Report on Housing for the Aging

City Club of Portland (Portland, Or.)
REPORT 
ON 
HOUSING FOR THE AGING

TO THE BOARD OF GOVERNORS, 
THE CITY CLUB OF PORTLAND

I. INTRODUCTION

Your Committee was instructed to investigate and report on the adequacy of housing care for the aging in Multnomah County, such study to include consideration of, but not to be confined to, the following:

1. NEED
   (a) How many individuals 65 years of age and older are there in Multnomah County?
   (b) What is the estimated increase in that number in the next few years?

2. HOUSING AND LIVING ACCOMMODATIONS
   (a) Licensing and operating standards
   (b) Number of establishments and the capacity thereof
   (c) Character
      1. State institutions
      2. Individual homes
      3. Foster homes
      4. Boarding homes
      5. Hotels
      6. Private institutions
         a. Convalescent homes
         b. Rest homes
      7. Services permitting aging to remain in their own homes, such as:
         a. Homemaker service
         b. Home medical and nursing care
         c. Food services
         d. Friendly visiting

The Research Board, in making its charge, suggested that consideration be given to related problems of aging, such as:
   a. Health
   b. Recreation
      (1) What is there in the way of programs of clubs and multiservice centers as to offering recreation and leisure time programs?
      (2) Any standards for such programs?
   c. Education
      What is there in the way of adult education and re-training programs through schools, religious groups, social centers and libraries?
   d. Counseling and casework service
   e. Community organization, consisting of central planning bodies to study and define the areas of need, to provide for co-ordination.

The Committee's investigation of these fields disclosed that their ramifications lead far beyond the scope of a report on housing. They are mentioned herein only when they pertain directly to the area of this Committee's work. However, the Committee was deeply impressed by the urgent need for community organizations (Item E, supra) to assume, in addition, the duty "... to disseminate information and to seek out persons requiring assistance."

Such organizations might also plan and stimulate service by and for old folks—visit-
ing services, adult education, etc. They might investigate extension of school lunches type of program to the needy elderly. The responsibility of service to other old people would help greatly with the morale problems which come from the feeling of being unneeded and unwanted. The development of a sound program to supplement welfare payments with balanced meals, largely from surplus foods, might be valuable both from the standpoint of health and of economics (See Recommendation No. 3 infra). The Committee was very conscious of the vital importance of the related fields which could not be given adequate treatment in this report.

II. METHODS OF PROCEDURE

The mass of material which has been published in this field is an indication of the wide popular interest in the subject. The Committee found confirmation of this interest as it interviewed individuals and representatives of local agencies and groups, and as it studied articles in local newspapers, national periodicals, and the bulletins of governmental and public service organizations. A bibliography of literature on the subject and a list of acknowledgments are included in the Appendix.

Many studies of the problems of the aging, including that of housing, have been made at the national, state and local levels. The Committee has tried to restrict its original research to facets of the problem on which the production of new knowledge pertinent to our area seemed likely. Licensed homes for the aged in this area were surveyed by questionnaire (see Tables I and II and accompanying discussion) as part of the Committee's inquiry. A similar questionnaire approach was used with Licensed Nursing Homes, but the response was less complete. Analysis of figures supplied by the State Board of Health was informative, however (Tables III and IV, and discussion).

Members of the Committee interviewed individuals known to be interested and informed on problems of the aging, representatives of Public Welfare, of the Community Council, the Governor's Advisory Committee, the Vancouver Kiwanis Village, the Housing Authority of Portland, the Portland Development Commission, the Federal Housing Administration, the City Planning department, the Housing and Home Finance Administration, as well as architects and builders of such facilities. The Committee members also interviewed administrators of homes for the aged, manor type homes, hotel type homes and nursing homes and personally visited a sampling of such institutions as well as the Oregon State Hospital. In addition, the Committee was represented at the Oregon State Conference for the Aging (Salem, April, 1960), devoting particular attention to problems of housing the aged.

III. EXTENT OF FIELD

Age, as measured in years, is not necessarily identical with biological age. Some people at the age of 65 disclose fewer degenerative changes of their physiological systems than other persons of 45. Likewise, intellectual, motivational, emotional, and other psychological changes which accompany aging vary from individual to individual. Some persons at 70 or 80, (e.g. Churchill, Adenauer, Bertrand Russell, et al.) seem as intellectually and emotionally effective as many persons half their age. Individuals ranging from 65 to 90 or more years of age differ in strength, skill, endurance, appearance, intelligence, education, occupation, economic status, and social position; they have physical and mental disorders which cut across varied constellations of social, medical, and chronological characteristics.

Because it has some traditional and legal (e.g. social security laws) standing, and because degenerative changes do not occur earlier with great frequency, it is common to consider all individuals 65 years of age and older as "the aged." This arbitrary definition is believed to have the merit of simplicity and the demerit of forcing us into thinking in terms of a fallacious stereotype when we consider the aged human being. Studies and surveys indicate a current need for adequate housing, not only for the aging, but also for other categories of low income people.

Why Are They a Problem? 1) Numbers of Oldsters

The most obvious factor aggravating our present situation is the tremendous increase in the population in general, but in addition there is the factor of the increased life span of individuals. It is estimated that one-fourth of all the humans that have lived
to the age of sixty-five are still living. Projections indicate an increase in the proportions as well as in the numbers of elderly people.

In 1900 there were 3,000,000 Americans over sixty-five, representing four per cent of the total population. In 1959 there were 16,000,000 people over sixty-five, representing nine per cent of the population. It is estimated that in 1970 there will be 26,000,000 over sixty-five. (McNamara Committee Report—1959).

For the State of Oregon the 1950 census recorded 1,521,341 people in the state, of whom eight per cent were over sixty-five years of age, making a total of 133,021. The State Board of Census estimates that in 1970 the total population of the state will be around 2,132,363, of whom 10.1 per cent will be over sixty-five, representing a total of 215,448. According to The Governor’s Committee to Study the Problems of the Aging (1954) our old age population in the state is increasing at the rate of 3,000 per year.

In Multnomah County’s 1950 census, 10.3 per cent of the population was sixty-five years and older, and for the City of Portland proper, 9.7 per cent of the population was sixty-five and older. According to the McNamara Committee report of 1959, the average age at death, today, is seventy years. The average age at death in the year 2000 is estimated at eighty-two years.

Why Are They a Problem? 2) Limited and Deteriorating Incomes

National statistics show that in 1954, nearly half of the families headed by a person sixty-five or older had a gross annual income under $2,000, and about two-thirds of all persons aged sixty-five and living alone or with non-relatives had an income of less than $1,000 a year. Subsequent surveys indicate that to date the economic position of this country’s aging population has progressively deteriorated.

Nationally about one in every six over 65 were on Old Age Assistance in February 1960. These 2,378,000 individuals had no financial resources, or so little they were forced to become dependent upon tax-supported subsidy. Countless other oldsters are kept from public charity rolls by family and friends. The national monthly average as of last February was $66.98 for Old Age Assistance, including medical costs of about $10.00 per month per individual. This $800.00 per year represented total income for many, although some who own homes but have little cash income are aided, and about 600,000 of the 2,378,000 receive also some small benefits from Social Security’s OASDI (Old Age Survivor and Disability Insurance).

Also, nationally about three-fifths of all persons 65 or older had cash incomes of less than $1,000 in 1958. Another one-fifth had incomes between $1,000 and $2,000. In general the higher the age, the lower the financial resource. OAA reports show that while only one in ten of the age 65-69 group receives aid, one in three of those over 80 are on Assistance. Based on the 1958 Federal Reserve survey of the cash resources of the elderly it is estimated that one-half of our elderly are living on a substandard basis, without OAA support, but many with whole or partial support from relatives, friends, and organizations. The “poor but proud” group may have greater problems than those who actually apply for public assistance.

In Multnomah County as of March 1959, there were 50,860 persons 65 and over, and 6,671 of these were receiving Old Age Assistance, nearly one of every seven. About 35,000 were receiving benefits under the federal OASDI program, or more than three of every five.

Individual OASDI benefits currently range from $33 to $119 a month, and to a maximum of $178.50 for a couple; the average is $80 per month. Multnomah County currently pays up to $114 a month in OAA to a single person. Any OASDI payment is deducted from the amount of OAA for the one-third of beneficiaries who collect from both sources. Average state-county assistance payment is about $78 a month.

A recent Oregon Tax Commission study estimates that one-half of those 65 and over, including couples with one income, receive less than $2,000 a year, an additional 20 per cent receive less than $3,000, another 15 per cent under $4,000. It appears that around 10,000 in the aging group in Multnomah County were receiving no public funds. These, of course, have private incomes of some kind, whether large or small, and an unknown number receive even less than the full OAA or OASDI allowance. Many may be eligible for some assistance but decline to apply for it.
Locally the surveys of the South Auditorium and Eastbank Freeway groups by the Portland Development Commission show:

<table>
<thead>
<tr>
<th>Annual Income</th>
<th>South Auditorium</th>
<th>Freeway</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under $4,000</td>
<td>84%</td>
<td>74%</td>
</tr>
<tr>
<td>Under $3,000</td>
<td>72%</td>
<td>50%</td>
</tr>
</tbody>
</table>

The overwhelming bulk of the families and individuals in these brackets requires housing at a maximum cost of $45 to $55 per month. Not more than one-third of the families and not more than one-tenth of the single individuals are, or desire to be, home owners. The individuals require no more than one bedroom and 62 per cent of the families need one to two bedrooms.

Although the total number of aged will increase, several factors may ameliorate their financial situation. Education and earning capacity are in direct relationship. Allowing for the increase in population, proportionally six times as many now graduate from colleges as in 1900. Other educational exposure is similarly greater. About 24% of those over 65 are foreign born, in contrast with 7% of the total population. The language and cultural barriers to economic success should diminish through ensuing years. Real wages have increased since the turn of the century despite the major effect of the depression of the 1930's which impaired the middle years of earning for the present oldster. Accumulating savings should be easier for the aged of the future than it was for the current old-timers. Social Security today covers 9 out of 10 workers. Twenty years ago it covered less than one-third. Private pension plans today cover over 19,000,000 active employees. About 3,000,000 were covered in 1940.

Bright and significant are the figures from Old Age Assistance. In 1960, although there are 3,000,000 more aged than in 1950, the number on public assistance has dropped from 2,789,000 to 2,378,000. While the aged group currently increases at over 30,000 per month, the OAA program is decreasing at about 3000 per month.

Why Are They a Problem? 3) Old People Live in Old Houses

The United States Department of Commerce reports in its census of housing that as of 1950 there were 14,000 "dilapidated" homes out of 131,000 units in the City of Portland. This represents 11.7 per cent. This percentage is close to the estimated 9.7 per cent of the population over sixty-five years of age in 1950, and there may be justification for assuming some correlation between dilapidated homes and the ages of their occupants, because of the following facts:

1. The Portland Housing Authority reports that more than 5,000 persons over age sixty-five in Portland depend entirely on old age assistance for their support, and more than 75 per cent of them live in "substandard"* dwellings.

2. Not all the residences in the South Auditorium redevelopment area are dilapidated, but the area was selected for redevelopment because it was substandard in general. Based upon a partial count and its experience in relocating families from the South Auditorium area, the Portland Development Commission estimated that 57 per cent of the people were over sixty-five.

3. A survey of a 22-block segment of the Eastbank Freeway between the Steel Bridge approaches and North Russell Street disclosed more than 25 per cent were over sixty-five.

Thus, while we have no definitive statistics as to the correlation between aging people and aging residences, all the available data indicate that the problem of adequately housing the aging is significantly more acute than the housing problem for the general population.

Dislocated Families Absorbed

Up to this date, urban redevelopment and highway construction in the Portland area have not left families homeless, and there does not appear to be an over-all shortage of housing.

* Substandard, according to the Housing Authority of Portland, means in violation of city codes relating to safety, sanitation and decency.
The urban renewal laws require the development of a feasible plan for the relocation of occupants of the area in decent, safe and sanitary quarters which are within their price range, before an urban renewal contract will be executed. No such requirement applies to the highway construction programs which will displace several times as many households.

The Portland Development Commission reports that from the urban renewal project known as South Auditorium, 524 households thus far have been relocated, including 139 families and 385 single persons, predominantly elderly. These account for about 45 per cent of the area’s occupants, and relocations are continuing for the remainder as they are required to vacate. Among those now moved, fourteen families and 34 individuals chose other quarters which the Development Commission later found to be substandard; and they declined help toward better housing. As of August 1, it was estimated that the South Auditorium project would require relocation for some 315 families and 853 individuals.

The PDC staff reports that these people have been moving into better quarters at somewhat higher rents. Few of the rentals are for more than $50 per month, however. They indicate that plenty of housing seems to be available in the city, though the mass relocations have taken up most of the available low-cost housing in the close-by southwest area.

Efforts should be made to apply the urban renewal technique to the problems of people who are certain to be displaced by other public improvement projects. In response to an earnest plea by Portland’s Mayor Terry D. Schrunk in February, 1959, the Oregon Legislature passed a bill on this subject. So far it has not been implemented. Public attention focusing on the problem may result in the establishment of facilities to deal with it, either by the city or state. Such a step would benefit not only the older people who must move, but also property owners who are eager and to a large extent capable of supplying the needed housing, both for the older people and for others displaced by public improvement programs.

With no state highway relocation help available, the Mayor sought the aid of the Portland Development Commission. Nearly fifty cases were handled, with costs underwritten by the Housing Authority of Portland. The Portland Development Commission reports that probably all of the 181 families and individuals (398 persons) constituting households displaced in the 22-block area of the Eastbank Freeway have relocated themselves in existing structures in other sections.

The City Planning Commission reported, under date of February 9, 1959, that proposed freeway construction within the city limits of Portland will displace 4,000 families at a minimum, and the report on the Stadium Freeway published by the State Highway Commission* showed that this figure might be increased to 5,500 families.

Aside from the potential future problem, a major current example is the proposed Foothills-Stadium Freeway, the route of which was recently determined by the State Highway Commission. This is the first large area made up mostly of rental properties to be hit by freeway building. Some 1,162 households are reported involved in this project, probably 1,000 of these being single tenancies, and mostly in the lower income brackets.

No law requires that the displaced renters receive any relocation services or moving costs, and neither owners selling their properties nor the highway department are required to give more than the customary month’s notice to move.

To solve this problem in Chicago, the Illinois Highway Department pays the city’s Tenants’ Relocation Office a per-person fee for assisting those displaced by highway construction.

Zoning changes may also contribute to the housing problems of old people. There are several areas on the East side of the Willamette River which have been re-zoned for commercial use in the new city code. These areas contain about 3,000 individual residences. It seems likely that all but a few are in the “dilapidated” category and will be replaced by being converted to industrial or commercial uses.

In summary, it seems probable that urban renewal, rezoning and highway construction may retire from use a considerable percentage of the 14,000 homes found dilapidated in 1950 by the Bureau of the Census. The two area surveys mentioned above indicate the likelihood that a disproportionate number of these homes is occupied by persons 65 years of age and over.

Because older people are less receptive to new ideas and new attitudes they tend to remain in familiar neighborhoods. It is as though the people and the houses get old together. Naturally, as the houses get older the values and rentals decrease, which happens to fit the economic circumstances of people as they get older and are less productive, or are placed on retirement lists. This means that in terms of planning for municipal development, any effort at changing the dilapidated sections of a town will inevitably involve housing problems for the older residents therein, and will result in some conflict between the displaced persons and any municipal administrative authority involved.

Why Are They a Problem? 4) Changing Cultural and Environmental Factors

Another factor affecting housing is the changing cultural patterns that attend modern developments of easy transportation and communication. We think nothing at all of moving from one city to another in search of better jobs, different climates, etc. The result is that many older people are separated from their families, their children and their friends, and have no one left in their immediate neighborhood who is particularly concerned with their welfare. In a statement for the legislative interim committee on Public Welfare, Maxine Roecker said the aged person

"has suffered grave losses. He or she has lost income, or his employment due to age, a man has lost the status he enjoyed as the breadwinner, the head of the family — a woman has lost her familiar role as a mother needed by her children, active in her neighborhood, school or church — they have lost friends, and relatives, and perhaps even their husbands and wives — they have lost physical vigor and health."

Even in families where an "old timer" has been accepted for years, there often develops a point at which the deteriorating personality and mentality make his care within the home setting an extreme trial for all members of the family.

In addition, housing units of today are different from those of the past. Most of the recent units and those now under construction being smaller, the space limitation makes it impractical in many instances for the older people to live with the younger families. Both young and old need living space for themselves.

The decline of the family as a potent economic and social group makes accommodating to the special needs of the aging a matter of general social, political and economic concern rather than a simple family function.

In spite of the ramifications of this problem, your Committee feels that housing is the key to a practical, positive approach, and consequently has concentrated its attention in this area. The solution of the housing problem may ameliorate other problems commonly associated with old age. The solution, however, is complicated by such variables as the individual senior citizen's attitude toward housing, based to a considerable extent on his own background and cultural values, his ability to pay, his work status, the extent of his family and the relationships that exist within the family, his physical capacity, his need for supervision of various kinds, and the climate and cultural community in which he wishes to live.

Housing should be planned to protect against physical injury by use of adequate hand rails, minimal stairways, and adequate lighting. It should also furnish availability to public transportation for easy access to medical facilities, recreation, shopping centers, and so forth. Detailed standards for housing are available in the literature (see appendix).

IV. TYPES OF HOUSING SOLUTIONS

The ideal place for the older person probably is his or her own home as long as it is feasible. However, when circumstances of one kind or another make it impossible or difficult for the older person to maintain his own home, then there should be available

* 1960 Census figures are not yet available.
in each community such a variety of facilities that he or she can select the one that is most satisfying. If an older person has the opportunity of making a choice, he is usually contented.

Facilities for the elderly should be varied and should be adapted to provide for those in good health as well as for the physically or mentally handicapped. Such variety offers a factor of security to older people — for security is their greatest concern.

A solution of the housing problems of the aging will aid in the solution of many of their other problems. A 1959 report by the State Public Welfare Commission shows that of a random sampling of old age assistance recipients, more than 78 per cent were able to care physically for themselves, only 6 per cent were bedridden, and the other 15 per cent could get along with some help from others. Clearly, therefore, it behooves the community to address itself to the housing problems of these elderly people who can care for themselves, as well as that smaller percentage who cannot.

**IV.-a HOMES FOR THE AGED — General**

The licensed “home” for aging persons provides domiciliary care for those who require special attention because of physical, emotional, social and spiritual factors. When any aged resident in such a Home has required nursing care for seven consecutive days, and it appears that further nursing care is required, then such person must be removed to another type of institution licensed for rendering nursing care.

The Committee has not evaluated the standards set for licensing of either domiciliary or nursing type housing for the aging. These standards, established with professional advice and comparable with those of other states, are based upon readily visible factors, subject to easy inspection, such as cleanliness, numbers and types of personnel, quality, quantity and variety of food, availability of specialized services, etc.

So far as we could learn, a satisfactory objective method of evaluating the quality of care rendered has not yet been developed anywhere. At best, any attempted survey could only represent subjective impressions. The Committee’s consideration of standards, therefore, has been limited to their functional effect on the supply of housing in this area.

The types of licensed facilities for domiciliary care range from the three-bed residence to the deluxe “manor.” They all provide some measure of relief to the housing problems of our elderly citizens who no longer desire or can maintain their own homes.

These Homes are advertised as “retirement homes,” “homes for the aged,” “hotels,” “homes for the elderly,” “homes for the retired,” “manors,” “guest homes,” “care homes,” “havens,” and “boarding homes.”

Your Committee made a questionnaire survey of such facilities available in this area. The responses are grouped in accordance with licensing provisions of Oregon laws:

<table>
<thead>
<tr>
<th>Capacity Range</th>
<th>Non-Profit Homes</th>
<th>Capacity Operated for Profit</th>
<th>Capacity Total Homes</th>
<th>Total Capacity</th>
</tr>
</thead>
<tbody>
<tr>
<td>3-10 beds</td>
<td>0</td>
<td>26</td>
<td>171</td>
<td>26</td>
</tr>
<tr>
<td>11-33 beds</td>
<td>4</td>
<td>14</td>
<td>213</td>
<td>18</td>
</tr>
<tr>
<td>Over 33 beds</td>
<td>10</td>
<td>2</td>
<td>205</td>
<td>12</td>
</tr>
<tr>
<td></td>
<td>14</td>
<td>1174</td>
<td>589</td>
<td>56</td>
</tr>
</tbody>
</table>

The Homes for the Aged in the Metropolitan area that answered the survey questionnaire of this Committee represent 98 per cent of the Homes in the Multnomah, Washington, and Clackamas Counties.
Table II.
Current Occupancy by Welfare and Age Group Classification
of Licensed Homes Operated for Profit

<table>
<thead>
<tr>
<th>Capacity</th>
<th>No. of Homes Reporting</th>
<th>Total Capacity</th>
<th>No. of Beds Occupied</th>
<th>No. of Welfare Guests</th>
<th>Ages</th>
</tr>
</thead>
<tbody>
<tr>
<td>3-10 beds</td>
<td>21</td>
<td>134</td>
<td>118</td>
<td>57</td>
<td>6</td>
</tr>
<tr>
<td>11-33 beds</td>
<td>14</td>
<td>213</td>
<td>183</td>
<td>115</td>
<td>6</td>
</tr>
<tr>
<td>Hotels</td>
<td>2</td>
<td>205</td>
<td>Usually filled</td>
<td>75%</td>
<td></td>
</tr>
</tbody>
</table>

Accommodations in the Homes licensed for less than 33 guests vary considerably. These homes report that they had 118 single rooms, 91 double and 25 dormitory for three or more.

Because of hardship encountered by our aged in making changes from one institution to another, many homes for aged are providing nursing home care and some are qualifying as nursing homes for a part of their facilities under the laws of the state of Oregon. No doubt some of the guests should be in nursing homes, and on the other hand it is quite possible that there are guests in nursing homes who could well be cared for in a home for the aged at considerably less cost to the guest.

**IV.-b HOMES OPERATED FOR PROFIT**

Most of the homes with less than eleven beds are operated by couples or widows who have renovated their large residences, thereby helping to maintain their old homes and at the same time rendering a service to those less able to care for themselves. The rates vary in accordance with accommodations and services rendered, from a low $85 to a high of $170 per month. Most homes charged from $100 to $150 per month. The most vacancies are in smaller homes with dormitory accommodations.

The survey indicates that most homes maintain no vacancy list. There is a continual demand for accommodations in the more modern homes of the moderate price range from $90 to $150 per month. The monthly rates are largely controlled by the allowance for food and shelter set by the County Welfare offices, which is $101 per month in most cases. The rates for those not on welfare are determined by the type of accommodations and the service rendered. Most of the homes provide a private room, some have a water closet, some merely have a wash basin. Several larger homes have apartments, while some have dormitories for two to four persons.

**IV.-c CONVENTIONAL APARTMENTS AND HOTELS**

Many older persons are housed in low-cost conventional apartments. These apartments are generally old buildings with limited advantages for the elderly. Hundreds of elderly persons, particularly single ones, are living in small hotels in the downtown area, most of them on low incomes.

These may be city licensed as hotels or apartments and have no recognition by the State Board of Health unless licensed as homes for the aged to satisfy Welfare requirements.

**IV.-d SPECIAL TYPE HOTEL ACCOMMODATIONS**

A new solution in housing for some of Portland's aging residents, particularly those who prefer the downtown environment, is the “Whitney Plan” adaptation of the Carlton and Taft hotels, containing 140 and 91 rooms respectively.

Here board and room facilities are available at a flat $101 a month for retired men and women. The charge is the amount allotted those on public assistance, and three-fourths of the tenants are receiving such aid.

This Plan provides a multiple-choice menu, rooms with maid service, free jitney service to medical clinics, some music programs, religious services, and space for hobbies.
An attraction to the Carlton and Taft is that the aging are able to retain a measure of independence, can go and come at will, and are close to the center of things.

IV.-e NON-PROFIT HOMES FOR THE AGED

Non-profit Homes for the Aged cannot be classified readily. A list of non-profit homes is included in the appendix. There is considerable variation in sponsorship, facilities, and services offered, charges to guests, and entrance requirements.

The age and financial status of persons entering the non-profit and charitable homes for the aged have been changing in recent years. Most of the guests now entering are over the age of 75 and are boarders instead of life guests. The Social Security and the Public Welfare programs tend to keep the aged in their own homes longer — during which period a considerable portion of their savings is often dissipated, leading them to apply for welfare aid. At this point they usually go into homes for the aged, or nursing homes. This increased age of guests entering the homes means a greater likelihood of medical problems involving deterioration. As a result the larger private homes for the aged as well as publicly-operated homes have found it imperative to, and are now providing more nursing home accommodations.

The survey indicates considerable interest in expansion of facilities of non-profit homes for the aged, including nursing home additions. Six of the homes for the aged are planning additions to accommodate a total of 125 guests, in addition to the nursing home facilities now under construction and being planned. Most of the homes for the aged have found it difficult to provide anything except food and shelter for the aged from available income, and must rely on volunteer help and donations if their activities are to be expanded to provide rehabilitation services.

 Apparently the State hospitals are being used to some extent as Homes for the Aged. As of June 30, 1958, there were 7,331 persons in the state-owned hospitals in Oregon. The largest, Oregon State Hospital, in Salem, held 3,472 of which 1,178, or 34 per cent, were 65 years of age and over. (No age figures were available on the other institutions). This percentage of hospital patients in the aged category indicates clearly that such institutions are used by many families as the solution to the housing of difficult elderly relatives.

IV.-f RETIREMENT HOMES

The “manor” type of home is essentially a co-operative apartment building in which the tenants are owners and participate in policy decisions on service, maintenance, etc. The tenants customarily pay a “rental” or operation cost fee on a monthly basis in addition to their original purchase cost. The tenants usually have life tenure with restricted re-sale privileges.

This type of housing serves well the financially self-sufficient older person. Its costs make it an impractical solution for the housing needs of a major group of the aging. (See Appendix II.)

In some cases this type of housing requires full payment of capital costs by the first occupant and the unit so paid for reverts to the institution upon the death of the first occupant. Over the years this provision may increase the availability of such accommodations to persons of limited means. Specific provisions to cover capital costs vary considerably, making generalization in this report impractical.

IV.-g INDIVIDUAL RESIDENCE

A high percentage of aged persons are housed in their own residences or in the residences of their relatives. The latter arrangement increases the complexity and the difficulty of human relationships within the family as well as complicating the space problems. The desirable continuation of the aging in their own homes is handicapped by shortage of community services where family attention is not available. “Homemaker” service, home medical and nursing care, food services, and “friendly visiting” service, would be helpful to the isolated, but relatively self-sufficient, older persons.

Oregon welfare authorities have had no homemaker service, but are starting a program with six homemakers, two of them assigned to the elderly. A welfare commission official stated that the agency stood willing to buy homemaker service from private
sources. The Family Counseling Service had plans for setting up a homemakers service, but gave it up for lack of funds.

At present county welfare departments are paying for some housekeeping help, such as practical nurse care, a once-a-week housekeeper, a boy to split wood. In certain instances, for example, they pay for converting heating to an automatic type where the aid recipient is no longer able to carry in fuel.

The Clackamas County Health Department staff is making a pilot study of home nursing care to determine its value and the demand for it.

Supplementary to the proposal of classified property tax reduction by the Governor in his address to the Oregon State Conference on Aging, April 28, 1960, the Oregon State Tax Commission prepared a report, A Study of Property Tax for the Aged, June 1960.* If a measure providing homestead tax relief for the aged is adopted by the Oregon State Legislature and serves to ease the demand on institutional type "homes," the increased residence of older people in their own homes will bring increased need for itinerant services.

**IV.-h FOSTER HOME CARE**

Foster home care has been gaining favor as a means of providing housing for the elderly who are no longer able to maintain an independent abode, but who do not need institutional or nursing home care.

When the aging person recognizes that he cannot continue in his own home, it is an acute blow to his independence. Foster homes resemble the home situation he must leave more nearly than does an establishment with numerous guests. If such a family-living arrangement meets his basic needs, the aging guest may have a better chance of remaining a part of his community.

A greater variety of living situations can be found in private homes, which facilitates adjustment if placements are wisely and voluntarily made. Many older people, in fact, find their own places to stay, sometimes in a friend's home.

Agency-supervised foster home care has been highly developed in England and European countries. Several of our states license foster homes. Some states license such homes with as many as four or six beds. In Oregon a home with more than two beds is licensed as a Home for the Aged and is subject to regulation as such.

New York State has licensed private homes for the past fifteen years. Some California counties are licensing such homes. Hawaii licenses what it calls "personal care homes." Some communities have referral centers to locate foster homes, and some institutions operate foster home departments.

Public assistance agencies in Oregon have been somewhat reluctant to develop this type of housing because each is allowed only one or two persons, as compared to three or more in the licensed Homes for the Aged. Locating and supervising a private home to assure good and honest care requires more time and money per client.

In some Oregon counties the foster home is a recognized means of providing care for persons receiving old age assistance. In most of the smaller communities, this may be the only means of keeping an elderly person in familiar surroundings. Klamath County is a leader in this direction. The staff of the State Welfare Commission is encouraging the counties to develop such programs.

The Portland area has seen relatively little development of the foster home program for the aging. However, official interest is quickening. Homes for the Aged and Nursing Homes have been relatively plentiful, which diverted attention from Foster Homes on the part of public assistance authorities. A start is being urged as a way to provide happier situations for some recipients now going to licensed homes.

Foster homes are increasingly used in this area and elsewhere by the Veterans Administration. In the V.A. nationally, the program dates back only nine years. Last year, social workers of the Portland Veterans' Hospital placed 23 recovering patients in boarding homes, and 60 in nursing homes. Eleven of the 23 went to live in private

* Refer to Appendix III.
foster-type homes. Two-thirds of the 83 persons were above 60 years of age. More private homes could be used if the staff had time to develop the list.

Foster homes are definitely preferred for certain types of patients and the V.A.'s neuropsychiatric hospitals make greater use of foster homes for improved patients. The Roseburg hospital last year placed twenty in foster homes, and six in licensed homes throughout the state. The American Lake hospital near Tacoma placed 122 in foster homes, only nine in licensed homes.

**IV.-I NURSING HOMES**

Our limited survey of nursing homes in the Portland area indicates that changes are being made rapidly toward larger and more modern facilities. A substantial majority of patients in these Homes are in the old age category and the problems of rehabilitation and returning of aged patients to their homes, or to Homes for the Aged where there is a substantial difference in cost, is a matter of concern. Because of a lack of adequate housing for the aged, many patients remain in nursing homes longer than necessary. This problem is being relieved somewhat by the non-profit Homes for the Aged which have a nursing home in conjunction with regular accommodations.

Health Department figures indicate that Oregon has one Nursing Home Bed to every 2763 persons, as compared with one bed for every 9258 persons in California. Nursing Homes Licensed in the Tri-County Portland area are as follows:

<table>
<thead>
<tr>
<th>Capacity Range</th>
<th>Operated for Profit Capacity</th>
<th>Non-profit Capacity</th>
<th>Total Homes</th>
<th>Total Capacity</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 to 9 beds</td>
<td>6</td>
<td>3</td>
<td>9</td>
<td>32</td>
</tr>
<tr>
<td>10 to 50 beds</td>
<td>55</td>
<td>7</td>
<td>62</td>
<td>516</td>
</tr>
<tr>
<td>51 and over</td>
<td>11</td>
<td>3</td>
<td>14</td>
<td>1165</td>
</tr>
<tr>
<td>TOTALS</td>
<td>72</td>
<td>13</td>
<td>85</td>
<td>1713</td>
</tr>
</tbody>
</table>

Twenty-five nursing homes answered the survey questionnaire of this Committee, representing only 35 per cent of those operating for profit.

The combined capacity of the twenty-five homes was 935 beds. Fourteen Homes reported that they were usually filled to capacity. Three Homes indicated they had a waiting list. Fifty per cent of the patients were welfare recipients. Rates in the Nursing Homes range from a low of $124 up to $450 per month.

Types of facilities range from the ultra-modern, to average and down to the older type of converted residence. All are licensed as Nursing Homes. Some advertise as "sanitariums," "convalescent homes" and "hospitals."

According to the Hospital Facilities Office of the Oregon State Board of Health, all of the nursing homes throughout the state have been examined and inspected from the construction standpoint, and classified into three groups: suitable, replaceable, and unsuitable. For statistical purposes, beds located in relatively modern fire-resistant structures and which are considered generally safe from the standpoint of predictable hazards are classified as suitable beds. Beds located in structures which render a community service and are not a public hazard, but are at the same time obsolete and not feasibly modernized, are classified as replaceable beds. Beds located in buildings which are made of non-fire-resistant materials or are structurally defective in some way, and therefore are regarded as a public hazard are classified as unsuitable beds. For the state as a whole the total figures are as follows: suitable beds, 2468; replaceable beds, 617; and unsuitable beds, 3042.

The Hospital Facilities Office reports that the tri-county nursing home beds are as follows:
Table IV.
Nursing Home Beds in the Tri-County Area

<table>
<thead>
<tr>
<th>Area</th>
<th>Total Beds</th>
<th>Suitable Beds</th>
<th>Unsuitable Beds</th>
</tr>
</thead>
<tbody>
<tr>
<td>Multnomah County</td>
<td>2,256</td>
<td>952</td>
<td>1,304</td>
</tr>
<tr>
<td>Washington County</td>
<td>236</td>
<td>123</td>
<td>113</td>
</tr>
<tr>
<td>Clackamas County</td>
<td>250</td>
<td>129</td>
<td>121</td>
</tr>
<tr>
<td><strong>TOTALS</strong></td>
<td><strong>2,742</strong></td>
<td><strong>1,204</strong></td>
<td><strong>1,538</strong></td>
</tr>
</tbody>
</table>

As can be seen from this table, 56 per cent of the Nursing Home beds are in structures considered to be unsuitable. These beds are to be found in 62 of the 84 homes. Some of these 62 homes, however, have beds in suitable structures as well.

Dr. Robert M. Heilman, Director, Chronic Disease and Licensing of Care Facilities of the Oregon State Board of Health, has observed that rising costs are making it more difficult for the smaller homes to provide adequate staff. Two of the smaller homes have closed in the past year for this reason, and two others have closed because of the death or disability of the operator.

Table IV indicates ample quantity but doubtful quality of nursing home beds, in relation to observable construction hazards. The state does not classify nursing homes in relation to the less tangible qualities but restricts its evaluation to the overt factors. Due to the difficulty of obtaining accurate information, the Committee deemed it inadvisable to undertake an independent survey of the quality of nursing home service. Further study of this subject could be informative.

V. FINANCIAL ASPECTS OF APPROACH TO SOLUTIONS
V.-a PUBLIC HOUSING ACCOMMODATIONS

The Housing Authority of Portland presently operates four permanent, low-rent, public housing projects, encompassing a total of 628 dwelling units. Only 96 of these, or less than 15 per cent, are adaptable to the needs of the senior citizens of low income and are presently occupied by them.

A Housing Authority is a federal-local partnership authorized by the U.S. Housing Act of 1937 (later amended) and by the enabling laws of most states. Each Housing Authority is a local and individual entity, created by action of a local government (for example, city or county), and follows local policies formed by an appointed, non-salaried board of directors. Its purpose is provision of decent, adequate housing for low-income families otherwise living in substandard situations.

A local Housing Authority must obtain formal approval from the city to build homes. When approved, it determines the location, buys the site, employs architects and engineers, and awards construction bids to the low bidder. Funds may be borrowed from the Public Housing Administration (a Federal agency) or from private sources for temporary financing. Bonds sold to private investors provide the "permanent" money. The Federal Government guarantees the bonds via a contract to make up deficits of rent revenues in meeting operating costs and bond retirement. This Federal "contribution" is intended to make possible rental prices within the budget possibilities of low-income families.

The extra-low incomes of elderly persons create a problem of "financial feasibility" if the rental revenue plus the maximum Federal contribution does not balance the acquisition and operating cost of a project. Income eligibility of the renter is checked, and those whose incomes rise beyond established limits must move out. Those who don't pay their rent are evicted as in private rental housing.

Under the Housing Act of 1956, families in which the head of the household or spouse is 65 years of age or older are identified as "elderly families" and become eligible for priorities for housing accommodations. The Act of 1956 also provided that low-rent housing projects might be designed with special features for the elderly tenant within the limit of $500 per room of extra cost.

In 1959 the Housing Authority of Portland, first established to care for war housing
problems, made a survey at the request of the mayor. This 10 per cent sampling study indicated that in 75 per cent of the cases, elderly welfare recipients were living in substandard dwellings. (Substandard means in violation of from one to fifteen of the City Code items relating to safety, sanitation and decency.) It also indicated that the average gross income of the elderly person was less than $100 per month. Based on this apparent need the Housing Authority of Portland is now planning a high-rise, housing project, primarily for the elderly, to be located in the downtown, low-income area.

This will be a 13-story building containing 150 one-bedroom apartments, half to be for single persons and half for couples. The Housing Authority has acquired the land and is drawing up final plans. The City Council has approved the program. In order to avoid the "old folks' home" stigma, 39 units will be built next door to house young families with pre-school children.

Recent surveys estimate as many as seven qualified applicants for every available apartment for the elderly, due partly to a location near the heart of the city's highest concentration of older people who receive Old Age Assistance, and partly to the expected rental range from $25 to $45 a month. To be eligible persons or couples must not receive more than $3,200 a year nor own more than $9,500 in assets other than auto and furniture.

V.-b. NEW DIRECT LOAN PROGRAM

In July 1960, Congress set aside $20 million to finance construction of housing for the elderly under a direct loan program to be administered by the Housing and Home Finance Agency as authorized in the Housing Act of 1959.

This will provide a pilot program of financing under extremely low interest rates. Processing of applications will probably be done by FHA. At this time it seems improbable that Oregon will have a participant group. Should the program continue, it could be of importance to this area.

V.-c HILL-BURTON ACT

The Hill-Burton Act of 1946 authorizes grants to the states for surveying their hospitals and public health centers, and for planning and aiding construction of additional facilities. In 1954 it was expanded to include federal grants to aid in building and equipping Diagnostic and Treatment Centers, Nursing Homes, Chronic Disease Hospitals and Rehabilitation Facilities. The appropriated monies are made available to states on the basis of population and per capita income. In the fiscal year 1959-60, Oregon's share amounted to approximately $1,800,000, or 1 per cent of the total federal allocation.

Agencies eligible for federal grants under this law must be non-profit. They cannot be formed for the sole purpose of receiving these grants, but must be pre-existing. They must offer services open to the entire community. They must meet objective criteria for operating standards adopted at the state level and approved by the United States Public Health Service. There is one final requirement, the furnishing of a "reasonable amount" of free patient care, but this requirement may be waived in cases where the "state agency" and the Surgeon General of the Public Health Service are satisfied that it would not be financially feasible.

The State Board of Health (the state agency) has the responsibility for the allocation of Hill-Burton grants in Oregon. According to Mr. Harry Palmer, director of Hospital and Medical Facilities, Survey, Planning and Construction for the Oregon Board of Health, since 1955 a total of $896,300 has been allocated to the construction of nursing homes throughout the state. The $302,700 spent in the tri-county area since 1946 has assisted in the construction of 92 beds.

It should be noted that the Board of Health allocates these funds primarily on the basis of bed needs within the state, other factors being relatively equal. In other words, a requesting project located in a county with an existing ratio of one bed per thousand people would have priority over a project initiated in a county with an existing bed ratio of three beds per thousand.
Grants to Nursing Homes can be up to one-half the total cost. The sponsor may borrow an amount not to exceed one-third of the total value of the completed project, including land, all buildings, and furnishings. The sponsor must provide the remainder which must be in the form of available cash or liquid assets. Only 54 beds per year could be built if all Hill-Burton funds available to the State of Oregon for Nursing Home construction at past appropriation rates were spent. This is hardly enough to keep up with normal attrition.

V. THE ROLE OF PRIVATE ENTERPRISE

The Oregon Apartment House Association opposes public housing for the aging, describing it as excessively expensive and a burden on the taxpayers. It warns against providing housing ahead of actual demand. It estimates that vacancies are running between five and eight per cent of the 40,000 apartment units in the Portland area, and that most of these are in the lower rent units.

OAHA spokesmen declare that the potential for housing in existing older structures is greater than current needs. Dozens of older, large homes can be converted to house 500 or more of the elderly, they maintain, but progress in this direction is impeded by inflexible city codes. In their opinion, some of the city’s requirements are unnecessary in providing “decent, safe and sanitary” housing, and they make conversion costs too great. They urge a modified code between new and old housing that would allow less costly adaptation to the needs of the aging.

For example, they point out, the code requires a private bath and prohibits cooking facilities in sleeping rooms. In Los Angeles the light housekeeping code permits one bath for as many as four rental rooms, and small pullman kitchens in sleeping rooms. Portland allows a pullman kitchen if it is enclosed by doors or cabinet work, but not in a housekeeping room. Adoption of the Los Angeles provisions could make hundreds of additional low rent units available in the Portland area.

They believe it currently impossible to construct new apartments inside the city that would be within financial reach of the majority of the retired elderly. They describe older apartments now available that would require rentals of $125 a month if duplicated new. One older structure within walking distance of downtown, rewired and improved, now is renting 32 housekeeping rooms at $30 a month, including utilities.

The current President of OAHA states there are older units to rent for as little as $22 a month, though they would be considered substandard, mainly because they lack private baths. Units with private baths, located in buildings with elevators, are available at $38.50, she added.

Owners of private rental property view with some concern the possibility of adoption of a program of public housing in Portland before an inventory of existing housing suitable for older persons is taken. OAHA insists that no condition exists in Portland at this time that presents an immediate emergency in the housing of older citizens. It suggests the following:

1. An inventory of present vacant private housing units in Portland in the lower-rent levels be made.
2. That a committee composed of rental housing owners inspect present substandard housing to make suggestions for possible improvements.
3. That encouragement and assistance be given by the city to those who are able to convert hotels into housing for older citizens (The Whitney Plan).
4. That FHA provisions for rehabilitating privately-owned older properties into safe and decent housing be explored.
5. That the promotion of “private incentive for profit” housing under Section #231, Federal Housing Administration, be explored.
6. That a gradual upgrading of presently occupied, non-code housing be undertaken to produce better housing in existing dwellings.
7. That modifications of presently existing codes for housing be made that will permit reasonable compliance consistent with safety and health.

During World War II, a clearing office was maintained, listing available living
quarters, and proved itself valuable. The obstacle to its continuance is the cost of its operation.

A 1958 Los Angeles report stated that in the first five and one-half years of a program to recondition dilapidated housing, 17,474 units had been brought up to program standards in slum sections, and 3,742 units had been ordered demolished. The Committee learned that although the City of Los Angeles is armed with improvement laws, it employs teams of persuasive inspectors to win compliance by owners without legal action. Appeals to pride in community have been found effective and threat of abatement has forced upgrading of other substandard apartments. In the city's conservation program, nearly 184,000 items of improper maintenance were ordered corrected, and over 7,030 serious occupancy violations were found.

The Los Angeles report contains little comment on the role of the aging and retired in the home rehabilitation picture. The report states that the elderly often lack the means for such work themselves, and that they are not considered good credit risks, so find it difficult to borrow money to have it done. Only 18 per cent of substandard housing was found to be owner-occupied, and among these about one-fourth were considered financially able to make the required improvements. For one-half this was deemed to be possible, though a hardship, and for the remaining one-fourth, actually only about 4 per cent of all substandard housing, the work was considered an extreme hardship. The city left this 4 per cent until last, and some buildings continue unrepai red. But the city takes the long view that these properties will change hands sooner than the others, bringing in owners who more probably can make the improvements and repairs.

V.-e FEDERAL INSURANCE TO STIMULATE PRIVATE ENTERPRISE

The Federal Housing Administration was established to facilitate the financing of rehabilitation or conversions of existing structures and the construction of new facilities by insuring private loans made for these purposes. Several of the National Housing Act's sections could assist those who finance housing for the elderly.

1. For home ownership, if the borrower is 62 or older, he may obtain special assistance in the shape of purchase of his loan by Federal National Mortgage Association at 2.5 points discount instead of the current four to seven points.* Older people also may be insured on loans covering down payment and closing costs. This provision under Section 203 (b) of the National Housing Act (the FHA basic loan insurance program) is one of the Act's direct recognitions of the housing problems of the aged. FHA will insure up to 97 per cent of a single family home mortgage up to $13,500. Builders in the Portland area currently are offering new houses for as little as $8,250. At this price FHA insured terms call for $250 down payment and $50.03 a month for thirty years. Taxes and fire insurance increase payments to $69.53 a month. Such homes are within reach of many retired couples on social security and modest additional income, but at present are not within reach of those on public assistance or no more than its financial equivalent.

2. Mortgage insurance for rehabilitating existing structures for rental purposes is provided under Section 207. Loans are up to 90 per cent at five and one-quarter per cent interest, for up to thirty-nine and one-quarter years, but there is no special FNMA assistance.

Two Oregon structures were proposed for "207" rehabilitation, and one was approved locally but was withdrawn for other uses. No other proposals have been offered by property owners.

Mobile home courts or parks (not the mobile home itself), a housing area of

* Federal National Mortgage Association was rechartered under the Housing Act of 1954 and established in the federal government as a secondary market facility for home mortgages, financed to the maximum extent feasible by capital provided by private investors and further backed by federal funds. Sellers of mortgages to FNMA must buy at least 2 per cent of proceeds from the mortgages sold in FNMA common stock. As a special aid function, FNMA does not require stock purchase when mortgages offered are from housing programs for the elderly. FNMA's function is to stimulate investment in home mortgages by making a secondary market readily available to such investors.
increasing importance to the elderly, may have FHA on their borrowing to a maximum of 75 per cent of value under Section 207.

These sections should stimulate activity for the housing of some of the aged if other financial factors are amenable.

3. Rental housing for the elderly is the purpose of Section 231 of the National Housing Act, in effect since September 23, 1949, which is the successor to the portion of Section 207 under which the Sunset Home in Eugene was completed. Oregon offices of the Federal Housing Administration have issued insurance commitments on four projects—the first in the nation under "231"—with a planned total of 697 units. At least seven other projects are in formative stages. Two in the construction phase are in Portland and one in Newberg, while those being discussed would be in Salem, Eugene, Baker and other cities as well as in Portland.

Basically this section provides 100 per cent financing, over a maximum period of 40 years at 5½ per cent interest*, through FNMA. Interim financing must be private, and the banks have shown a readiness to provide that.

FHA’s maximum insurable amount for “231” construction is $9,000 per unit for garden-type structures, and $9,400 for elevator types, plus 100 per cent financing for kitchen-dining, library, recreation and hobby rooms, chapels, infirmary and other non-residential space.

Section 231 loans insured to 100 per cent are available only to mortgagors classed as non-profit making, such as fraternal, religious, or charitable groups. FNMA buys the loans at around 2½ points discount, including fees. Profit-motivated mortgagors may be insured to 90 per cent.

But up to this point even non-profit sponsorship has not proved it can produce new housing at rents that a majority of the elderly can afford.

First in the nation under “231” is Rose Villa Manor, to provide 207 units in a garden-type project costing $2,066,000. It is rising near Willamette View Manor south of Milwaukie, with some of the same organizers. Second is Friendsview Manor at Newberg, with 136 units on five floors, costing $1,450,000. Its sponsor is Friends Church. The third approval is for Terwilliger Plaza, with 341 units on twelve floors, and costing $3,700,000. Sponsors are the Oregon Education Association and the Oregon Teachers Retirement Association. Construction has started. New projects are being proposed.

These three, quite obviously, are not for the aging who are dependent upon public assistance or who have no other resources than social security payments or their equivalent. In the first “231,” announced rents will range upward from $85 a month. In Oregon, the public assistance allowance for rent cannot exceed $40 a month.

Pisgah Home Colonies, 19 units, the fourth project with FHA insurance commitments, will offer board and room at welfare rates. This is a long-established, privately-endowed institution.

Section 231 has had extensive use nationally. Various sponsorships, providing various services, have a rental range from $45 to $200 and more per month. The extent of subsidization by the sponsoring group modifies the cost to the individual.

4. Two types of FHA mortgage insurance relate especially to urban renewal. Mortgages for restoring and rebuilding residential properties where a renewal plan is removing blight may be insured under Section 220 of the National Housing Act. This is available for investors, builders, developers, and home owners. FHA will insure a loan for construction or rehabilitation of rental structures containing five or more living units, up to 90 per cent of the estimated value of a rehabilitated building or of the replacement cost of new multi-family construction. Occupant mortgagors may be insured to 97 per cent of cost. Insurance commitments can range up to $50,000,000 to a public mortgagor.

* Although this (5½ per cent) is the stated interest rate of the Act, the actual costs are subject also to the prevailing discount rate and an insurance charge.
Elimination of slums and blighted conditions and prevention of deterioration of residential properties are the purposes of Section 220. The relation of old housing to old people makes this FHA provision pertinent to the problem of housing the aged.

5. People displaced as a result of some form of governmental action, such as urban renewal, freeway construction, code enforcement, etc., can have housing loan insurance under Section 221. An occupant mortgagor of one to four family dwellings may borrow with FHA insurance up to 100 per cent and a builder up to 85 per cent. For ten or more units, a non-profit mortgagor may borrow up to 100 per cent, while a profit-motivated mortgagor may go up to 90 per cent. Generally, the insured maximum is $9,000 per unit. Maximum maturity is forty years. Interest rates are five and three-quarters per cent on single family loans, five and one-quarter per cent on multi-family loans, plus one-half per cent mortgage insurance premium.

Section 221 has been a factor in the recent relocation of 95 families in Vancouver, Washington, and of fifteen families in Portland. No statistics are available on the age groups involved.

The Portland Development Commission is currently exploring possibilities of utilizing one or both of these FHA programs to upgrade large old houses. No proposals, however, have as yet been presented to FHA offices here. Their likelihood is not considered bright because these programs are not attractive to private lenders even with a federal insurance guarantee.

6. Insuring loans to non-profit housing corporations and cooperative housing is the purpose of Section 213. Benton Manor, a 37-unit development by Corvallis Apartments, Inc., is a recent example in Oregon. Relatively little use has been made of this Section in the Northwest, although it has been an important factor in other areas.

While Sections 203 (b) and 231 of the FHA finance-insurance program are pointed specifically toward the housing of the elderly, Sections 207, 213, 220 and 221 may well serve the elderly incidental to their broader purposes.

VI. INTERESTING SOLUTIONS ELSEWHERE

Several approaches which have been adopted elsewhere are under active consideration by local groups. They appear worthy of consideration by the community at large. These include the following:

VI.-a KIWANIS VILLAGE

Almost 20 per cent of the population of Victoria is age 65 or over. The Victoria Kiwanis Club, in 1952, set up a non-profit, non-charity corporation which has built Kiwanis Village, which today consists of 34 double units and eight single survivor units. With a value of $350,000, there is no indebtedness but a reserve of over $60,000 for future construction.

One-third of the financing was provided by grant from the government of the Province of British Columbia. The City of Victoria donated the land, and the balance has been raised by public donations from members and friends of the Kiwanis Club.

The Village is open only to married couples. The requirement for residence is "worthiness," and the Society has set up a scale of values to determine those most worthy. Average age of the residents is over 70.

Each dwelling comprises a living room, bedroom, kitchen and bathroom and rents for $20 per month. Electricity is additional, and costs about $15 per month (which includes heating). It was expected that the Village would just break even when the taxes amounted to $8 per month per unit. Recent legislation has abolished taxes on the property, so this will provide more margin for maintenance costs and other expenses.

The Society is now engaged in planning and raising money for an additional 38 units in the Village, and for a Villa to house 75 to 100 single people. The same type of financing will be used. The completed project will be valued at $1,250,000.

It is emphasized that the residents are not on charity, but that they are on their
own and pay rent and other living expenses just as if they were living in commercial rental property.

A local Kiwanis Club is actively investigating this type of project.

VI.-b RYDERWOOD WASHINGTON

What per cent of retired people would willingly choose a rural setting in the face of sociological studies which insist that older people wish to remain close to the center of full community life is not known, but 180 retired couples have chosen to live in isolated Ryderwood, a rehabilitated former logging town 32 miles northwest of Longview, Washington.

Seven years ago, California real estate interests purchased the 30-year-old town with 222 acres, from the Long-Bell Lumber Company for $90,000. Organized as Senior Estates, Inc., they added a reported $65,000 for rehabilitation. Their stated purpose was to provide inexpensive home ownership for retired couples, and to make a profit while doing this.

On the approximate 200 houses, prices were set at $2,500 for a four-room house, $3,000 for five rooms, $3,500 for six rooms. Down payments ranged from $200 to $300. Buyer of a four-room house pays $20 per month in principal and 6 per cent interest, plus $2.20 for taxes and insurance, and $7.60 for water, sewer maintenance, street lights and garbage collection. Those buying the larger houses pay somewhat more.

Payments extend over a 12- or 13-year period. No buyer was allowed to pay up in full, but was required to continue payments over the full period on a remaining balance of at least a few hundred dollars. Only couples with incomes between $130 and $250 a month were accepted.

All but two of the current 183 homes in Ryderwood are reported to be occupied. Any second purchaser pays the seller the amount of his cash equity, plus actual cost of improvements without charge for his own labors. Senior Estates, Inc., is reported to have received more than 30,000 inquiries from all over the country.

Ryderwood has a grocery and market, a barbershop, and a volunteer fire department. City management is under five directors. The town has a dozen or more social and activity clubs, an active church committee, a community hall—and a six-acre pond stocked with fish. Couples who do not drive a car are discouraged from moving in. Some do not drive, but rely on neighbors to take them to nearby cities. Two years ago the community started an attempt to find some industry to provide piece work for those wishing to supplement social security and other income. No such enterprise has been found.

Most of the residents range between 65 and 75 years. Its management believes Ryderwood is the only community of its kind.

Abandonment of logging operations in the vicinity of Portland might make similar projects feasible, e.g. Vernonia and Grand Ronde.

SECTION VII.
CONCLUSIONS

In contrast to the prevailing impression the Committee did not discover any permanent catastrophic deficiencies affecting housing of the aged. Rather, it was impressed that without any master plan, normal social forces seem—slowly but definitely—to be providing compensations for and solutions to the housing problem of the aged individual. The Committee did discover, however, some areas in which specific actions can facilitate normal social progress in the problem of housing for the aging.

A. Housing Is Related to Income

A high percentage of elderly people are currently living in substandard housing from the standpoint of structure, sanitation, safety and aesthetics. The major single factor that tends to promote this condition is the low income of the majority of our aged population.
The independent, partially independent, and "poor but proud" aging are additionally handicapped by the erosion of purchasing power which has affected fixed dollar savings. For example, the present 80-year-old may have started saving in 1900, at which time his dollar would buy approximately nine loaves of bread. At the present time the same dollar buys little more than three loaves. This deterioration in the real value of money has hurt and continues to hurt the frugal elderly citizen who has saved with the hope of avoiding dependency. It has forced large numbers to apply for public assistance. The purchasing power of many an old person permits him only marginal or substandard housing, except as governmental or benevolent institutions provide adequate housing with little or no return on the investment.

Evidence presented to the Committee indicates that if guests can pay only the amounts allocated by Welfare for housing, food and nursing services, new homes for the aged and new nursing homes cannot be constructed and operated by private enterprise. Some home operators have stated that higher rates are charged the non-welfare guests to offset the deficit from serving the welfare clientele. The picture should consistently improve in future years because of expansion of all types of retirement and pension programs.

B. Financing Housing Is the Big Problem

Sums presently available for care and housing of the low income aging are insufficient to support the construction of additional facilities. The old people who need housing most cannot pay enough. Therefore, money to cover construction costs is the big block in the housing field.

FHA insured loans have accomplished fine things for those elderly who can afford the manor type of housing and also for projects where strong sponsorship provides subsidy in materials or service. But when lenders are not interested in FHA terms and when the low income elderly citizen is competing with others who can better pay the costs of construction and operation of housing, the gap can be bridged only by some form of subsidy. The success of the program depends upon the strength of the sponsor.

The Hill-Burton Act now provides a capital aid program for assistance in construction of hospitals and nursing homes. If the funds for nursing homes were increased under the Act, this aspect of the problem could be eased.

The burden of capital requirements might be eased by support through popular subscription, and through labor donation (e.g. as in construction of Portland's Zoo and OMSI). These approaches are desirable but have obvious limitations.

C. Divergent Pressures in Society Increase the Cost of Housing and Caring for the Aged

1. Persons who are concerned with the quality of services and facilities for the aging quite naturally and properly push for continually higher standards. This, of course, increases costs of operation and of construction. The currently operating home finds that agreements with guests on a fixed rate (lifetime) basis are increasingly difficult to maintain. Operational cost-cutting may affect service adversely. Rising standards for physical facilities, coupled with increasing construction costs, compound the difficulty of adding to the number of low-cost and charitable facilities.

2. Building codes for new housing and for remodeling of old housing for the aging contain many requirements which make construction costly. Claims are made that safe and decent housing units for the aging could be developed in large older houses and in other buildings if the building codes could be interpreted or revised to permit lower remodeling costs.

3. Any publicly supported program for the aging involves expenditure of funds which can be raised only by voluntary contributions or taxation. This puts support of the aging in direct competition with all governmental functions and in direct opposition to the reluctance of taxpayers to increase the tax burden.

D. Housing Solutions Should Be Varied As Are the Needs

Old people are just like the rest of us only more so. They tend to be less adaptable than younger people; many feel highly insecure; often they are reluctant to change
dwellings even when their housing is very inadequate. Arbitrary solutions to the individual's housing needs may create very difficult situations.

Elderly persons differ in characteristics, in preferences and needs regarding housing. No single type of housing answers all the needs of all the aged. They need all kinds of housing. The requirements of those who need help range from assistance in retaining a place in their own, or their family's home, through domiciliary or nursing care in homes to accommodations in public institutions. Many of the old folks would be happier in a foster home than in a home for the aged, and the cost should be no greater. Allowing a wide variety of choice by the individual best meets his needs and those of society. Individual differences must be recognized and accommodated.

Our studies indicate that there is some need for an increase in the number of available beds in Homes for the Aged and Nursing Homes. This need is not extremely acute now in terms of numbers, but it can be expected gradually to increase as the percentage of the population in the higher age brackets increases. The urgent need appears to be for replacement of the unsuitable physical facilities in existing Nursing Homes and Homes for the Aged.

E. Relocation Aid Is Needed

Up to this date, urban redevelopment and highway construction in the Portland area have not left families homeless. There does not appear to be an over-all shortage of housing, but it does appear that many people live in substandard housing.

However, it is apparent that the displacement problems caused by the Eastbank Freeway are a small sample of the total which will be created as such development continues. Adequate low-cost housing is increasingly scarce. The State Highway Commission compensates owners for buildings razed but assumes no obligation for discommoding the renters.

Except for the relocation help provided by the P.D.C. in the urban renewal project, there seems to be no source of information or assistance for the evacuated tenant. The elderly renter, whose evacuation notice may be inadequate, is faced with a difficult readjustment when he must suddenly compete for economy housing and has no one to help him.

F. Housing Information Needs Wide Dissemination

Information on housing needs to be made available to those who need it as well as to those who can do something about it. The Committee has found no central "clearing house" for housing information although one would be helpful to the aging and to agencies which assist the aging. Lack of information about available housing is often the reason why elderly persons live in substandard housing.

Among the agencies which have expressed an interest in aspects of this problem are the Oregon Apartment House Association and the Public Welfare Commission. This is an area in which we believe the most can be accomplished with the least effort and expense.

G. There Is Need for Specific Legislation Toward Assuring Proper Management for Retirement Homes

Oregon has been fortunate in the character and ability of the promoters of retirement homes. However, because there appears to be no specific legislative control over the process of promotion and organization of retirement homes, the possibility exists that the aging might be victimized by poorly-managed promotional efforts. Oregon's "blue sky" law, providing regulation of certain corporations, does not cover retirement homes, because these are interpreted to involve only sales of a property right. Up to this time, no complaints against any retirement home projects have been received by the Oregon Corporation Commissioner.

The elderly investor in a retirement home is more vulnerable than the average business investor, both because he has run out of time to recoup losses, and because his investment is likely to be disproportionately large in relation to his assets. Protection should be required to assure proper use of the capital investment of the participants. Legal uses of such funds should be clearly defined. Prepaid operating funds should be held as trust funds.
SECTION VIII.

RECOMMENDATIONS

Your Committee recommends that the City Club:

1. Support and encourage the efforts of the State Board of Health to eliminate unsuitable nursing home facilities.

2. Propose that the state accept an obligation to assist in relocating people displaced by highway construction.

3. Recommend formation of an agency for the purpose of collection, coordination and dissemination of information regarding available housing and services for the aging, and which would seek out the elderly person who needs assistance and acquaint him with what is available.

4. Urge emphasis on alternatives to institutional care, such as foster homes, and on supplementary services.

5. Urge the State Legislature to study legislation designed to protect investors participating in homes for the aging.

Respectfully submitted,

Frank C. Allen
Merlin Blais
M. M. Ewell
Charles Isaak
J. O. Johnson
Joseph Matarazzo, Ph.D.
Donald McKinley, M.D.
Justin N. Reinhardt
Don J. Campbell, Chairman

Approved August 25, 1960, by the Research Board for transmittal to the Board of Governors.

Received by the Board of Governors September 7, 1960, and ordered printed and submitted to the membership for discussion and action.

APPENDIX I.

NON-PROFIT HOMES FOR AGED — TRI-COUNTY AREA

Altenheim

Operated by the General German Aid Society. Provides care for both life guests and boarders. Licensed for 43 guests. The home has 33 single rooms and 5 double rooms. Board rates range from $95 to $125. There are now 5 life guests and 33 boarders, most of whom are over 75 years of age.

Baptist Home for the Aged

Operated by non-profit corporation consisting of members of churches affiliated with North American General Conference. Provides care for life guests and boarders. Licensed for 125 guests in Home for Aged and 20 in Nursing Home unit. Board rates range from $100 for single room to $150 for room with bath. Home has 100 single rooms, 6 double rooms for couples and 8 apartments. Home not restricted to Baptists, but members of affiliated churches have preference and reduced rates. There are 73 life guests and 57 boarders. Ten boarders are welfare recipients. Eighty-five per cent of guests are over 75 years of age. The Home encourages guests to care for themselves as much as possible.

Fairlawn Home and Hospital

A non-profit, non-sectarian facility with accommodations for 70 hospital patients and 20 other guests. It is operated by a Board of Trustees consisting of members
of Lutheran Churches. Board rates range from $90 to $115, depending upon degree of ambulation. There are a few welfare patients. Hospital care ranges from $200 for basic nursing care to $325 for complete hospital care in private room. With its professional staff, the home-hospital provides all degrees of geriatric care. A 25-acre tract permits much outdoor therapy. (A new facility to be operated as a home by the Lutheran organization is now being constructed on the site of the former Good Samaritan home and will accommodate 150 guests when completed late in 1961.)

**Lutheran Pioneer Home Inc. (Colton, Oregon)**

A non-profit, non-sectarian, retirement and nursing home. Operated by a board of trustees consisting of members of Lutheran Churches. Licensed to provide care for 37 guests. Board and nursing rates range from $90 to $184. The Home has 8 single rooms, 7 double rooms, and 5 dormitory accommodations. Home is not restricted to Lutherans and has several vacancies in the old aged quarters. The Home provides nursing care, stroke rehabilitation, and occupational therapy. Have plans to expand as soon as money is available.

**Maccabees Portland Home**

A private, non-profit home for the aged operated by the Maccabees, an insurance company. Has three life guests at the present time, all of whom are over 75. Home has accommodations for 19 guests.

**Mann Home**

An endowed residence that is licensed for 64 guests.

**Masonic and Eastern Star Home**

This home is supported and owned by the Grand Lodge of AF&AM of Oregon, and is jointly supported by the Order of the Eastern Star and the Grand Lodge. Accommodations are for members only. It is licensed for 90 beds and is filled to capacity with waiting list. The Home provides complete care as needed including nursing, clothing, etc.

**Multnomah Retirement Home**

Operated by Multnomah County as both a nursing home and a home for the aged boarders. Rates for boarders classed as ambulatory cases range from $90 to $101 per month, Nursing Home rates $124 to $184 per month based upon welfare rates. Maximum capacity is 280 guests. There were 245 welfare cases in the institution at the time of survey. There were accommodations available for 25 ambulatory cases. Of those in the institution 39 were under 65 years of age, 71 between 65 and 75 years old, and 169 over 75 years old. There are no single rooms. There are 7 double and all others are in dormitory-type wards. Home accepts patients and guests who are able to pay their own way, those who can pay only part, or those who are totally on welfare. Preferences are given to residents of Multnomah County. There are no other restrictions.

**Pisgah Home Colony**

Operated by a non-profit, non-denominational corporation. Licensed for 21 guests. Board rates range from $95 to $101. New building is being planned to care for 26 guests.

**Northwestern Christian Home**

Operated by the National Benevolent Association of the Christian Churches. Provides life care to members of Christian churches. Licensed for 46 in the Home for the Aged, and five in the Nursing Home. Most of the guests of the Home pay 2/3 of Social Security or pension. The home is a modern church-operated Home for the Aged with 33 single rooms and five double rooms. Home is filled to capacity with approximately 45 on waiting list. Forty-two of the guests are over 75 years of age. The home plans to increase facilities by adding 16 beds to the nursing home.

**Odd Fellows Home of Oregon**

Operated by Odd Fellows Grand Lodge of Oregon for benefit of members of the Lodges. Accommodates 85 guests.
Oregon Baptist Retirement Home

Operated by non-profit corporation consisting of members of the Oregon Baptist Churches. Provides care for life guests and boarders. Licensed for 28 beds. Board rates range from $90 to $125. The Home has 26 single rooms, and 1 double room. The Home is not restricted to members of Baptist Churches. At the present time there are five life guests and 19 boarders with the average age over 80 years. The Home plans to increase facilities by 35 additional beds.

Patton Home

Operated by a non-sectarian, non-profit corporation. Licensed for 65 guests. Has 65 single rooms with rates from $105 to $150. A hotel-type of operation with recreation and service programs.

Robinson Jewish Home for the Aged

The above Home is restricted to care of Jewish guests only, operated by a non-profit corporation consisting of interested Jewish people in Portland who contribute toward the expense of the Home if there is a deficit. The Home is licensed for 44 beds. There are only 17 guests in the Home, of which nine are welfare recipients. The monthly rate is $175 per month. All accommodations are double rooms. They provide limited medical care. Have a physician and nurses available when needed.

Mt. St. Joseph's Residence

Operated by Catholic Sisters of Mercy. Licensed for 107 ambulatory guests in the Home and 120 in the Nursing Center. Board rates range from $90 to $225 per month, and Nursing Homes rates range from $142 to $350 per month. Most of the accommodations consist of double rooms. The Home is usually filled to capacity with many on the waiting list. About one-fourth of the guests are non-Catholic. Approximately 60 are welfare recipients. They now have under construction a recreational hall, a chapel, a dormitory for the nuns and four double rooms for couples.

St. Jude's Home, Inc.

A nursing home under Episcopal auspices licensed for 53 guests, located in Gresham. The Home has 12 single rooms, 12 double rooms and three wards. Nursing rates range from $124 to $200. Not restricted to members of Episcopal Church. Complete nursing care and some therapy and recreation program provided. About 90 per cent of guests over 65 and on welfare. Home is filled to capacity and will expand facilities for 50 more guests as soon as funds are available.

APPENDIX II.

COOPERATIVE APARTMENT TYPE HOMES — Examples

Terwilliger Plaza

A non-profit cooperatively owned apartment is now under construction. Although sponsored by Oregon Education Association, it is managed by a separate nine-member board of trustees, and is open to people of 62 years and over from all walks of life. Its 342 living units are available on a membership fee of $2,000 to $4,000 plus monthly rent of $85 to $170. No food service is provided in the fee, but a restaurant is available in the building. Members will have the use of an automatic laundry. Garbage and waste disposal are provided. Facilities include an auditorium, hobby and craft rooms, a library, and a nine-bed infirmary with nurse on duty. Financing is by a Portland bank with FHA mortgage insurance and a commitment by F.N.M.A. to take over the mortgage upon completion of the building.

Willamette View Manor

A non-profit, non-sectarian retirement home built and operated by a board of trustees who serve without remuneration. It was paid for in its entirety by Founder's gifts from the people who live here, and as the entire property valued at $5,500,000 is entirely paid for, the future program will provide the largest charitable operation of any single retirement home in the West. The $100 per month service fee charged
entitles the Founder to all meals, all utilities, cleaning and upkeep of their apartment, all laundries, participation in all hobbies and recreational programs, and more important, care in the modern convalescent hospital for their entire life. The present number of residents is 478. They operate at capacity with a waiting list.

**Rose Villa**

A garden type apartment development (195 units) for the elderly is nearing completion on a 14 acre tract south of Milwaukie. This is sponsored by a non-profit, non-sectarian organization, Oregon Senior Citizens, Inc. Residency fees begin at $2,100 for a “basic” living unit. Complete medical and hospital insurance is available under a group contract. Infirmary, hobby and recreation spaces are provided. Dining room, delicatessen, library, store and chapel are part of the central facilities. Ten living units are specially adapted to total care of residents.

**APPENDIX III.**

Existing and Proposed Legislation Relating to Tax Exemptions for Aged Citizens

1. **Federal Income Tax:** Instead of the customary $600 personal exemption, individuals 65 and over currently are allowed twice this amount, or $1,200. This also applies to a husband and wife. When both are 65 or over, their total exemption is $2,400.

2. **State of Oregon Income Tax:** Persons 65 and over currently are allowed a tax offset of $12 each on their Oregon income tax. For a husband and wife this exemption is allowed to both individuals, yielding a $24 tax offset. Thus, a couple over 65 whose annual state income tax is figured at $30 would pay this amount minus $24, or a total of only $6.

3. **Governor Hatfield’s Proposed Property Tax Reduction for Aged Citizens:** On April 29, 1960, in an address to Oregon’s State Conference on Aging, Governor Mark Hatfield made the following comments:

   “As you know, the age group over 65 is increasing four and one half times as fast as any other age group in the United States today. . . . The best estimates for Oregon are that nine and one half per cent of our population falls into the ‘senior citizen’ class. This is more than the national average, which is about 8.8 per cent and is a figure that in all likelihood will increase. . . . Times of inflation are especially difficult for our senior citizens whose incomes have been halted or greatly reduced. I believe it would keep many from requiring public assistance and would contribute to their morale as well as their economic wellbeing if a sliding scale of property tax reduction was established for those over 65 years of age. The program might work something like this—

**Estimated Reduction in Property Tax Base If Plan Were Effected**

a. The Most Needy Group who have under $2,000 total incomes and who have passed their 65th year would be allowed $7,500 (true cash value) exemption.

   50% of Oregon’s population 65 and over are in this group, 30% couples; 70% singles

   This would affect about 3% of our tax base.

b. The Next Most Needy Group having incomes from $2,000-$3,000 and who have passed their 65th year would be allowed $5,000 (true cash value) exemption.

   20% of Oregon’s population 65 and over are in this group, 55% couples; 45% singles

   This would affect about 0.7% of our tax base.

c. A Less Needy Group having incomes from $3,000-$4,000 and who have passed their 65th year would be allowed $2,500 (true cash value) exemption.

   15% of Oregon’s population 65 and over are in this group; 65% couples; 35% singles.
This would affect about 0.2% of our tax base.

d. The Least Needy Group includes those having incomes in excess of $4,000 and would not qualify.  
   15% of Oregon's population 65 and over are in this group;  
   80% couples; 20% singles.  
   TOTAL LOSS IN BASE ESTIMATED AT 3.9% OF TOTAL TRUE  
   CASH VALUE (5½ to 6 million tax dollars on 1959 taxes)."

A staff report of the Research Section, Oregon State Tax Commission, June, 1960, has supplemented the Governor's proposal with detailed study.

APPENDIX IV.

Acknowledgments to Persons and Organizations for Assistance

Multnomah County Library

A comprehensive bibliography on the subject was compiled by the Multnomah County Library at the request of the Committee, and copies are available at the Public Library.

State Council on Aging, for copy of G. Warfield Hobbs address
Planning Commission of Portland, for information and statistics
Miss Jeanne Jewett, Administrator, State Public Welfare Commission, for statistics and pertinent information

Persons Interviewed included:

Mrs. Elizabeth Baldwin, Staff Assistant, Oregon State Welfare Commission
The Rev. Henry Barnet, Superintendent, Baptist Home for the Aged
John Bleuler, Manager, Care Convalescent Home
Mrs. Elizabeth Breckinridge, Chicago Supervisor, Services for Aging and Rehabilitation, Illinois Public Aid Commission
Robert G. Campbell, Executive Director, Housing Authority and Urban Renewal Agency of Lane County, Eugene, Oregon
Dr. Waldo Carlson, Research Director, Oregon Tax Commission
Mrs. Mary Cleverly, Specialist in Housing for the Elderly, Housing and Home Finance Agency, Washington, D.C.
Mrs. Harry W. Collins, Director of Information and Referral, Portland Community Council
The Rt. Rev. Benjamin D. Dagwell (former Bishop of Episcopal Diocese), The Benjamin Dagwell Foundation
Mrs. Geraldine Derby, Public Assistance Director, Oregon State Welfare Commission
Mrs. Zena Ewing, Owner and Manager, Columbia Medical Hospital
Miss Hilda Fries, Research Department, Oregon State Welfare Commission
Sister Gerard, Director, Mt. St. Joseph's Residence
Gordon Gilbertson, Multnomah County Welfare
Gerson Goldsmith, Oregon State Welfare Commission
Mrs. Marvin Haight, Community Council
Dr. Robert M. Heilman, Oregon State Board of Health
Howard Heydlauff, Assistant Director, Federal Housing Administration
Mrs. Doris Hopkins, Chief, Social Work Service, Portland Veterans Administration Regional Office
John Kenward, Director, Portland Development Commission
Ed Mallek, Honorary Life President, Kiwanis Village Society, Victoria, B.C.
E. A. McNabb, Vice-President, The First National Bank of Oregon, Portland
Gerald P. Nye, former Senator, and Special Assistant on Housing for the Elderly, Housing and Home Finance Agency, Washington, D.C.
Visits for Observation

- Oregon Baptist Home for the Aged
- Care Convalescent Home
- Columbia Convalescent Hospital
- Gateway Convalescent Home
- Taft Hotel
- Carlton Hotel
- Mt. St. Joseph's Residence
- Willamette View Manor
- Rose Villa

Literature

- Old Age in Rhode Island, The Governor's Committee to Study Problems of the Aged, Providence, R.I., July 1953.
- Peaks for Planning: A Study of Unmet Needs; Community Council, Portland, April, 1958.
- Better Housing for Old People—An Opportunity for Private Investment—County Committee on Aging, Federation of Community Services—Alameda County, Oakland, Cal., October 1959.
- Architecture for Psychogeriatric Installations, Maurice E. Linden, M.D., The Fifth Mental Hospital Institute, Little Rock, Arkansas, October 1953.
Conservation, A New Concept in Building Law Enforcement; Gilbert E. Morris, General Manager and Superintendent of Building, Department of Building and Safety, City of Los Angeles, November, 1958.


Background Paper on Income Maintenance, White House Conference on Aging, prepared under direction of Planning Committee Income Maintenance, Dean Charles S. Schottland, Chairman, June, 1960.


New Channels for the Golden Years, New York State Joint Legislative Committee on Problems of the Aging, 1956.


For Older People—Not Segregation but Integration, by Lewis Mumford, Architectural Record, May, 1956.

This is the FHA, March, 1960. Federal Housing Administration.


Laws and Regulations Governing the Operation of Homes for the Aged in Oregon, 1950, Chapter 421, Oregon Laws 1943.

Regulations Governing the Establishment and Maintenance of Private Proprietary Nurse-Homes, Convalescent Homes and Homes for the Aged or for Chronic Patients, Revised to May, 1949. City of New York Department of Hospitals.


Housing for You When You’re 62, What the FHA Does About It, Federal Housing Administration No. 699.


Cooperative Housing Mortgage Insurance, Section 213, National Housing Act, Federal Housing Administration No. 2076.

Federal Housing Administration Digest of Insurable Loans, January 1960.


How to Serve Your Older Members, Community Council, June, 1956, Portland.


Housing Authority of Portland and Survey of Housing Needs, August, 1959.

Standards of Care for Older People in Institutions, Sections 1, 2 and 3, National Committee on Aging, 1953.

Our Elder Citizens Need Adequate Housing, Senator Wayne Morse, Congressional Record, 84th Congress, Second Session, 1956.


An Analysis of Patterns for Group Living for Older People, by Robert W. Kleemeier, Moosehaven Research Laboratory, Orange Park, Florida, May, 1956.

A Bibliography on Aging, Multnomah County Library, 1959.
