. About 25% of the care given is free to the patient, though cost is often reimbursed in part by government agencies. To receive such reimbursement, the hospital must be "non sectarian" in its admission policies. Kosher food is served to those who observe dietary laws.

The Social Work Year Book (1960) lists the Catholic Church as having 1,147 "hospitals and allied services"--a verbal concession to the fact that under present conditions it is almost impossible to know just what to call certain health facilities. This service represents 170 million days care in a year, perhaps half of it for aging persons. 68% of the hospitals give out-patient care. A number of Catholic religious communities are devoted exclusively to institutional care of the aging. These include the Little Sisters of the Poor, the Carmelite Sisters for the Aged and Infirm, and the Sisters of Charity of Providence.

Realizing that it is often difficult for older people to make trips to the out-patient department of a hospital, some Catholic health agencies have undertaken to reach out into their homes. The Dominican Sisters of the Sick Poor provide home nursing service to the older Catholic residents of many cities. At St. Mary's Hospital, Rochester, Minn., nurses working under hospital direction go out to homes in a sort of hospital extension arrangement; the hospital takes responsibility for nursing services and for programs of homemaking, health education, counselling.

### Family and Social Service

The Social Work Year Book pays tribute to the fact that religious conviction has motivated much of our American social concern. Even in welfare-oriented states, where the government assumes an increasing load, religious organizations feel a residual responsibility which may take the form of

direct aid to individuals outside established patterns  
supplementary or emergency aid  
referral and follow-up  
concern and fellowship to supplement state aid  
pressure for adequate state aid, through legislation and publicity  
education of members of the community to their social responsibility  
a watch-dog role as to community services, program policies, etc.

All this is applicable in the field of aging.

Because of the displaced position of the aged and aging in today's society, and because of people's lengthening life span, social services on their behalf--including services carried by religious groups--are bound to increase. An awareness of this responsibility is evident in denominational and interdenominational programs and staff appointments at the national level. The church and synagogue feel that they are in a special position to see the older person in the totality of his needs, and either give or find the help, through whatever channels are available, to restore and preserve his total personality.

The sociological and theological emphases on the human family and on the admonition to "love thy neighbor as thyself" are common to all our major faiths, but as related to present day problems of aging, this common concern manifests itself in various ways.

#### Protestant

The National Council of Churches (whose membership represents 70% of American Protestants and Orthodox) made a survey in 1954 which showed some 4000 Protestant health and welfare agencies and institutions, serving 17 million people annually; they employed 200,000 full time workers including 37,500 registered nurses, 26,000 physicians and 14,400 social workers. (Social Work Year Book 1960.) An increasing proportion of this total program is on behalf of the aging. The First National Conference on the Churches and Social Work (Cleveland 1955) devoted one section of their program to aging. The National Council of Churches now coordinates the concern of its different departments and denominations in the field of aging through the N.C.C. Department of Social Welfare.

In 1955 the General Council of the Protestant Episcopal Church sponsored a 4-day conference on aging under its department of Christian Social Relations. A staff member has recently been added to this department with nation-wide responsibility for concerns of the aging in that denomination.

The United Church of Christ also has an executive for work with the aging under the Department of Christian Social Relations and the Council for Christian Social Action. They held a conference on aging in November 1959, and devoted their January issue of Social Action to aging.

Lutheran churches have, typically, emphasized family and parish responsibility. Most of the churches affiliated through the National Lutheran Council have stressed local casework to help older people stay in their own homes and churches. The Laymen's League (Missouri Synod) have urged the use of older people as volunteers in work for the program of the church itself. In regard

to their Homes for the aging, they emphasize that shelter and food is only the beginning--good social work and religious programs are essential.

The Church of the Brethren, also, through their General Brotherhood Board, have called attention to the fact that the vast majority of their older people are not in Homes for the aged, but in the homes and communities where they have lived and in churches they have attended right along. It is here, if anywhere, they say, that the aging require welfare services, and the local church should be responsive to their needs.

The Southern Baptists speak of aging as primarily a Christian Family concern, and look to that department, nationally, for program suggestions and guidance.

Disciples, at the national level, have been exploring secular data to discover trends and resources in the fields of social welfare, recommending to local churches attention to fellowship, housing, mental health, economic problems. Part of their national program is to hold exploratory church conferences on aging in "type situations"--a medium-sized city, a small town, etc.

The Evangelical and Reformed Church (now United Church of Christ) arrived at the statistic that in their average congregation of 1500, there would be some 200 people (mostly older) living alone. They urged local churches to consider these persons at least proportionately, as they made up their programs and budgets.

The Methodist Church has made a great deal of the social service possibilities related to the Golden Age Clubs which have developed in many of their churches across the country. They have given thought and leadership to making these groups a positive and helpful experience in the lives of older people--not just a way for them to pass a leisure afternoon. The Methodist Church has a staff person with an overall responsibility for aging under its department of Christian Education for Adults.

The Council on Christian Social Progress of the American Baptist Convention, concentrating, as expected, on action in the local community, asks Baptists to ask themselves four questions:

1. What kind of older people are there in your church?
2. How can you increase the social and spiritual ministry of your church to its older members?
3. What is your community's program for the aging?
4. What is your denomination's program for the aging?

Churches are urged to "alleviate discrimination against the aging in their communities and to support legislation in the states and nation which protects the interests of older people."

Increasingly almost all Protestant denominational and inter-denominational conferences and publications are emphasizing the importance of social services, including therapists, recreation workers, counsellors and case

workers, being available at all church-related housing and hospitals, and also to older people in their own communities. City and state councils of churches have shown a great deal of interest in the social service requirements of the aging.

In connection with the National Conference on Social Welfare, and the Church Conference of Social Work, meeting simultaneously in San Francisco, 1959, the Northern California Nevada Council of Churches held four preliminary workshops on aging: New Horizons in Housing, Senior Centers, Cooperation with Community Social Agencies, Use of Older Adults in Church and Community Programs.

Cleveland Area Church Federation reports that their women have an especially active interest in older persons; serving on boards of directors of homes for the aging and working as volunteers. Also through their various church organizations they volunteer for friendly visiting and reading, furnish transportation, etc. The Christian Social Action Committee of their United Church Women has a sub-committee on Aging, the chairman of which is the liaison person for denominational and civic programs on aging.

Many local councils of churches (at least 25) have active social welfare departments which represent their churches in the local council of community agencies. They are watchful of legislative and administrative matters concerning the needs and rights of the elderly, and have alerted the churches when action was desirable.

A Connecticut community took a slightly different approach: a group of older church people undertook a study of civic affairs and social services, including resources and budget; they report to the community and recommend action.

In 1957 the United Church Women and Church Federation of Greater Dayton set up a ministry to nursing homes and homes for the aged, with 31 local churches of 10 denominations participating. Sixty picked volunteers were trained in psychology of aging, institutional administrative policies and procedures, etc. They were assigned to 14 homes to call on 400 elderly residents. Half the allotted visiting time they made themselves helpful to individuals; the other half was spent in a worship service. A set of colored slides carries the story of their work back to the churches they serve, wins support. The expanding program aims at 100 trained volunteers to serve all the homes in the area.

The San Francisco Council of Churches has a staff person to give consultative and supervisory service to churches wishing to set up senior programs. Weekly center programs have been established in five churches under this program, with crafts, counselling, discussion groups, projects, entertainment. Volunteers, persons under 50, are recruited by the churches. The project receives community funds from the United Bay Crusade, San Francisco Recreation and Parks, and Adult Education Departments. These programs are not just for members of the churches which house the centers, but for all older persons of their areas--especially for older persons who are alone; working under some handicap, and who need a psychological lift to enable them to take their places in the ongoing stream of community life. The volunteers study the physical, social and psychological problems of aging, community resources, group techniques, crafts, in nine two-hour

sessions, plus intraining and consultations with the staff director. Other San Francisco churches carry on their own senior fellowship groups according to their congregational and denominational patterns outside the council project's framework. The Lutherans have a new combined hotel for older people and activity center with welfare services, next to a big downtown church.

Sheltering Arms, a united facility for the aged in Houston and Harris County, Texas, considers casework counselling for both the older person and his family as its basic service. Casework, by their definition, is concerned with housing, medical service, money, recreation, interpersonal relations, visiting, homemaker service, foster home care, protective services in regard to money, senior camping, day centers. They also maintain a home for women as part of the facility, and the women who are able like to act as center hostesses.

In some local churches one finds competent specialists, themselves retired, working individually or in teams, ready to advise older people on questions of housing, health services, old age assistance, legal matters, or referring them to the proper community channels for obtaining specific technical services in the field of social welfare. Many older people who have always been very self-sufficient, find it easier to make an initial approach through their church when they need help. The Connecticut Council of Churches suggests a "Senior Board" in the local church or council--a respected group of retirees from various walks of life, selected for their experience and wisdom, to be available singly or as a team, for personal or family counselling.

Often very simple things make a great difference to older partially incapacitated persons. If they live with their families, a solution is worked out in the family group. When they live alone, they are apt to go on from day to day, putting up with things as they are, hating to complain. A woman whose left hand was crippled found it difficult to do her own cooking, and was thinking in terms of having to go to a Home. A visitor from the church had a spike driven through a heavy block of wood. On the spike the woman could impale meat, vegetables, etc., and prepare them quite satisfactorily with one hand. Often older people do not know about new gadgets that would help them or hesitate to invest even small amounts for devices that would yield big returns in their own comfort and safety. Family wrangles sometimes drag on and on and become serious because no one is at hand, at the start, to suggest a solution that will just allow everyone to save face. A trained volunteer is often able to give a little help on a little problem that prevents its growing into a big one.

### Orthodox

In general social work in the Orthodox churches is very close to the distinctively religious life of the group. The Greek Orthodox Archdiocese of North and South America reports that "assistance to aged people in need is extended on a rather large scale, by the Ladies' Benevolent Society, of which there is a chapter in each of 375 communities of the Archdiocese.

In general the smaller churches, and especially those which retain the language and customs of a former homeland, depend heavily upon their own

people for social services, and the needs are considered as a family affair. In some of these churches, Americanization and English language classes help newcomers in their orientation, but sometimes the church fellowship becomes a retreat from the terrifying differences of a strange world. Sister denominations with related background (themselves already thoroughly oriented to American life) often help at this point.

### Catholic

The Catholic Church considers care of the elderly when needed as basic to its ministry. It emphasizes their place of dignity and respect in the family. When they must go to an institution, it still wants to keep them as close as practical to the mainstream of life. The church, it points out, is symbolically at least ruled by the elderly, and it is not in keeping with this to repudiate, downgrade or isolate the elderly in the community.

The Little Sisters of the Poor is an order founded in 1839 with care of the aged as their special concern. They opened their first house in the United States in 1868. Other orders involved in work with the elderly include Sisters of the Holy Family, Sisters of Charity, Sisters of Mercy, Sisters of St. Joseph, Sisters of Divine Providence, Helpers of the Holy Souls, Dominican Sisters, Corpus Christi Carmelites, Franciscans, Sisters of St. John the Baptist, and others. The Carmelite Sisters were founded in this country during the depression days of late 1929, to care for the middle class aged. St. Vincent de Paul is typical of the lay groups which, among other responsibilities, visit the aged in homes and hospitals:

The National Conference of Catholic Charities, in addition to its work in research and in the production of literature for the fields of social service, holds meetings throughout the year on a sectional and regional basis in order to highlight current needs of various population groups. One of the constituent groups of the National Conference of Catholic Charities is the Conference of Religious. This is a special banding together of the various religious communities of Sisters engaged in the various welfare operations of the Church. These meetings are held four times a year and are geared to keep the Sisters abreast of the developing needs in the field of social welfare. These meetings are also devised to promote the application of the highest standards to the work of these Sisters in the institutions and agencies of Catholic Charities.

An Annual Meeting of the National Conference is held in the fall of each year to bring together the lay professional workers and the volunteer groups with the Conference of Religious and the Directors of Catholic Charities in order to consider more in detail the function and focus of the various operations of this charitable movement. Through workshops and sectional meetings both the technique and the philosophy of social service is reviewed. Through the past several years the program of the Annual Meeting has been dotted with numerous meetings that have delineated the need of the aging and prescribed the obligation of Catholic Charities in its various phases to meet it.

The Social Service Department of the Catholic Church, family division, works with people whose parents are in Homes.

Dominican Sisters and Sisters of the Congregation of the Infant Jesus take nursing services to older people who are in their own homes. Golden age clubs in the Catholic Church are a parish movement.

Present emphasis of the Catholic social services programs for the aged include encouraging family responsibility so far as possible for the care of its own older members; day centers, homemaker and friendly visiting services, placement in foster homes; sheltered workshops.

The Little Sisters of the Poor operate some 51 homes for the aging. The Carmelite Sisters operate 26 homes for older people in the East and Midwest. Adjacent to their home in Davenport, Iowa, they are now erecting a million dollar, 125-bed hospital, which will be available to men and women of all faiths. In all such facilities the availability of many welfare services is presumed.

Rather than elaborate the content of many programs, similar to ones that have already been described, let us here quote one report from the Archdiocese of Detroit, which shows many facets of the concern for aging, in one geographic setting.

#### THE CHURCH IN DETROIT AND THE AGED

"In order to meet the social challenges presented by our older population, the Archdiocese of Detroit has set up a special Department to focus its complete attention on this segment of society. Our Department is known as the Department for the Services for the Aged and has existed for the past seven years.

"This Department serves as the chief intake center for all problems related to older people. Here, in one spot in the Archdiocese, an older person may go to seek answers to his problems of health, housing, spiritual development, medical care, employment, recreation, etc. Counseling services are offered and accurate information is available on all community resources.

"This Department is the co-ordinating agency for all of the existing homes for the Aged (Burtha Fisher Home, Carmel Hall, St. Joseph's Home, St. Mary's Home, St. Elizabeth's Home, Villa Franciska, St. John and St. Catherine Co-operative Homes.) These institutions offer 1025 beds on any one given night. In addition to being a co-ordinating unit, our Department launched its own "Campus" residency plan, housing some 85 people. This latter idea is non-institutional but serves the definite need for emergency housing when all other facilities are filled. It has been proving itself to be more desirable for many physically-well aged than the institution.

"Two big yearly functions are sponsored by the Department. They are our Annual Senior Citizens Arts and Crafts Exhibit - the largest in the U.S.A. and the Golden Wedding Ball - the only community-wide celebration for all couples married 50 years or more.

"Another project of our Department is the Senior Citizens Arts and Crafts Shop. It offers a year round retail outlet for the handicraft of Senior Citizens. The consignee sets the price on his or her article and when the item is sold 80% of the profit goes to the maker and 20% is retained to help meet the operational cost of the store.

"Not through scientific research but through the necessity of meeting basic human need new solutions are attempted to meet ever-increasing demands for service.

"This Department is now attempting to organize and co-ordinate parish units of Senior Citizens. For the most part, the twelve existing units offer a recreational social program on a parish level.

"Through the Department and its resources, a course in Social Gerontology is taught at the University of Detroit. Likewise, there are speakers from our Department who oblige any group in our community -- the subject being in general 'Longevity' and 'How To Prepare for Retirement'."

### Jewish

Jewish social welfare services to homes and hospitals are organized, financed and staffed by local Jewish welfare funds and federations; these are coordinated through the Council of Jewish Federations and Welfare Funds. The local welfare funds involve the whole Jewish community--whether or not related to the synagogue. They are also responsible for over a hundred family service agencies.

On the other hand, the National Jewish Welfare Board coordinates the work of the YMHA and YWHA's and the Jewish Community Centers. While the Jewish Community Centers are not regarded as a "religious" agency by their sponsor, yet around these centers cluster many of the services which the Christian churches think of as close to the heart of their church programs. As with the YM and YWHA's the degree of attachment to the Temple or Synagogue varies. The Synagogue Council of America (comprising the Central Conference of American Rabbis, Rabbinical Assembly of America, Rabbinical Council of America, Union of American Hebrew Congregations, Union of Orthodox Jewish Congregations of America, and United Synagogue of America) "regard these services as a practical expression of the spirit and moral concern of the Synagogue and therefore. . . within the purview of Judaism,"--an expression of the tradition of Tzedakah.

It is under the Jewish Community Centers that most of the senior groups have been formed. It is possible that the looser theological ties encourage a healthy freedom of expression: the Older Adult Conference (St. Louis, March 1960) sponsored by the National Jewish Welfare Board had things to say through its section findings about legislation and social issues; and the participants took no refuge in theological truisms!

New ideas in the Jewish centers include family group counselling, programs geared to Jewish life in the suburbs, vacation care for older people while families are away on holidays; also study of the "disturbed and disturbing" individual, with the rest of the family as the point of concern.

Though Jewish senior centers are often thought of as associated with community centers, some have been formed with very close religious ties, under the National Federation of Temple Sisterhoods. Noteworthy among these is the Golden Age Club of Temple Rodeph Sholom, New York (formed 1943) whose chief problem was not to lose its head over unprecedented popularity, and outgrow its original purpose as well as its facilities. Instead it has

constantly rethought its program, and moved constantly closer to the distinctly religious life of its members.

### Housing

The church-related Home for the Aging, or the similar Home related to the Jewish community, is an acknowledgment of religious responsibility. It has been, in theory at least, something over and beyond shelter and three meals a day--something, moreover, over and beyond what was available to older people through state and county facilities. Establishing such homes has been possible primarily through voluntary endowments and gifts. They were the best available extension of or substitute for the family home when an older person was left alone, or for some reason could no longer continue as part of his own family. Hopefully he would have family visitors, or visitors from his church or synagogue, and pay family visits. He would spend his days with people with whom he had a common background and could, presumably, find common interests.

This ideal may not always have been entirely in accord with reality, but it explains why concern for the aged has been so dominated in religious thinking, up almost to the immediate present, by "Homes for the Aged."

Now, as pointed out under "Health," these Homes tend more and more to become hospitals for the chronically ill, and well older people are crowded out. At the same time, our speed-conscious civilization and stream-lined living quarters pose serious problems for many older people about living in the homes of children. Finances are still a problem, but with Social Security and Old Age Assistance, they are not the all-determining factor they once were.

In the light of all this, and related problems, the churches and Jewish agencies are rethinking their practical approach to housing for the elderly while trying to preserve the values of the idea of the "Home" as an extension of the family or church-related home.

We should mention here, the degree to which living quarters seem to be symbolic in the minds of older persons. Any variety of problems may bring an older person to a minister or counselling center, but his own initial explanation of his being there is usually that he is "thinking about going into a Home" or making some other change in living arrangements. This he always hopes will in some way affect the pattern of his life for the better.

Let us look at a few of the many present "Home" programs.

### Catholic

There are in the United States 326 Catholic Homes, housing over 31,000 persons. Catholic authorities are, however, very emphatic that well over 90% of the Catholic aged still live in their own homes or with families, and that we have, perhaps, not given this "normal" segment of our older population a fair proportion of our attention. We have, they suggest, emphasized the pathological aspects of aging and family life, so the abnormal situation becomes the norm in our thinking. A preventive approach, in the home and community, to ward off potential problems, is indicated.

Most active in care of the Catholic aged are the Little Sisters of the Poor, with 51 Homes, and the Carmelite Sisters, with 26.

There is a great interest in Catholic circles in downtown hotels for the aged. This is in line with Catholic tradition that the older people should be kept in the main stream of life, where they will be accessible to friends and relatives, and where all types of medical care, shops, educational and cultural facilities will be available to residents. Many older persons give as a reason for wanting to enter a Home: "To be near a chapel."

The Catholic Home in Indianapolis, operated by the Benedictines; the beautiful Madonna House in San Francisco; Carmel Hall (formerly The Detroitier) with rooms for 500, in Detroit; and St. Patrick's Home for the Aged in New York City (these last all operated by the Carmelite Sisters) are all in this "downtown" tradition.

A far cry from early ideas of "A Home for the aged" is Mary Manning Walsh Home (Carmelite) for 300 men and women over 65 in the Archdiocese of New York. A list of facilities available to residents, taken from the book, Where Somebody Cares, suggests that residents lead a pretty active life and are well cared for:

Adult Education	mail service
Barber shop	maintenance
Beauty shop	medical record
Business office	millinery salon
Central supply	nursing services
"Chat" housepaper	nutrition and food services
Cocktail lounge	occupational therapy
Coffee shoppe	physical medicine and restorative services
Counselling	podiatry
Creative activities	productive activities
Day center	psychological services
Dental services	publicity and public relations
Diagnostic services	purchasing
Dining room service	receptionist service
Dispensary	recreation activities
Dress shop	resident council
Eye clinic	services for the blind
Geriatric clinic	social service
Gift shop	speech therapy
Group work activities	spiritual services
Hearing services	therapeutic diets
Housekeeping	tray service
Laundry services	volunteers

Administration has its own set of contacts.

The lure of suburbia is evident in Carroll Manor, on a 26 acre site on the outskirts of Washington, D. C. The 6-story building, in the shape of a Maltese Cross, has 200 single rooms, and suites for married couples, with every sort of service and convenience. There is a chapel for 300 and a theater. The Manor is set up to take care of both the well aged and persons with long term illnesses.

St. Joseph's Manor in Bridgeport, Conn., and Madonna Residence in Brooklyn will each bring the same sense of luxurious living to some 300 residents.

A completely different story is that of Kundig Center in Detroit. The Director helps older people find rooms in private homes in the neighborhood, and they come to the center for meals, cultural activities, recreation, personal, medical or legal advice. The cost at the center is \$67 per month. Getting outdoors and to the center evokes no complaints and is apparently beneficial.

Then there is Jennings Hall, Cleveland, with special claim to fame because of some people who live there: "The Conference" is a group of eight elders of the Society of St. Vincent de Paul, all residents of Jennings Hall, a Catholic Home for the aged. The President presides from his wheelchair. "We keep watching," he says, "and when people need something, we provide." Members of the Conference help people to chapel, do errands, visit those in low spirits, help with parties, send birthday cards to all residents, chauffeur those who must make short trips away from the building.

Noting the special needs of "language" groups, a new \$1500,000 Home has recently been built to house 60 aged Slovak Catholics. It was built by the First Catholic Slovak Women's Union, is staffed by the daughters of St. Francis of Assisi.

Almost all Homes are now on a monthly payment rather than life-pay plan.

### Orthodox

Eastern Orthodox Homes often represent language and home customs as well as religion to their first-generation-American occupants

The Greek Orthodox Church of North and South America has Homes for 25-30 in Yonkers, Chicago, Pittsburgh, and are planning others under the auspices of the Archdiocese but independently financed and operated. The Syrian Orthodox has some homes at the local level.

The Ukrainian Orthodox Church of America points up the plight of the older person of a small minority group. A survey of their constituency showed "2000 persons of our faith who are in desperate need of old age assistance and 24-hour-a-day care. In most of these cases the aged persons, for one reason or another, cannot live with relatives, and in almost half of the cases they do not receive adequate social security or old age financial assistance to gain admission to convalescent homes or county or state institutions." This church longs to build its own Home where it can take care of its own elderly--"where they will not feel alone and in strange surroundings" and where the habits of a lifetime need not suddenly be changed in a non-Ukrainian or non-Orthodox institution.

The Serbian Eastern Orthodox pride themselves on their custom that "each family should care for its own members and keep them at home until they die." One home serves their 25,000 families. Most of the residents are 70-90, and persons of very low income.

## Jewish

A Jewish conference in St. Louis called attention to a real problem in regard to housing for the aged: to satisfy Jewish needs housing should be near a synagogue and kosher food should be served in the dining room. For this reason, they feel that "separate but not segregated" housing is desirable.

Originally most Jewish Homes were in the large cities, but there has been a recent trend to regional Homes to serve the smaller Jewish communities. The first Home for Aged and Infirm Israelites was opened in St. Louis in 1855.

The 1958-9 Directory of Jewish Health and Welfare Agencies lists 83 Homes for the aged, serving 11,000 persons. Several new ones are under construction.

Originally boarding houses for the elderly, Jewish Homes have followed the common pattern of taking on more and more nursing, medical and allied services, including social work, for the residents. Milwaukee Home for Aged Jews has built apartment houses close by and offer all their services on a center or out-patient basis to the apartment residents.

Drexel House, Chicago, pioneered with making the Home for the aged also a day center for the community, adding many features in which day and resident aged worked or played together. The day people can get one meal at the center. A wing was also added to serve persons who needed nursing care; also an out-patient clinic.

The Montefiore Home in Cleveland has been widely publicized for its program of sheltered workshops.

Philadelphia has an 11-story modern apartment house with 220 apartments available to the Jewish aged.

The largest voluntarily supported facility for older people is the Home for Aged and Infirm Hebrews, established 1870 in New York City by B'nai Jeshurun Ladies Hebrew Benevolent Society. This facility cares for nearly a thousand persons and has an annual budget of \$1,651,808. It is in effect a complete self-sufficient living community.

In Jewish Homes across the country, 70% of the residents are over 75. Some 50% get old age assistance--usually \$60-65 per month. Operating costs are \$150-200 per month.

## Protestant

Within the Protestant churches the pattern of housing for the elderly is so varied that it is impossible to give any kind of a comprehensive picture in short space. Some churches, when queried, replied simply in terms of Retirement Homes for their own clergy. Others seemed to presume that Homes for the aged were nursing homes and hospitals. With some few people, the problem of racial integration in homes and other facilities was an all important one; in others it "had never come up." (Some denominational

studies on this are being made and the National Council of Churches Department of Social Welfare has on its agenda a study on racial integration of agencies and institutions.) Some church housing is for the parish's own; some is open to anybody. Physical plants run all the way from self-supporting luxury manors, with every conceivable facility, to rambling but beloved older homes where the residents do much of their own work. There is, in short, almost as wide a variety in church housing as there is in private housing.

In general the trends might be said to be

1. enlarged facilities to care for increase in older population.
2. all-purpose facilities--various types of accommodations in one project, with central recreation, infirmary, dining room, chapel, etc.
3. recognition of the need for caseworkers, therapists, chaplains, etc. in connection with the home.

Financing may come from the general budget of the denomination or sponsoring group, from women's organizations, cooperative financing, private endowments, federal funds. Certainly church housing programs are no longer exclusively for low income groups; the theory now is that people should not be excluded from the care and fellowship which such living quarters provide, in a unique degree, just because the applicant can afford to pay. Signing away one's resources in return for life care is no longer looked upon with favor; it not only caused discontent, but with the lengthening life span became very questionable from the point of view of institutional finances.

We add not a comprehensive list but a few highlights:

There are 104 Methodist Homes under the Board of Hospitals and Homes, which offers some guidance through its published standards of operation; but there are many acceptable patterns. Some districts also have courses in the training of personnel. These Homes care for some 10,000 people; 51 new projects are under way. One recent project is Bayview Manor, a 250-unit apartment house, costing \$4 million, near Seattle, Washington. Quite different, but equally cheerful and self reliant is Beulah Homes, Oakland, California, a project of the Woman's Society of Christian Service of the Methodist Church, Northern California Nevada Conference. Managed by non-salaried Christian women, it operates on a pay-as-you-go plan. It was established in 1909 by a cash bequest and has twice had major additions. There are many endowed rooms. There are at present 108 residents (women and couples over 65) and a waiting period of three years. There is a central dining hall, chapel, infirmary, hobby rooms, etc. Residents bring their own furniture, decide on their own programs, come and go without restrictions, take pride in the home's beauty and in their own determination to "make do" with present equipment till new can be purchased on a cash basis. Varied accommodations satisfy a wide range of tastes and pocketbooks, including those of people on old age assistance.

Churches related to the National Lutheran Council list 128 Homes caring for 8866; they expect to add 20 new projects, to care for 500 to 1000 more by 1965. A recent interest is in projects which provide individual homes and apartments on the same grounds as institutional type housing.

Lutheran Church--Missouri Synod has 19 Homes under its Department of Social Welfare. They stress that we "know now that institutional housing is only part of the need"--major emphasis must be on the person, and his needs in their entirety.

The American Baptists established their first Homes in 1869; they now have 40, plus twelve in the process of building, under their Home Mission Societies and the Department of Institutional Ministries. They care for 3,500. All but two have infirmaries. Retirement communities are "a feature of the decade." If financing is difficult they turn to churches or endowments. They publish Concern dealing with institutional ministry. At Zenith, near Seattle, they are building a \$3 million Home; \$7250 to \$8550 provides a lifetime base, with a monthly cost of \$97.50 including temporary infirmary care.

Southern Baptists have 14 Homes in 11 states, caring for nearly 1000.

The African M.E. Church have built a retirement Home adjacent to their denominational college.

The Presbyterian U.S. Church has 4 Homes--"really nursing homes." They have not followed the trend to adding all kinds of services--their personnel are doctors, nurses, dieticians; residents help with a good deal of the work.

The United Presbyterian Church has 78 Homes in 23 states (more under way), caring for about 4300. These are of a wide variety. Some have "life care," some independent sponsors and only tenuous relations to the denomination. The new retirement projects are no drain on the denominational budget, but self-supporting. They feature separate living but common recreation, dining facilities, etc. Though a person has financial security, "his need for compatible association, creative activity and group responsibility is every bit as acute as it is for those less fortunate." Homes for retired ministers are operated by the Board of Pensions and for retired missionaries by the Board of Ecumenical Mission.

United Church of Christ (Congregational and Evangelical and Reformed) have 41 Homes that vary from manors to homes for widows of a local area. Pilgrim Place, at Claremont, Calif., was established by the Congregationalists especially for retired ministers and church workers. New projects offer "diversified facilities with minimum supervision." One now under construction, is outside the San Francisco metropolitan area, in the beautiful Carmel Valley. The E and R Church, though they cared for nearly 1600 in their 23 Homes, always insisted that they were at least equally concerned over rental conditions in the parish, where persons remaining in their own homes were trying to get along on Social Security or old age assistance incomes.

The Disciples of Christ through their National Benevolent Association, serve 725 persons in 11 Homes. Three of these are cottage type facilities with life occupancy. Lenoir Home of Columbia, Mo., is maintained for retired missionaries and ministers. States and cities have their own projects in addition to the national program. A Southern California project is Bethany Towers, under construction at Hollywood--a six-story, cooperatively owned apartment house.

The Salvation Army operates a hotel for 300 permanent residents in Detroit. Its Martha Washington Hotel, in midtown New York, is for older business women. At Redondo Beach, Calif., is a building with 15 apartments for double occupancy, and at Westlake, California, one for their own retired personnel.

The Protestant Episcopal Church has 76 Homes, with special emphasis on care of the older women of the Episcopal Church. This work is under the Department of Christian Social Relations, and the homes are usually related to the diocese. Many are small, some accommodating as few as 10 or 12, and approximating as far as possible real homes.

The Brethren with 13 Homes across the country, house 800 older persons at a cost of \$1000 annually per person. A third of their residents are on old age assistance. The Brethren are not interested in building homes where low income seniors cannot be accommodated. A third of their residents are non-Brethren. Programs of case work, etc., are just getting under way. Residents help to some extent with the work.

The work of other denominations falls roughly into the same kind of patterns.

A rather new development is interdenominational sponsorship. At Medford, Oregon, Rogue Valley Manor, with 270 apartments, is a joint undertaking of the Methodists, Presbyterians and Baptists. The same churches are building in Denver. In Indianapolis, the Disciples, Presbyterians and Methodists have a 100-apartment project, with rentals from \$50-\$85. Local physicians are planning an adjacent 65-bed nursing home.

At Elizabeth City, North Carolina, the Winslow Memorial Rest Home is being built, under a foundation established by a Washington, D. C., business man. The donor specified that it should be for residents of the area who need the care it can provide, regardless of their denominational affiliations, but the Seventh Day Adventists have been asked to "run" the home in accordance with the principles which have made them rather famous for their hospital work.

Making a different approach to the question of housing for the elderly, The Oakland Council of Churches is taking a keen interest in the city's urban renewal plan and is trying to make sure that in the new building areas a proportionate number of units are ear-marked for older people at a price residents who have been dispossessed by the clearance of old buildings can afford to pay.

The Church Federation of Greater Dayton has a Committee on Housing organized "to bring suitable low rent housing to the elderly."

Many church and church council conferences on aging across the country have made housing one of their major emphases. If older people are to be encouraged to stay in their own communities instead of going to church-sponsored Homes, they need to discuss such questions as:

Would it be better to stay in my large home or sell and rent an apartment?

Is it practical to remodel a home into apartments or a duplex?

Can an individual get government financing, and how?

Are there safety and convenience questions about which people become more conscious as they grow older, and for which they should watch as they settle in new quarters?

What should a person do when he encounters race or age discrimination?

Who makes these zoning arrangements anyway, and can't you get around them?

Conference speakers, senior fellowship discussion groups, church-related social workers, are usually prepared to give some help on these questions. Social welfare bureaus in some councils of churches believe they are in a position to collect and pass along information, and sometimes speak up for the churches and older people in general on some of the problems of housing. They can give help either directly to the older person, to whom a suitable place to live has both actual and symbolic importance, or to the pastors of the community, who can in turn help the older individual.

## AMERICAN JEWISH ARCHIVES

### Education

Many pastors and religious leaders believe that the greatest service religion can render the aged and aging is to make congregations aware, through a teaching and preaching ministry, of the love and respect due to the older members of the church or synagogue family, and of the community as a whole.

The admonition to "honor thy father and thy mother" is held to be by no means out of date, but often neglected to the harm of our present culture. Many pastors say, however, that this basic biblical admonition must be reinterpreted in terms of our present society, which puts it in a broader context than that of the biological family.

Whether one emphasizes obedience to the commandments, the sanctity of family life, or community obligations, the task of the religious educator includes inculcating into children at a very early age respect and appreciation of older people, based on their continuing contribution to society. At the same time adult education for any age teaches a sense of intelligent responsibility which will keep older people from expecting respect solely on a basis of their grey hairs. These older folks will hope, rather, to earn such respect for the contribution they can make to the spiritual life of the community--even after they become very ancient and perhaps bedfast.

### Education ABOUT Aging

One minister in a college town makes a point of always including the story of one older person in the illustrative material of his sermon--a person sometimes famous, sometimes very humble--who has self-respect and is worthy the respect of others.

Some churches have a library shelf of books on retirement, pre-retirement, or one of the many phases of gerontology. Some councils of churches

and Jewish centers have selections of books and pamphlet material on aging, which can be borrowed. Some religious groups have seen to it that such materials were in the public library.

There have been many conferences on various aspects of aging, throughout the country. As a rule the conferences in a religious setting have tended to emphasize the opportunities and responsibility of seniors, rather than focussing on rights. Realizing the interest which religion has in aging, community, labor or union-sponsored programs about aging are very apt to include at least one religious leader, and to devote some time to the part religion plays in the life of the older person.

Many of the sociological surveys related to aging have included questions presumably intended to discover the role religion plays in the older person's life, though this is apt to be done in terms of church or synagogue attendance, which admittedly does not tell the whole story.

A good many churches through the country have tried to hold pre-retirement classes, or forums. Everyone admits these are needed, but enrollment has a way of falling below expectations--few are willing to admit they are approaching the age when such knowledge is pertinent. There is indication that job-related pre-retirement classes are more acceptable to most men, and competent and interested religious workers are frequently asked to participate in conferences set up by labor or industry.

Information about aging and retirement is frequently introduced into the ongoing program of the men's club, women's society, adult Bible class. In one city the adult education department of the city schools and the churches worked together to promote a class on leadership training, which provided subject matter on aging as well as techniques for passing this information on to others. University extension departments, personnel of medical and psychiatric hospitals, government department heads, social service workers, labor and management people, are usually generous in their willingness to address groups of older people under religious sponsorship; senior fellowships have been able to bring in top authorities as speakers.

The Disciples Religious Education department has prepared a short course of study on aging. The Methodists hold camp conferences yearly, throughout the United States, especially for older adults. The Episcopalians have special courses for the homebound. The National Council of Churches in 1953 held a conference on adult education at Williams Bay, Wisc., under the Division of Christian Education. Out of this came the document Fulfilment Years in Christian Education. Curriculum writers for the United Church of Christ were given materials on aging and asked to incorporate some of the ideas into their work. A recent national religious education conference under Southern Baptist sponsorship had a speaker on aging.

Just as some denominations coordinate their work on aging under the department of social welfare or Christian family, so other groups (e.g. the Methodist Church, Church of the Brethren, and the West Virginia Council of Churches) think of their task as one of interpretation of aging and the aged through every facet of church life, and assign it to the department of Adult Christian Education. Mature Years, published by the Methodist Church, is used by many denominations. Since 1953 the St. Louis churches have been holding conferences to interpret aging to ministers and laymen, including

the older people of the city. Hartford, Conn., made a half hour film to tell the story in the churches. The Detroit Council of Churches makes effective use of the older volunteers in presenting the story of aging to community clubs. The University of Florida, through its extension division, has held one-day institutes on "The Church and Senior citizens" throughout the state for the past several years. This is in addition to the Institute of Gerontology's two-day conferences on "Organized Religion, and the Older Person."

Churches and councils across the country have had conferences and workshops, lasting one day to one week, on aging. These are often as well attended by religious and community leaders as by older persons. Experts from related disciplines or occupations are usually used as speakers and resource people. Sometimes groups of students from theological seminaries, schools of social work, etc., attend. In some areas there has been enough inter-faith visiting back and forth through these conferences to create a really ecumenical fellowship among leaders in the field of aging.

The Northern California Nevada Council of Churches Commission on the Churches' Responsibility to Older Persons made good use of channels of communication to help both the churches and the general public get a better overall picture of aging from the point of view of the religious groups. A "Memo" setting forth a concept of church responsibility was widely circulated among church organizations, specialists in subjects related to gerontology, and older people, asking for their suggestions. The resulting document has been widely distributed, and was reprinted by the State of California Committee on Aging in their magazine Maturity, and in other publications.

#### Education FOR Older People

So far as education specifically for older people is concerned, we think instinctively of the adult Bible class. Some of the older adult classes have taken in few new members and fewer new ideas for a long, long time. But they do enjoy each other's company and talk each other's language. Seeing this pattern, more modern older people say they do not want to be segregated, but prefer to continue as members of the regular adult class, where they think they can very well hold their own with younger members.

The Catholic Church at the parish level holds classes related to religious subjects and general culture for laymen to which older people are welcome. A course, held in San Francisco, dealt with "Human Behavior," and explored the process of man's growth and development.

Rabbis in the affiliated Orthodox, Conservative, and Reform branches of Judaism conduct adult education classes for their congregants, and report that elderly men and women constitute a substantial percentage of enthusiastic students. Seniors are especially active in Sabbath afternoon classes devoted to the study of Biblical, Talmudic and other Jewish literature--a tradition which goes back several hundred years to the history of the Jews in Europe.

In the Bay Area of California, the seven Protestant theological seminaries united in sponsoring a Layman's School of Religion. Professors

give seminary level work in Biblical subjects, church history; current theological thought, etc. A very large percent of those who enroll (and do their homework regularly) are retired people. Many say that all their lives they have hoped some day to study religion.

Religious centers or fellowship groups often have lectures or classes in secular subjects: cultural, how-to-do-it, fun. They may use competent people from their own group, or call in help from adult schools or university extension. Many senior groups like to take educational trips to industrial plants, exhibits, museums, etc.

Not much has been done about taking religious education to shut-ins. The American Bible Society furnishes "talking Bibles" to the blind. Many adult Bible classes or fellowship groups make a point of visiting their own shut-in members, taking them lesson materials, pertinent books, etc.

There has been a good deal of interest lately, especially at the Jewish centers, in "Family Life Education," a technique involving problem solving in groups, with the aid of a casework specialist in family counseling.

#### Education BY Older People

The religious groups could not possibly take advantage of the many opportunities for a teaching ministry if they did not rely to a large extent on recently retired persons. The two most obvious openings are in connection with church schools or in classes for seniors themselves. The process by which they are recruited, possibly brought up to date in regard to subject matter, and given an opportunity to inform themselves on modern group work techniques, determines the success they are likely to achieve. This is covered in the next section.

#### Role and Training of Professional Persons

At the graduate seminary level very little has been done to train the oncoming generation of pastors and church workers to deal with the "new generation" which medical science has added to our social structure.

Ministers who become interested "pick up" a knowledge of gerontology where they can find it. If they search University catalogues, they are apt to discover that courses on aging are specialized graduate courses in a wide variety of departments--psychology, sociology, public health, adult education, to mention a few. Usually these graduate courses have prerequisites of undergraduate work in the same department. A few universities scattered through the country have set up institutes of gerontology, but they seem to be primarily interested in research. Religious workers can not afford the time and expense to get the working knowledge they need in this way.

At the interdenominational Pacific School of Religion summer session (1960), a class in Religious Education for pastors was made aware of the changing picture in the field of aging. Eight denominations were represented in the enrolled membership of the class; most of them were ministers,

with churches in a number of states. Not one knew where a minister could get professional level training to help him with this pastoral responsibility. As the class broke up they passed a resolution recommending that to meet the changing and challenging situation, such work should be part of seminary training.

The reverse of this is a growing demand that professional workers in other disciplines, employed by religious organizations to work with the aged, need to have considerably more than a nodding acquaintance with religion. These persons are, willy-nilly, representatives of the employing agency, and the temptation to assume the role of religious as well as technical counsellor can be great--sometimes almost unavoidable.

Survey courses in gerontology or religion, given through university extension facilities or seminaries, supplement with a "working knowledge" the discipline in which a professional worker is competent. But they often fail to satisfy his own scholarly standards for himself. In certain instances, students from seminaries and state colleges have been given field work credit for attending and reporting on local conferences on aging. Actually these conferences and workshops often command unusually competent speakers. The National Committee on Aging recognizes their worth as "one means of bringing expert opinion and experience to bear on specific and troubling topics."

Religion has been discussed at conference on aging at San Francisco State College and at a grass-roots conference at Mills College. At the former, the head of the Veteran's Administration led a workshop on counselling which discussed fear of death; the need of the older person to feel someone is dependent on him, if only in a small way; counselling for retirement; techniques of reaching out to the older person in the community; preventive counselling during the period of youth. College of the Pacific, Stockton, holds an annual Family Life Education workshop.

The Department of Social Welfare, National Council of Churches, sponsor an annual Interdenominational Conference for Personnel of Homes.

The Evangelical and Reformed Church have a service training project for older adults. Volunteers give a year to a social service project--two months to training, ten months to supervised work. They pay their own expenses. The E and R deploras that "schools of social service administration are not graduating people in care of the aging."

When the Disciples sponsored two clinics at Springfield, Ill., and Seattle, Wash., to explore needs of the aging, the most firmly expressed need was for a "bureau of opportunities and leadership training."

The Brethren held a national training conference in 1959. Lutheran Church, Missouri Synod, has held one day regional conferences. In Central Pennsylvania, the United Presbyterians give a yearly course for personnel in their Homes. The Protestant Episcopal Church at national level offers a scholarship through the Division of Christian Social Relations, under which the department of aging operates.

Leadership training, at summer assemblies and camps, has for several years been part of the Methodist pattern. Trainees meet on college campuses, conference campsites, at state parks. They focus on better training

for leadership; they are geared primarily to lay workers. Selected people are also trained in laboratory situations. A new development is clinical training for people who visit shut-ins and the critically ill.

The Peninsula Council of Churches and United Church Women sponsor (on behalf of their 42 churches and 11 denominations) a pilot leadership training program at San Mateo, Calif. Some 20 young married women organized for the first course. They secured excellent leaders, provided child care for those taking the course. After training, they are "under obligation" to do volunteer work in local centers. A second course has since been held.

The National Council of Jewish Women has furnished a great deal of leadership in programs for the aging, and has sponsored classes for trained leadership. The work in the Jewish Centers follows a pattern of having a professional social worker in charge, with both assistant staff and volunteers getting a good deal of on-the-job training; so the matter of first importance is that specialized knowledge concerning aging and an understanding of the aged, is included in the equipment of the head social worker.

The National Conference of Catholic Charities, when they met in New Orleans in 1947, took a long look at their obligation to the aging and saw it as a matter for increasing concern; they realized at once that personnel would be one of the problems as the program moved forward. Mention was made not only of medical personnel and social workers, but of institutional personnel, and the proficiency of persons doing public relations, research, interpretation; also inter-relationship between the Sisterhoods, Catholic Schools of Social Work, Catholic fraternal organizations. The Catholic agencies realize that they have two advantages as they approach specialized training for work with the aged: this concern is firmly a part of their welfare program and receives its proportionate consideration, for instance in the graduate schools of social work. Also, they can presume that trainees in Catholic graduate schools, largely recruited from their own undergraduate institutions, do have the kind of basic religious training which is essential to a professional person representing his church in relation to the lives of older persons.

#### Free Time, Recreation, Voluntary Services

A wise man has said that how a nation uses its free time determines its future. An increasing proportion of our nation's free time is in the hands of the elderly. It is, moreover, a facet of their lives about which they look to the church and synagogue for considerable guidance, as they seek companionship, meaningful activity, fun, understanding of self, and an opportunity to serve. Seniors in religious groups say that they want first of all to be integrated into the full life and fellowship of church or synagogue activity. However their strength and resources make it impractical for most of them to participate in all activities (e.g. strenuous sports); instead they should have some activities especially for their age group.

The typical senior center or "Golden Age Club" has received so much publicity that there is no need to go into its program here. There are games, songs, a shared lunch, cultural activity, talent programs, crafts, discussion groups, trips, etc. Sometimes groups go off at a tangent.

Sometimes persons who have seen a one-sided club judge all clubs by that one and become prejudiced. Again a pastor may be "sold" on a center program which he has seen and try to transfer the exact pattern to a group where it does not fit. Sometimes a self-appointed leader or staff person tries to impose his will on the group instead of trusting group techniques and the democratic process. Some centers concentrate on being a fellowship of members, some on being a center of service to church and community. Some employ a director; some prefer to manage their own affairs. Some senior fellowships are for the church's own members, some seek out the lonely members of the community, and offer social service and counsel as well as fellowship. Some churches house community-sponsored groups; some furnish leadership and equipment for groups housed in community halls or schools. There are all sorts of patterns.

One school of thought insists that the director of the center and volunteers working under the director, should all be young or middle-aged people; some seniors don't agree. Some clubs want a subsidy; some want to be independent. Some have dues and officers; in some clubs seniors take turns making the coffee and let it go at that.

Catholic and Protestant centers are both likely to be parish-centered and make up a good many of their rules as they go along. There are literally thousands of these senior fellowship groups in churches all over the country.

The Methodists describe the growth of senior fellowships within the churches as a "wildfire movement," with groups ranging in size from a dozen or so to several hundred. Says a representative of this Protestant denomination which has the most such groups:

"We stress . . . the importance of these groups not as clubs in themselves, but as fellowship opportunities as a part of the church's ministry to older people . . . We do not consider the local fellowship group in a local church as part of a community club organization set-up for the aging. Community clubs may meet in churches, but they are still community clubs. We stress very definitely the importance of fellowship, development of leadership, the opportunities for creative expression, and the happy use of time as the major meaning of these fellowship groups. In addition older people involved in them are also in Sunday school classes, other study groups, craft activities, the church's worship services . . . and all the other experiences of the church's life."

Some councils--notably the Church Women of Massachusetts--have set up interdenominational senior centers. The Church Federation of Greater Chicago has set a pattern of advising and cooperating with city groups. The Minnesota Council of Church Women has taken on a special project related to various centers of the area--training hospital volunteers. In Elyria, Ohio, a united car pool has been worked out for persons doing volunteer work through different church groups.

One hundred and thirty-five Jewish Golden Age Clubs are set up in connection with 125 Jewish Community Centers. These Centers are coordinated through the National Jewish Welfare Board. At a recent three-day

conference in St. Louis, senior delegates to the midwest section of the NJWB declared for medical insurance, geriatric clinics, Social Security for all persons over 65, separate but not segregated housing, more recreational facilities. These centers usually have professional staff on whom the older people rely for counsel or referral.

From the Synagogue Council of America, however, comes this word:

"While the Jewish Community Centers provide the majority of Golden Age clubs for social and recreational needs, an increasing number of Synagogues, especially those in suburbia, are providing similar facilities for their older members. The primary social life of many senior citizens revolves about the regular calendar of ceremonial occasions that take place in the Synagogue; namely, the naming of a child, Bar Mitzvah and Bas Mitzvah (confirmation of 13-year old children); and similar family social occasions. In many Synagogues, these family rites fill the weekly calendar of the Synagogue and senior citizens are bound up and find satisfaction in participating in such important events in the congregational fellowship. Similarly the majority of Synagogues in this country conduct an active social program including discussion groups, forums, dances, bazaars--in all of these, elder members of the congregation play some active role."

A broadly representative study carried on (1955) by the National Federation of Temple Sisterhoods (Reform) reports the growing awareness of Temples all over the country "to the need of finding ways to integrate those advanced in years into congregational life," and tells of the work of the "Golden Age," "Willing Hands," "Young-at-Heart," "Grandmothers" and other clubs.

In Greater Chicago, some 1100 older Jewish people attend weekly meetings at 16 Jewish Center Clubs, while 600 residents of three Jewish Homes for the Aged have their own centers. One hundred more persons attend the three-day-a-week group at the Max Strauss Center and another 100 are involved in summer camp programs. "The aim of all these centers is the same: that the older people experience growth opportunities in accordance with their needs and capacities."

Since older people talk about their grandchildren so much one center decided to hold a grandchildren's beauty contest, to raise money for Jewish charities. Many people have a deeper sense of community responsibility than their incomes permit them to indulge, and welcome an activity such as this, or a shop where their handwork can be sold, or a hobby show or program to which they can sell tickets for a good cause.

Most religious groups would regret having the "fun" program of their senior centers mistaken for the overall program in relation to seniors. Some centers and fellowships have a wide range of constructive interests and service projects. But seniors can have a fine and active relation to their church or synagogue without benefit of a center.

One church of limited resources has surrounding gardens which make it the pride of the neighborhood. They are cared for by the older men

of the church, under the direction of a retired nurseryman. A woman who no longer has a family for whom to sew, is interested in the United Nations. She and her friends dress dolls in authentic costumes of all countries, sell them through the church bazaar, use the money to buy U. N. literature for free distribution on the church's literature table.

A professional social worker and psychiatrist, 76, keeps regular office hours at the metropolitan church of which she is a member, is available and in demand for personal and family counselling. A senior, 90, who took up wood carving as a retirement hobby, is taking prizes at State and County fairs for his beautiful depiction of the Lord's Supper.

Many churches, aware of the reservoir of talent in their recently retired, are finding places of usefulness for these talents within the church itself. Many older women have prized the opportunity for fellowship combined with useful work that comes from sewing circles and serving church dinners, but there is opportunity too for persons whose gifts run along other lines. Seniors have set up church libraries; kept records more efficiently than anyone else has ever had time to do; manned financial canvass teams; put on first-class church-community relations campaigns; written publicity and published church news sheets; taught English classes for the foreign born; organized a church orchestra; drawn plans for new building or acted as contractor; coached dramatic productions; instructed therapeutic art classes;--what not? Increasingly the religious groups are thinking in terms of using retirees at their highest potential rather than expecting them to do odd chores around the church. Volunteers are also directed to worthy community enterprises.

Many people come to retirement with a "cause" to which they are specifically devoted, but for which they have had little time to work during their middle years: the United Nations, the Ecumenical Movement, child welfare, prison reform, peace. Through either their local religious group or state and national associations, they are likely to find individuals ready to work with them for the "cause" of their choice.

Out of the work of the Commission on the Church's Responsibility to Older Persons, of the Northern California Nevada Council of Churches, evolved the "Senior Peacebuilders" movement, with its idea of "pushing out the borders of the peaceful areas of life at every level--personal, family, community, national, world." Originating in this commission--itself made up mostly of seniors--the "Senior Peacebuilders" became a non-profit corporation; their program has been publicized nationally and recommended by various denominations to their own seniors. In Southern California a group of ministers were among the incorporators of "Seniors in Philanthropic Service," whose present program features work with Latin American children in the United States. The U.N. has been interested in how seniors can help promote its freedom from hunger campaign. In Columbus, Ohio, a retired executive of a religious organization is devoting her time, her gracious home and her speaking talents to making foreign students at home during their stay in America. In another city a very elderly couple, no longer able to be active in religious or civic organizations, have for years made their lovely guest room available as temporary shelter for incoming refugees, sponsored by their church. Thus, in the enforced leisure of their latter days they keep in touch with their church and the world.

## Religion

It is hard to isolate the topic of religion when we presume, as we do in this document, that religion is concerned with all phases of aging. There are, however, certain specifically religious aspects of the subject.

Through its preaching, teaching and counselling, the church and synagogue build up the older person's self respect and the respect of the congregation for him as a child of God. They also inculcate such age-old precepts as "honor thy father and thy mother," "love thy neighbor as thyself," "inasmuch as ye have done it unto one of the least of these, ye have done it unto me." Religion teaches life motivations not based on material possessions and it reminds the older person in his new leisure about stewardship of time and talents. It makes him aware of a fellowship of mutual concern that binds members together; in this enlarged family relationship he may give and receive without embarrassment.

Older persons call for frequent counselling concerning life, death, sin and salvation, immortality. The priest, minister or rabbi often prefers to do this counselling of the elderly himself, so far as possible. Ideally a child grows into right attitudes about such matters from his religious training throughout life.

The first National Conference on Aging (1950) suggested these spiritual needs of aging:

1. Assurance of God's continuing love
2. The certainty that life is protected
3. Relief from heightened emotions (such as guilt, grief, fear)
4. Relief from pangs of loneliness
5. A perspective which embraces time and eternity
6. Continuing spiritual growth through new experiences
7. A satisfying status in life as a person
8. A feeling of continuing usefulness.

Most religious groups would accept this challenge and say that they are basically qualified to meet it. Most would also admit that the 65-plus boom came upon society so suddenly that they have not yet satisfactorily implemented their concern in concrete ways, but that they are working on it and will continue to do so.

Participation in religious services is facilitated for the elderly by escort or transportation service, earphones, wheelchairs. Tape recordings of sermons and choir visitors, sharing of the altar flowers, delivery of church bulletins and devotional literature help extend the service to shut-ins. Golden wedding day (for all who achieve this status during the year), an octogenarian lunch, or monthly open house for older members and their friends, are evidence of appreciation. Membership of even the very old in prayer cell groups, opportunities for the homebound to counsel as well as be counselled, bedside sacraments, spiritual support in time of crisis (death of spouse, or a person's own impending death, for instance) are matters which the church or synagogue cannot relegate to any other agency.

The Lutheran Laymen's League says: "Our chief concern is to seek out avenues for utilizing the senior citizens as active persons in

Christian service--to make them fishers of men."

The Catholic Women of Rochester, Minn., planned a parish "apostate to the aging" with a program that included promotion of spiritual life, revitalization of time, restoration of an interest in life. In Youngstown, Ohio, the Ladies of Charity undertook a similar program; and in Buffalo, N. Y., the Society of St. Vincent de Paul organized a "Sunshine Club" to brighten the days of older people. Women provided hearing aids for the confessionals, wheel chairs for use in the church, and paid the salary of a social work counsellor for the aged.

A spokesman for the Synagogue Council of America (Reform, Orthodox, and Conservative) says:

"These Synagogues are regarded as the focal institutions for the majority of the Jewish aged. A large number of the Jewish aged are immigrants from Central and Eastern Europe. In their European experience, the Synagogue was the center of Jewish life serving as a 'house of prayer, the house of study, and the house of assembly.' Its historic functions involved ministry to the religious, educational and social needs of its members. These services continue to be provided by the modern American Synagogue and figure significantly in the lives of most Jewish elder men and women. Thus elderly Jewish men generally participate actively in the daily morning, afternoon and evening religious services of traditionally-oriented Synagogues. Most Synagogues rely mainly on the elders of their congregations to compose the 'minyan'--the quorum of ten men required for prayer service. Senior citizens often conduct the daily prayers, and take an active part in holy day and festival Jewish services."

The Jewish-Christian tradition has a special concern for the family, and offers family counselling, from a religious point of view, to help both the older person and those with whom he is associated.

Most of all religion is concerned with older people as persons in their own right, just as they are, with all their cares and joys and quirks and questions. The older person's problems about death and immortality, or his hope of building a better world here and now, are not brushed aside any more than are his material wants. His concern over sin, repentance and salvation are taken seriously. The pastor may refer a troubled older person to a psychologist, a doctor, a social worker, who has special competence for dealing with a special problem, but the church or synagogue does not relinquish its residual responsibility. Whatever needs the times and the culture and circumstances of his life disclose, the church will, to the best of its ability, and with the help of God, stand by his side and see him through. It will help him to round out his life in happiness and usefulness to the full extent of his God-given potential.

### Research

Scientific research is a field which religious organizations have, for the most part, been willing to leave to the scientists. A great deal

of scientific research is carried on in hospitals and colleges which operate under religious sponsorship or endowments, but this work cannot be reported here. Religion has had longer and broader experience with the aged than any agency, but they do not pretend that this gives them all the answers, and they are grateful for the opportunity to work with specialists in education, health, social work, etc. People working in the field of religion do increasingly insist that their sources be of the highest reliability.

A few recent survey projects are noted:

Several recent surveys have been conducted by Jewish agencies at various levels: The Synagogue Council of America, the Union of American Hebrew Congregations, the Union of Orthodox Jewish Congregations, the United Synagogue of America, the Commission on Synagogue Activities of the Federation of Jewish Philanthropies of New York, have all sent questionnaires to their member congregations to discover the extent to which there is demand for personal and family counselling in regard to aging, what activities were available, and what programs from the spiritual leader's standpoint, should have priority.

A study conducted under the auspices of the CJFWF (New York) with a grant from the U.S. Public Health Services, is reported in Geriatrics, May 1960. Conducted in five widely distributed homes, it seeks to give a profile of the typical resident and his needs. There had been a previous, less intense study, in 70 homes.

A new Jewish Community Center program in Chicago plans daily programs for the aged in relation to which a research project on various aspects of aging will be carried on.

In 1956 the Catholics carried on two interesting projects: 30 graduate students from the University of Loyola school of social work made a door to door survey of 6000 over-65's. Also the Conference of Religious launched a study concerning Catholic institutional facilities for the aged, and a committee was set up to explore possibilities of volunteer services.

Between 1954 and 1959 four studies were carried on concerning Catholic life in selected parishes of Milwaukee, Chicago, St. Louis, Buffalo. Attitudes, church attendance, how people in the parish helped themselves and each other, family living, economic and work patterns, were among subjects explored.

The Disciples of Christ are participating in a unique pilot study of adult education, carried on at the Kennedy Memorial Christian Home (for the aging) at Martinsville, Ind., in cooperation with the Bureau of Studies in Adult Education of Purdue and Indiana Universities.

The Protestant Episcopal Church, through its department of research and field study, conducted sociological surveys of 60 diocese. Facts collected about age distribution, income levels, types of housing, etc. furnished a profile of the "typical aging Episcopalian."

The Mennonites reported at the Fifth International Gerontological Congress (1960) on a survey of church and community relationships within their

own denominations. The survey was carried out with college cooperation, using student interviewers; they sought both objective and subjective responses on a long list of pertinent subjects. Groundwork was carefully laid and community cooperation assured before individuals were approached. The cost was unbelievably low, the results seemed relevant, and the pattern may be adaptable to other surveys.

Some community surveys (secular) have included items about trends in church attendance and attitudes--notably surveys made in "Prairie City", Long Beach and Grand Rapids. For the most part such surveys speak only for that community where they are made. Religious responses are so related to cultural, racial, economic, geographic patterns, and personal attitudes, that generalization from local tests are usually viewed with some skepticism.

The frequency with which questions on religion appear on such community surveys does indicate the significant part which sociologists expect institutionalized religion to play in the lives of the aged and aging.

It has been noted that while research clarifies and points up needs, it does not indicate how to break through budget barriers or the need for trained personnel.

### Organization

The Protestant patterns concerned with aging are varied--almost every denomination is different. The work may be under the department of social welfare, Christian social relations, family life, hospitals and homes, adult education, etc., or divided between different departments with or without a coordinating council or staff person. The National Council of Churches represents the major Protestant and Orthodox churches at the national level in relation to the White House Conference, through the staff of the N.C.C.'s Department of Social Welfare. This department coordinates the interests and work of the denominations and all other N.C.C. departments with programs related to aging. Local churches follow their own or a denominational pattern, often coordinate their work through the local council of churches and church women, or cooperate with programs carried on by city bureaus or voluntary agencies. State councils do not as a rule set up their own activity program but act in a coordinating, advisory, clearing house capacity, involving themselves with conferences, leadership training, etc. and with promoting interest in aging programs in both churches and related circles. Their "opposite number" is the state committee on aging and the Governor's Conference. Local councils sometimes cooperate closely with city or county welfare bureaus, and enter into joint projects with them, for instance in the housing, staffing and financing of senior centers.

In the Catholic church, programs on aging are handled by the diocesan charities offices. The National Conference of Catholic Charities (founded 1910) does research on matters related to aging in the programs of the Catholic churches. It is the source of information on long-term care facilities. The National Catholic Welfare Conference coordinates health, education, social action programs, including the work of the National Councils

of Catholic Men and Women, who act as volunteers and distribute information on aging. Several orders within the Catholic church are devoted to care of the infirm and aged, notably the Little Sisters of the Poor and the Carmelite Sisters; also the lay order of St. Vincent de Paul. The senior center program is usually a parish program.

The Synagogue Council of America speaks for the Jewish Conservative, Orthodox and Reform groups in regard to participation of the aging in Synagogue and temple programs. It coordinates their activity and participation in relation to the U.S. Department of Health, Education and Welfare in this area, and also in relation to the White House Conference on Aging. The Council also serves as a coordinator and clearing house for 42 local "interdenominational" Rabbinic Associations in this and related fields. It cooperates closely with the CJFWF.

The CJFWF is the coordinating agency for the majority of local community Jewish Federations; it is a source of information in regard to medical and health care, family services; it maintains and services Homes for the aged. The NJWB has responsibility for the YMHA, YWHA and the Jewish Community Centers; these centers sponsor most Golden Age Clubs. Senior clubs which have close Synagogue or Temple relationships are often sponsored by the Jewish Sisterhood.

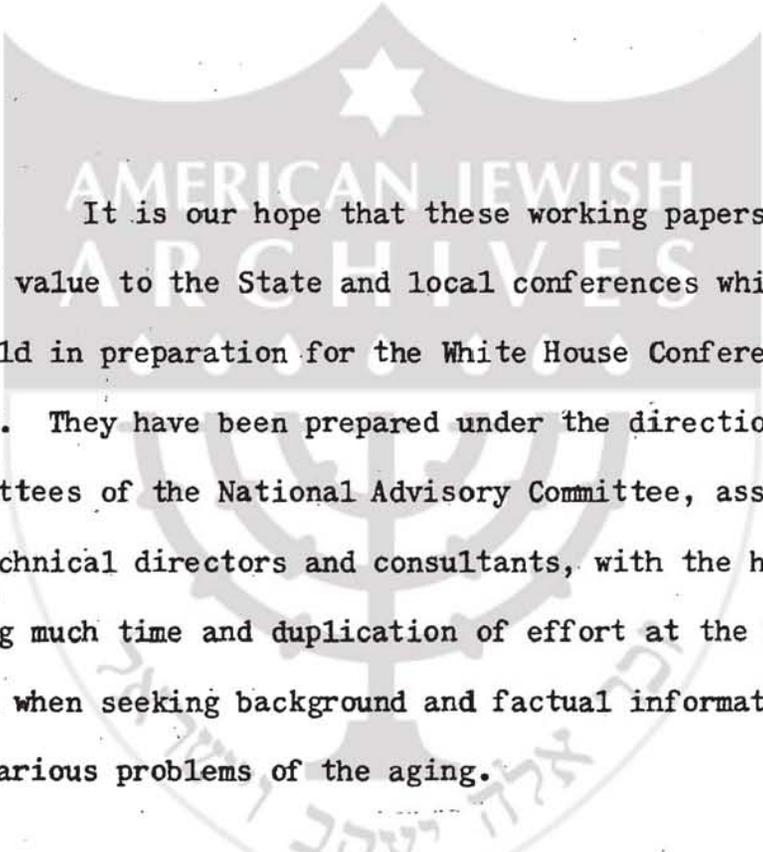
There are, at all levels, cordial relationships between the major religious groups, and a concern that there be religious content in the programs which are offered to the older people of the community. There are also cordial relations with government, educational and voluntary agencies, and with community funds and chests, revealing a general desire to use all available resources to do as much as possible for the welfare of the aging.

WHITE HOUSE CONFERENCE ON AGING

SUBJECT MATTER AREAS

1. Population Trends and Social and Economic Implications
2. Income Maintenance (including Financing of Medical Care)
3. Impact of Inflation on Retired Citizens
4. Retirement (Parts A and B) and Employment Security (Part C)
5. Health and Medical Care (including Institutional Care)
6. Rehabilitation
7. Social Services
8. Housing
9. Education
10. Role and Training of Professional Personnel
11. Family Life, Family Relationships, and Friends
12. Free Time Activities: Recreation, Voluntary Services, Citizenship Participation
13. Religion: Services of Religious Groups for the Aging
14. Research in Gerontology: Biological
15. Research in Gerontology: Medical
16. Research in Gerontology: Social Science and Psychological
17. Local Community Organization
18. State Organization
19. National Voluntary Services and Service Organizations
20. Federal Organizations and Programs

For further information contact the Governor's Designee in your State.



It is our hope that these working papers will be of value to the State and local conferences which will be held in preparation for the White House Conference on Aging. They have been prepared under the direction of the committees of the National Advisory Committee, assisted by technical directors and consultants, with the hope of saving much time and duplication of effort at the local level when seeking background and factual information on the various problems of the aging.

**National Advisory Committee for the  
White House Conference on Aging**



**Robert W. Kean  
Chairman**

The Committee on Religion is happy to present this Background Paper. It is the product of three writers representing the three major faiths. We are most grateful to the Rev. Donald Campion, the Rev. Harold Hass, and Rabbi Marc Tanenbaum for their willingness to explore and set down the common major tenets of their historical beliefs. We are also appreciative of the advice of Consultants and the help of our Technical Director, Miss Esther Stamats.

*W. J. Williams*

*Marc H. Tanenbaum*

*Raymond J. Gallagher*

Co-Chairmen  
Committee on Religion

Contents

Definition and Scope of Paper . . . . .	1
Common Grounds . . . . .	2
Situation of the Aged in Modern American Society . . . . .	4
Former Status of the Aged . . . . .	5
Increase in Numbers . . . . .	6
Social Change . . . . .	6
Change in Family Life . . . . .	7
Attitudes Toward the Aged . . . . .	9
Self-image of the Aged . . . . .	11
Needs of the Aging . . . . .	12
Conclusion . . . . .	19

## RELIGION AND AGING

Religion has to do supremely with the meaning of human existence. It is not concerned primarily with questions of "what" and "how" but rather with "who" and "why." Underlying the thought and activities of all major religious groups is the belief that the meaning of life is to be found essentially in a relationship to God. To Jew and Christian alike, religion is not simply an intellectual discipline nor institutionalized code of behavior, but is a total response to the activity of God in human affairs.

Religion has meaning for all of human existence from the moment of birth to the moment of death. It is a fallacy to think of it as having more significance for one age than for another. Rather, its significance is seen differently from the changing perspective of the various stages of the life cycle. Thus, advancing years may indeed bring with them greater openness to the meaning and message of religion or to certain aspects of that message. Some of the very characteristics of the aging process may make the questions of "who" and "why" of overwhelming importance.

In the following pages, age is observed from different vantage points but always in the light of the Judeo-Christian heritage which is the religious background of most senior citizens in the United States. The reference will be chiefly, though not solely, to organized religion. It is recognized that there are important theological

and organizational differences among the major faith groups. These have not been minimized or blurred over for the sake of bland agreement. In fact, it soon becomes obvious that each has something special to contribute to our understanding of, and service to, older people.

#### Common Grounds

It is not surprising, however, to find that a common perspective on aging should emerge from the fundamental teaching and practice of the major religious bodies. The Old Testament, which all hold in common as canonical Scripture, bears witness to the dignity of man, the beauty and worth of old age, and gives reassurance in the face of the infirmities and uncertainties attendant on the evening of life.

For the believer, the unalterable foundation of human dignity rests on the fact that "God created man in His own image" (Genesis 1,27). And within the Jewish tradition, it is the "imitation of God's merciful qualities" which the Rabbis held forth as the highest human ideal: "Be like God; as He is merciful and gracious, so be thou merciful and gracious."

To this dignity is to be added special honor with the advent of old age: "You must rise up in the presence of the hoary-headed, and defer to the aged..." (Leviticus 19, 32), "for gray hairs are a glorious crown, which is won by a righteous life" (Proverbs 16, 31).

As the sacred writing makes clear, "With the aged is wisdom, and length of days is understanding" (Job. 12, 12).

The Torah insists on the commandment which bids the child show love and reverence to father and mother. "Dear to God is the honoring of father and mother, for Scripture employs the same expressions about honoring and revering parents as about honoring and revering Himself" (Talmud). Filial reverence, the Rabbis held, was a dictate of natural religion and, therefore, had universal application.

But if honor attaches to old age, the Scripture also recognizes that length of days may bring moments of doubt and anguish. "Do not cast me off in my old age," the Psalmist cried, "when my strength fails, do not forsake me....Yes, even to old age and gray hairs, do not forsake me, O God, so that I might tell of Thy mighty arm to all the generations that are to come" (Psalms 71 (70), 9 and 18). It is in answer to such a plea that God spoke through His prophet: "Listen to me, O house of Jacob, all the remnant of the house of Israel, whom I have carried as a load from birth, whom I have borne as a burden from the womb-- and to old age I am still the same, till you are gray-headed will I carry you; I have borne, and I will bear; I will carry, and I will save" (Isaiah 46, 3-4).

Over and above what our sacred writings have to say about the dignity of old age and its concerns, are the passages in which we are

told incisively of the responsibility elders must shoulder in the community. In the Midrash, for instance, it is said: "There is an old age without the glory of long life; and there is long life without the ornament of age; perfect is that old age which hath both" (Genisis Rabbah, 69). And to the senior members of the early Christian communities, St. Paul and other spokesmen addressed earnest exhortation on their duty to build up the fellowship of the saints by their good example.

Paul urges Timothy, at one point, that in his position as leader of the community he should treat old people with special respect: "Never reprove an older man, but appeal to him as to a father; treat... older women like mothers" (I Timothy 5, 1-2). On the other hand we would remind old men and women about the importance of the example they set to young people: "Teach the older men to be temperate, serious and sensible -- men of vigorous faith, love and steadfastness. Teach the older women, too, to be reverent in their behavior, and not to gossip or be slaves to drink, but to be teachers of what is right, so as to train the younger women to be loving wives and mothers" (Titus 2, 2-4).

#### Situation of the Aged in Modern American Society

If the basic lines of the religious perspective on aging are clear from the above texts and other Scriptural sources, it remains

important that we use this perspective to survey the actual situation faced by the aging in contemporary America. Only thus can we understand that to which the major religious bodies can and must address themselves if they are to make an increasing contribution toward meeting the needs of older people in this country. The following survey is not meant to be a sociological or psychological analysis but a simple description of the field of operation within which religion must be prepared to make such a contribution.

#### Former Status of the Aged

The classic picture of the aged person is that of a venerable patriarch or matriarch, full of years of wisdom, accorded respect by tradition and in fact. To anyone familiar with the contemporary scene, such a portrait must appear as something divorced from present realities. It may be that in some parts of the world as yet untouched by the forces of industrialization, urbanization, and the hurried pace of a dynamic society, the aged still enjoy this prestige. Here in the United States, however, the very extent to which discussion of the "problems" of old age has been carried on in universities, legislative halls and community service conferences must serve to indicate that the status of the aged has undergone certain changes among us. What are some of the factors that have brought these about?

Increase in Numbers:

Here we have the most obvious change with respect to the aged. In the past, the mass of people in a given society had little anticipation of reaching an advanced age. Life expectancy at birth in the Roman Empire was 23 years; in 1850 in New England it was 40 years; in the United States in 1900 it was 47 years; today it is 69. In terms of sheer numbers of senior citizens, the picture of the aged in American society has been revolutionized. We know that while Americans over 65 years of age totaled three million in 1900, today their number stands at 16 million. By 1970, according to a conservative estimate, our 65-and-over group will exceed 20 million.

Social Change:

At the same time that the number of the aged in our national population vastly increased, the total society experienced immense social and technological changes. Such changes, it must be noted, give every indication not merely of continuing but of accelerating in the decades immediately ahead. It has been predicted, for instance, that if medical research brings vascular diseases under control, the elders will number between 30 and 40 million by 1975. But while modern society and a welfare-conscious society have combined to add years to the average man's life, they have yet to resolve many of the accompanying grave problems which trouble the aged and those who

feel a personal and social responsibility toward them.

Technologically, the world has been changing at a fantastically rapid pace. Because of this, much of the experience of the past may be of little relevance for an understanding of the present. Yet it was because they embodied such experience and wisdom, in days when these qualities were of greatest importance for the enrichment of a culture and even for its survival, that the aged were once so highly honored. Today, the basis for such a claim on the community's honor and respect would seem in part, if not wholly, to have vanished. Even if one discounts a considerable degree of romanticizing about the popular conception of old age in earlier centuries, the fact remains that many changes in the position of the aged have taken place in recent decades.

Change in Family Life:

Within the family, we know, changes in the family system and patterns of living have been extensive. Sociologists tell us more and more about the habits of the nuclear family and note at the same time the decline of three-generation households. The factors behind such a change need not concern us here. It is sufficient to mention the impact of urbanization -- the process which has changed the American population, within a brief span, from one which was dominantly rural to one in which city dwellers now constitute four out of

five of all Americans. In turn, urbanization has meant the growth in numbers of small dwelling units with limited living space and an accompanying tendency for members of the family at almost every age level to seek occupation and entertainment outside the family home and circle.

The result of these changes has been the increasing isolation -- physical and social -- of large numbers of our senior citizens. American life has been described by more than one observer as a society on wheels. This quality of mobility is related in very great part to the tendency of younger members of the family to move across the country in search of educational and occupational opportunities. Contrary to the popular myth which links retirement with automatic transferral to realms of golden sunshine in Florida or California, only 10 per cent of those who reach retirement move from the communities in which they live. Instead, it is the younger generation that has left the old neighborhood and the old home town.

The process by which the traditional role of the elder as the font of social wisdom has been depreciated is one which is accentuated in an achievement-oriented culture. More and more, society's symbols of prestige are bestowed as rewards for revolutionary accomplishments. In consequence, the disappearance of an ascribed status for the aged is not a unique occurrence on the American scene. More than one group

in the population has had to face up to the realization that the only meaningful status is one which is achieved. For the aged, unfortunately, after retirement from formal employment or after a family has been reared, the possibility of winning recognition or of introducing new meaning into one's life often seems nonexistent. In such an hour the aged may come to share the awareness Shakespeare once sketched with characteristic insight:

That time of year thou mayst in me behold,  
When yellow leaves, or none, or few, do hang  
Upon those boughs which shake against the cold,  
Bare ruin'd choirs, where late the sweet birds sang.

(Sonnets, 73)

In a sense, then, the status once ascribed to old age has been swept away in the tide of change that inevitably diminished the elder's significance as the guardian of traditional ways. By a strange paradox, too, the very age which has witnessed miracles of communication between races of men, around the world, and indeed across the heavens, has likewise been marked by a seemingly severe breakdown in the communication between living generations.

#### Attitudes Toward Aged

It is not only the external factors that are important as we study the situation of the aged in modern American society. Personal

and social attitudes are of equal significance. While these cannot be categorized with finality any more than the effects of social and economic developments on the aged can be predicted with certainty, there are a few basic attitudes that are discernible. First of all, there are attitudes prevailing in the general population with respect to the aged. Of the same, if not greater, importance are the attitudes or self-images which the aging and aged entertain of themselves. It need not be stressed that these two sets of attitudes tend to confirm and strengthen each other. In the past, as has been noted, these attitudes were related directly to social and cultural circumstances. In a society where custom regulated most of life, the aged -- as custodians of the ancient lore -- played an important part. Less challenge to ancient ways from social change; less, too, of old persons, and thus perhaps the relatively few who survived to old age commanded some respect on that score alone.

#### Current Attitudes Toward Aging and the Aged

In a society which places so much emphasis on competition and productivity, it is obvious that esteem for the aged tends to be imperilled. Many commentators on the contemporary social scene remark that older people in America are in fact not cherished or valued. Indeed, an orientation toward youth and the adventuresome spirit so characteristic of our culture seem to entail a corresponding tendency

to avoid or to cover over those things which remind us of old age and the terminus of death. Whole industries have been dedicated to the task of disguising the physical signs of old age. Sociologists report that the social rituals surrounding death and interment have more and more tended to veil the realities of such occasions and to eliminate the reminders they bring of our common human mortality.

Concretely, social attitudes toward aging have manifested themselves in the increasing trend toward segregation of the aged in rest or nursing homes and mental institutions. No one can quarrel with the use of such institutions when they provide services which cannot be otherwise furnished to individuals who are bereft of family ties or who require special medical or psychiatric care. What may be deplored from a religious and humane view is the situation described recently by a prominent psychiatrist. He spoke of the problems of conscience involved in the confinement of so many older persons in mental institutions on insufficient grounds other than the convenience of the family.

Self-image of the Aged:

Since the elders of a given generation are themselves in part, at least, the product of the culture in which they live, it is not surprising to find that their self-image is compounded of elements present also in the general population's conception of old age. To the

minds of the elderly there may come a sense of uselessness born of their awareness that certain physical and mental capacities are no longer fully at their command. They may yield to a sense almost of desperation as the fact of old age is driven home to their consciousness. For some the consequence may be withdrawal under frustration. In other cases, individuals may expend, with all too little real hope of return, their dwindling store of energy and resources in vain attempts to recapture the very appearance of youth.

But some, finally, will take a realistic and temperate view of facts and seek merely for the recognition on the part of others that they remain individuals with individual needs and interests, as well as sharply distinctive histories. They ask no special favors or attention beyond what the uncertainties of their medical and economic situation may demand in the way of public or private assistance. They accept calmly and with a minimum of regret the fact that others no longer have need of them or their services as they may have had in the past. What they ask, with good reason, is that they be not tagged and shelved as excess baggage, but that their remaining energies may find some outlet.

#### Needs of the Aging

Though attitudes toward aging may vary, the needs of the aged remain more or less unchanging from generation to generation. What

our century's social and historical developments may have brought into existence is a heightening of these needs or of certain ones among them. The chairman of the Senate subcommittee on problems of aging once remarked that the principal needs of the aged today are:

- 1) sufficient money; 2) sound health; 3) comfortable, suitable housing;
- 4) recognition in the eyes of others leading to a sense of personal dignity and self-respect; 5) meaningful activities in the years of retirement.

While it is true that the major religious bodies would express a concern for the satisfaction of these legitimate aspirations of the aged, and indeed might wish to lend the moral support of their testimony on behalf of private or public efforts to ensure such satisfaction to all in our society, it may be asked what pressing needs of the older person call out specifically for religion's ministry. We may here conveniently begin our consideration by recalling the list of special spiritual needs of the aging cited in the report on the First National Conference on Aging, in 1950: 1) assurance of God's continuing love; 2) the certainty that life is protected; 3) relief from heightened emotions; 4) relief from the pangs of loneliness; 5) a perspective which embraces both time and eternity; 6) continuing spiritual growth through new experiences; 7) a satisfying status in life and continuing acceptance by one's peers and younger persons.

At the present moment in our nation's historical development, we may ask what is, in sum, a sound outlook on the situation of the aged. One answer which will commend itself to most people with a religious background has been furnished recently by Senator Pat McNamara: "The country has not taken enough time and thought for the problems of its older citizens. No one is asking for a bed of roses for the oldsters but they have every right to expect -- and we have every moral obligation to insure them -- a meaningful and adequately secure existence in their later years."

Such a sense of social responsibility on the part of the community would go a long way toward correcting the "sense of uselessness" so aptly described by the late Margery Fry as one which "weighs heavily on many old people, particularly on those who have put themselves eagerly into their work, and above all, those whose work has been largely in helping others, such as mothers of families. It may almost be described as the penalty of a life well spent."

What, it may be asked, do the foregoing questions have to do with religion, or is it with them? Religion has traditionally concerned itself with the task of influencing or changing individual and group attitudes. Organized religion, in the West, has also tended to assume responsibility for action programs in the welfare or social service area. It has likewise been an inspiration and goad to individual and

community efforts toward the solution of social problems.

The basic insights or affirmations concerning human dignity and the meaning of old age are embodied in religious teaching. Some of these were spelled out in the brief summary of biblical thought presented in the introductory pages. The primary tenet of man's intrinsic dignity stemming from his creation in the divine image applies to human life at every stage in an individual's existence. From this fundamental insight derives such corollaries as that of the inviolability of human life. In addition, of course, the great religious traditions have ever taken account of the realities of sin, evil and death in human experience. These can, in the religious view, have meaning and be understood only in the light of their encompassment in God's providential plan.

It is of the essence of the viewpoint shared by the major religious bodies that the brief span of years allotted to a man on this earth be not regarded as limiting the total fulfillment of his life. Viewed in the light of an eternal destiny, then, the years of old age are revealed as having an importance as great as those of flowering youth or a creative and responsible maturity. Throughout each of the periods of conscious human existence, an individual's changing, yet ever fixed, relations to God and his fellow men remain

of supreme importance. To young and old, though the nuances may vary, the timeless imperative is still addressed: "Thou shalt love the Lord thy God...and thy neighbor as thyself."

Death, too, plays its implacable part in the gradual isolation which overtakes the aged. It has been estimated, for instance, that today as a result of a woman's greater life expectancy at birth and her tendency to marry a man older than herself, a married woman on the average can expect to be a widow for ten years before she dies. The passing of friends and other near relatives further contributes to the sense of aloneness the aged feel. In addition to the profound personal adjustments the older person may be required to make as a result of the loss of dear ones, the widespread practice of involuntary retirement will often demand of them not only considerable financial readjustment, if not hardships, but also acceptance of the psychological shock a change in longstanding work habits will bring.

Dr. Frederick C. Swartz, chairman of the AMA Committee on Aging, has noted some of the direct consequences of these experiences:

"Loneliness, rejection, lack of useful things to do, these emphatically affect the over-all health of the aged. For hardening of the arteries is certainly no worse than softening of the will to live. This applies to every human being. It applies particularly to the aged."

While the churches and synagogues have been expanding activities for children and youth on the levels of instruction and social action, have they made corresponding efforts commensurate with the special needs of the vastly increased number of older members in their congregations? In this connection, one may ask whether the respective traditions cannot profitably consult their inner resources with a view to elaborating services or programs aimed at enhancing the life of the senior citizen in its deepest aspects.

The various religious bodies do, in most instances, make provision for a special ministry to the infirm and invalided older person. Unfortunately, circumstances often limit the scope of such ministries. Under normal conditions, moreover, it proves extremely difficult to afford such individuals the benefit of full communal worship. Where the older members of a congregation can still assist in the congregation's rites or services, it should be a matter of common concern that they be brought into the fullest possible participation in any service or liturgy.

Sociologists and anthropologists have of late been reminding us of the importance of ritual in all areas of human association and behavior. On the strictly cultural or human level, these are seen to be the crystallization of meaningful experiences arising out of family

life, patriotic endeavor and the like. Ritual, in the context of religion, however, may have not only a key significance within a religious tradition as the vehicle of individual or group worship and sacrifice, but also a profound meaning as an expression of a religious interpretation of life.

In brief, we see many ways in which religion can strengthen the older person's awareness of fellowship in a congregation and can deepen the spiritual growth of the aging. Here it is important that religious leaders and religious people in general should examine their approach to the aged and their problems. In religious matters, as in other affairs, we must avoid the easy mistake of lumping the aged in one faceless mass. As sociologist Otto Pollak has rightly remarked:

The popular stereotype of old age as a unitary period is misleading and so is the conception of the aged personality as a rigid and static configuration of traits. Social scientists therefore should define old age as an advanced but nonetheless continuing process of human development and gauge its impact at consecutive stages...

(Social Adjustment in Old Age)

### Conclusion

The spiritual condition of the aging and aged is the product of many forces. The experience of life, on the one hand, renders one modest, pacifies and purifies the storminess of youth. Yet the failing of spiritual and intellectual freshness often renders one discouraged, chained to the past, estranged from reality. A constant challenge to the older generation is the task of understanding the need younger people feel to unfold their powers. The tension between the generations can be overcome only by spiritually healthy unselfish people. Younger persons in a family or community can contribute greatly to an easing of this tension by manifesting their abiding esteem for the value of each person, whatever his age or condition. From the materialist's viewpoint, age is worthless because it is unproductive. Where one comes to disregard or demean the dignity and worth of those who have lived beyond the day when they stand in the ranks of producers, the tendency grows to leave the aged out of all considerations.

Here it may be helpful to recall the words of one religious spokesman:

"We need to remind ourselves again and again that the chief end of man is neither to rejuvenate his purchasing power under the guise of 'retaining his productivity,'

nor is it to mitigate his mortal sentence. Rather it is to enjoy the inheritance of an eternal destiny in union with his Creator...We are profoundly and rightly concerned to relieve the animal grievances of boredom and triviality inflicted on men in their later years; but the bitterest of the grievances of aging is a spiritual one. It is the ultimate grievance of being denied the right to participate as a member of the 'beloved community' in the Divine plan of redemption 'for this world and the world to come'.

(Canon E. B. Ferguson, in  
Old Age in the Modern World)

The bond of common religious belief and worship unites believers in some sense into a community. For Christians this fact may take on specific theological significance if discussed in terms of such concepts as that of the mystical body of Christ. Within Judaism, the notion of the kehillah kedoshah (the holy community) conveys something of the same meaning. What, then, is the role and function of the aged in such a community or fellowship? Are the aged made convincingly aware of their continuing participation in it? This awareness, we all recognize, may come to have all the

more importance in the light of the inevitable changes taking place in the lives of the aged and in the web of human associations and ties which make up so great a part of them. What special qualities should the community of believers seek to display toward its senior members? Above all, one may ask for a mirroring of the divine attributes of eternal fidelity and of generous remembrance of past devotion and loyalty.

Moreover, religion must answer as to what the community and particularly its ministers can do to support older members, by religious and human means, as they confront the social and psychological trials commonly linked with the oncoming of old age and the imminence of death. Finally, to what extent can and should religion, as an organized social institution, seek to offer health, social and welfare services to the aged.

Older people must be aided to face the fact that age inevitably means some loss and limitation, and to utilize creatively all that remains to them. Age is the stage of life in which horizons are narrowed, but it is also the stage in which opportunity shows itself to explore hitherto unfathomed depths of religious and interpersonal experiences. A sense of religious vocation, too, can assist one to embark on new activities that have meaning. Retirement does not

necessitate the cessation of all vocation and social responsibility. For some, these might now take the form of participation as volunteers in services sponsored by their religious congregations or the larger community. The great faiths can do much to guide their adherents into constructive thinking along such lines. Above all, religion can make a unique contribution by the emphasis it puts on the aging process as a normal one, having a purpose and with hope for the future in terms of fulfillment in eternity.

Recently, a world-famous novelist gave testimony of what religion and belief have meant to him in the days when shadows grow longer. It may be quoted here as an indication of the most deeply personal result the ministry of the great religious faiths can be expected to accomplish.

If I were to give a reason for my fidelity to Christ in this evening of my life, I would call it his quieting of the radical anguish that is in me. [Anguish arises from] the tragedy implied in the fact of being a man, that is to say, a creature condemned to death and who lives under a stay of execution for an unknown length of time.

(Francois Mauriac, The Son of Man)

It may well be that the greatest challenge confronting religion is to strengthen, by enlightened instruction and fitting ritual, those who find themselves walking into that evening of which Mauriac speaks with such intensity. It is to be expected that each religious body or organization will seek to extend special service to the infirm, the invalid and the permanently institutionalized. Beyond that, as has been suggested above, each may seek to elaborate those features of its institutional life which may serve, in a sense, as a "rite of passage" to the aging and the aged.

In its teaching, ritual and organization, religion is equipped to contribute greatly toward making the latter years of earthly life a time of fulfillment. Amid the confusions naturally attendant on a period of rapid social and technological changes and in the face of the vastly increased number of persons living into old age, it offers the great service of helping us to remember the dignity of each person as an individual. It offers stability in the midst of social change so rapid that most familiar landmarks seem to be swept away. It locates individual worth and grounds status in what a person is by virtue of God's action, not in what a person has or accomplishes. It gives self-understanding and understanding of others in terms that help to bridge the generations.

Religion stresses acceptance and enables tensions and heightened emotions to be handled constructively. It provides meaningful associations in a fellowship of faith. It uses its influence to correct or to ameliorate trying social conditions. In illness, trouble, and infirmity, religion's ministers offer strength, comfort and aid in many forms. It stands with an individual at the moment of death, pointing ahead in hope, just as it had offered to an individual's life, over his allotted span of years, a framework of meaning and values.

In the years ahead, the major religious bodies must give themselves to more than the task of devising emergency provisions in the presence of pathological situations associated with aging and the aged. In terms of religion's own responsibilities and with a view to furthering our nation's social and cultural advance, it should seek to offer a series of positive affirmations and proposals for long-range action, by individuals and the community, with respect to our senior citizens, their needs and position in our society.