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PROGRAMMING FOR THE SEVENTIES

A Situation Statement to be
used as a base for planning
Home Economics Extension
Programs.

September, 1971

PROGRAMMING FOR THE SEVENTIES

A great deal has been written about the Soaring 60's - a time when the nation's output doubled - a time when, it is estimated, man's knowledge doubled - a time of great social, cultural, technological and economic change.

Kiplinger refers to the next decade as the "surging seventies," Peter Drucker, the "surprising seventies." Each new decade has brought predictions of what lies ahead and each has seemed to surpass all expectations for change.

PREDICTIONS FOR THE SEVENTIES

What's in store during the 70's? Some economists foresee an economic slowdown during part of the decade, after that, big growth - a superboom that could make the unprecedented expansion of the 60's seem small. Here are some forecasts of what's to come:

Would You Believe:

- ... Real income will increase 50%.
- ... Average family income will reach \$14,000.
- ... Per capita income will increase to a record \$6,000.
- ... 40% of all income will go to households where the head has some college education.
- ... Many families will shift from low to middle and from middle to upper income brackets.
- ... Expenditures for durable goods such as cars, furniture and appliances will double.
- ... Expenditures for nondurable goods such as food and clothing will increase 50%.
- ... Expenditures for services such as health, recreation and repairs will increase 75%.
- ... Number of working wives will increase 25%.

- All of these have been predicted.

This situation statement tries to point out trends which will affect the people of the state. It tries where possible to look ahead at what may be the situation 5 or 10 years from now in order that the best information possible can go into the process of program planning.

To increase the quality of living of Iowa's people is a great challenge. It depends on knowing Iowa's people - all of them - their problems - and planning programs which help to remove the blocks from each individual's enjoyment of the best Iowa has to offer.

Prepared by Margaret K. Yoder, Associate State Leader. Special thanks is given to John Tait, Extension Sociologist, for much assistance.

IOWA'S POPULATION

Population Increase

2,825,041 persons in 1970
 Increase of 2.4% over 1960
 U.S. population increase 13.3% over 1960
 New outmigration - 6.5% - Lowest loss in three decades

Age Distribution

Age Structure of Iowa's Population 1960-1970-1979
 Percent of Total Population

<u>Age Group</u>	<u>1960</u>	<u>1970</u>	<u>1979</u> (Projected Nationally)
0-4	11.1	8.3	10.5
5-9	10.6	9.9	5.4
10-14	9.4	10.4	
15-19	7.4	9.7	15.3
20-24	5.6	7.2	
25-34	11.5	11.1	22.3
35-44	12.1	10.5	12.0
45-54	11.1	11.0	10.3
55-59	4.9	5.0	7.4
60-64	4.5	4.5	
65-74	7.5	7.1	9.6
75+	4.4	5.3	

Rural-Urban Distribution

Urban - 57% - Up from 53% in 1960
 Rural - 43% - Down from 47% in 1960

1960 - 183,000 farms averaging 190A
 1970 - 139,000 farms averaging 247A

The \$400 average value of Iowa farm land is nearly double
 the \$209 average of 15 years ago.

YOUNG FAMILIES

This will be the decade of young adults

This age group - the 20's & 30's will increase 34% by 1980 compared to 6% for all other age groups combined.

Marriages - New familiesIn the United States - Annually

1946	Just under 2.3 million - the record!!
1958	1,451,000 - the post-World War II low
1971	2,235,000
1973	Projected 2,335,000 - a new record!!
1980	Projected 2,800,000

In Iowa

1939	36,862
1940	48,352 - the record!
1946	32,434 - the highest since 1940
1962	18,981 - the-post World War II low
1969	24,686 - coming back!
1980	? - will probably follow the national trend

In Iowa 222,909 girls will reach the age of marriage by 1978 compared with 197,772 during the previous 8 years.

Many new households are being established - expect an increase of 14 million for a total of 77 million nationally in this decade.

The number of households in Iowa is expected to increase to 901,000 by 1975 from 850,000 in 1965 for a 6% increase according to a leading New York research firm.

Nearly every facet of national life will feel the impact of the young adult in the 1970's. They will shape markets for business, influence politicians and affect styles of living.

They will create a demand for more goods and services.

They will create the demand for many new jobs requiring heavy investment by business.

By 1980 half of the U.S. population of voting age will be under 40 years of age. This may bring more pressure for change in business and government and society. This is a group with flexible ideas and habits and as a whole, better educated than their elders.

Children

Births - U. S.

To the couples married in those immediate post World War II years, were born the children who are now of marrying and child bearing age. In the years just ahead, the number of women in the age group that has the highest birth rate - 20 through 29 - will be rising fast.

After a long decline, the number of babies born each year is rising.

1958 4.3 million babies born - the record!!

1975 projected 4.4 million babies!!

Births - Iowa

Year	Number of Births	Birthrate No/1000 Population	Fertility Rate
1940	44,347	17.5	
1950	62,550	23.8	
1951		25.1 (Peak year for Iowa)	
1958		22.7 (Peak year for U.S.)	
1960	64,050	23.2	124.5
1968	46,737	16.8	85.5
1970	48,890	17.3	88.1

Little difference has existed in birth trends for the nation and for Iowa. Therefore the same expanding birth rate would be anticipated in the state.

America's net population growth is again speeding up after more than a decade of slowing. The net growth of 2 million in 1968 was the smallest since 1945. Expect it to reach over 3 million by 1979 and heading for new records.

A rising number of births after a decline of more than a decade will mean an increase in numbers of pre-school children - up 5.5 million to 23.2 million which will not affect the school enrollment for another 4 or 5 years. However an actual decline in numbers of younger school age children is being felt in the schools.

July, 1971, Iowa Department of Public Instruction figures show that for the first time in many years the total enrollment in the public schools is down slightly. School officials estimate that by 1977 Iowa's public and non-public school enrollment will shrink by approximately 100,000, from 721,424 at present to 622,000 pupils.

Already it is evident that the shortage of teachers is turning to a surplus. The net result may be less pressure to increase local school taxes.

Working Women

Between the end of World War II and 1965, the proportion of women 16-35 in the labor force grew very slowly. Since 1965, however, the proportion of these women in the labor force increased 14%.

The proportion of married women aged 20-24 in the labor force has jumped from 37% to 48%.

The likelihood of a woman working before her family is raised is continuing to increase. Between 1950-1969 the proportion of married women in the labor force with husbands present and children only under 6 increased from 11 to 29% as compared to the increase of all women in the labor force from 34 to 43%.

This accentuates the need for:

- High quality child care
- Simplified daily living
- Effective time and energy management
- Knowledge of easy care, labor saving products on the market
- Shared responsibilities within the family
- Many services to be purchased
- Modified social and civic participation

In 1962, over half of all working women were employed in clerical, teaching or nursing jobs. The rapid expansion in female labor force participation coincided with a strengthening in the demand in these clerical and professional categories. The women did not make significant inroads into traditionally male occupations during this period. However it is likely that women will account for a large proportion of employment in traditionally male occupations requiring long-term career commitment with the probably result of still smaller family size.

Where people will live:

1. The trend for living is to the suburbs.
2. Big cities will grow slowly or lose population; small cities are apt to grow rapidly.
3. Southern and western states show the fastest growth trend (18-25%). Iowa is in a group of west north central states with a projected growth rate of 7% in the 70's.

Income potential

Census experts believe American families in general will enjoy rapidly rising incomes in years ahead. Median family income is expected to rise from about \$9,900 today to \$15,000 in 1980, measured in dollars of constant purchasing power. Most of this added purchasing power will occur in the bulging 25 to 44 age group.

At the same time a historic enrichment of the Social Security System is taking shape on Capitol Hill. If it passes the average 35 year-old worker and his wife can look forward to retiring at 65 on a Social Security check of \$1,042 a month.

These kinds of expectations will make a great difference in the kind of financial planning and management which this age group must do.

THE ELDERLY

In United States 1 in 10 persons is over 65.
In Iowa 1 in 8 persons is over 65.

Since 1960: 2.5% decrease in 65-74 age group.
 18.5% increase in over 75 age group.

The number of older women is greater than the number of older men.

96% live in independent housing units.
4% live in nursing homes and institutions.

* 75% have incomes less than \$5000 per year.
38% have incomes less than \$3000 per year.
27% have incomes less than \$1400 per year.

23,091 receive old age assistance (February 1971)

The age group 65-74 shows a decline in percentage while the group over 75 shows a marked increase. This latter group is one where the problems of aging will show up more markedly and which will put a greater "strain on the system."

Many of them have lived long beyond the time which they expected to live. With so many more persons living this long, there are not in society the "models" set by previous generations of this age by which to pattern their behavior. This is the group more apt to be running out of money, to be alone and plagued by loneliness, dependent physically, and have the need of many services which must be provided by the community - nursing homes, transportation, home-delivered meals, friendly visitors, shopping service, in-home care, special housing, financial assistance, etc.

The younger group (65-74) while not showing this rapid increase will be a strong force in the market. This group is in better health than ever before and has more money. This means an expanding market for luxuries such as travel, books, recreation, fashionable clothing, etc. as well as the necessities.

* Figure 3

Of particular interest is the 55-64 age group which will be turning 65 within the next 10 years. This group comprises 7.4% of Iowa's population as compared to 7.1% in that age group today. With any out-migration of this group for retirement purposes, the normal amount of deaths occurring, and the expected rise in population of the state, the 65-74 age group will probably comprise a smaller percent of the total in 1980.

There should be concern for helping this younger group plan for their retirement years.

Place of Residence (Figures 1 and 2)

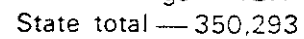
Older persons in urban areas are more apt to be found in the older parts of town. They are often trapped in undesirable housing situations. They find living costs high and going higher.

Young suburban communities are likely to be characterized by young couples with young children and few old people.

Older small towns are likely to be top heavy with senior citizens. This raises the question if these small towns can continue to support services which will be adequate for the care of their aged.

Special problems of the elderly are included in each Focus Area. Refer to those for discussion of specific problems.

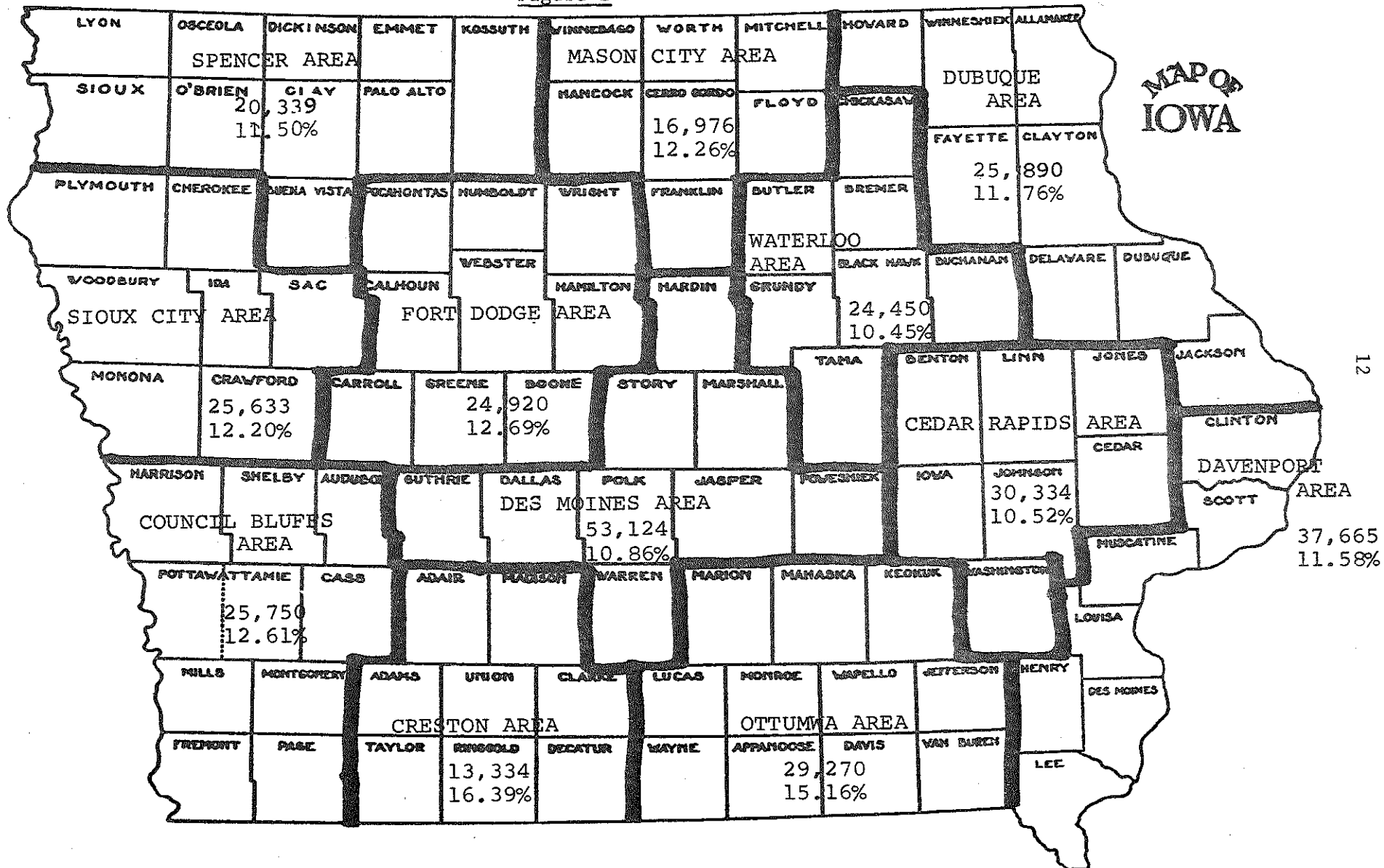
Number and Percent of Population Over 65 Years of Age, 1970



Source: United States Bureau of the Census

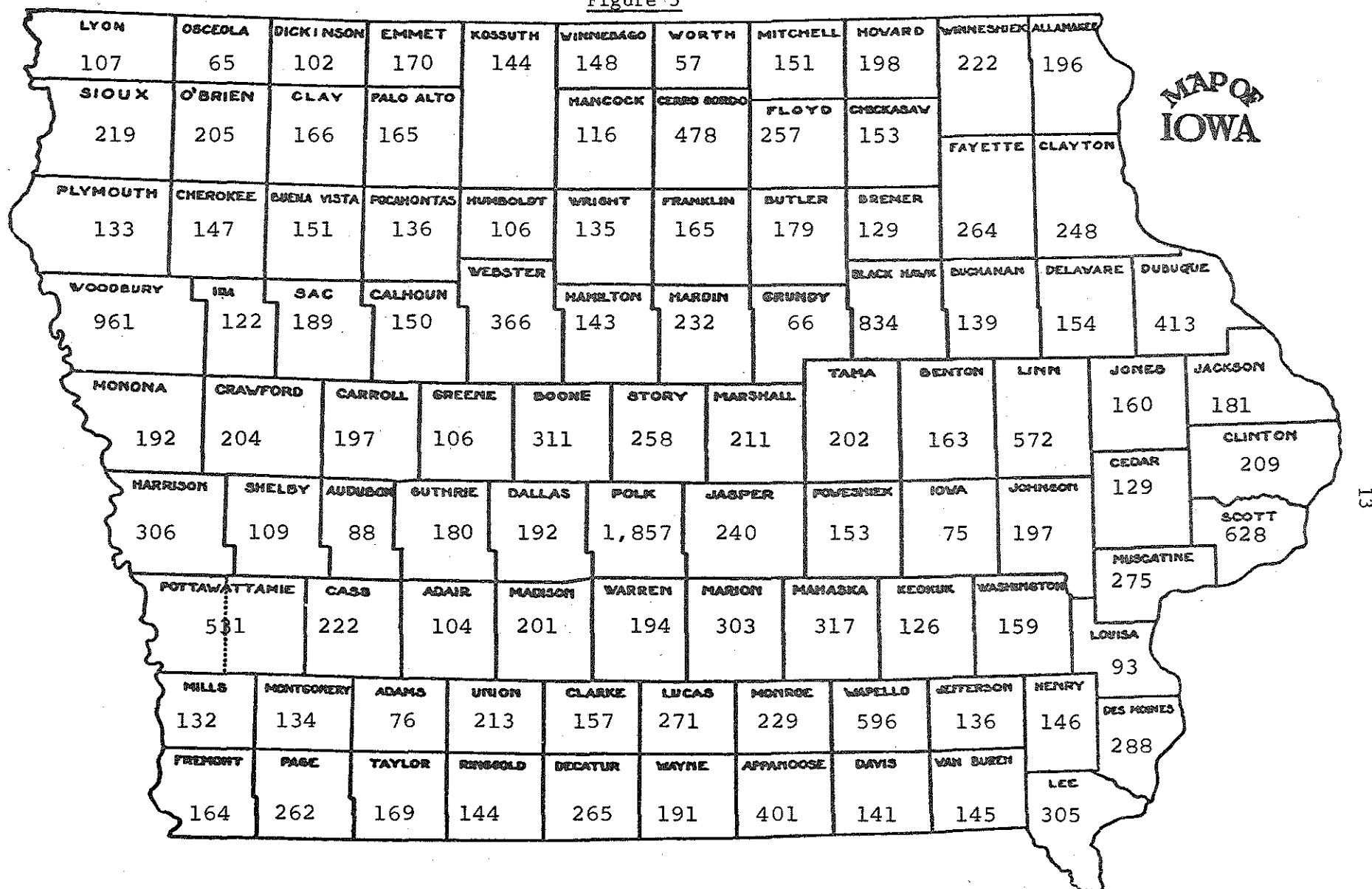
% and Number of Elderly by Extension Areas

Figure 2



Based on 1970 Census Advance Report
January, 1971

Figure 3



Based on Monthly Public Assistance Statistical
Report
February 1971
Iowa Department of Social Services

YOUTH

This decade will bring an end to the teenage boom. The number in this group will remain relatively stable. There are now 331,724 youth, age 14-19, in Iowa. Of these, 167,104 are male, 164,620 are female. If the same proportions of black to white in the Iowa population hold true for this group, about 4,000 of them are black.

Peter F. Drucker says that this is the last year "for as long as we can see ahead, in which teenagers - that is 17 and 18 year olds - will form the center of gravity of our population. Consequently, tomorrow's population dynamics are sure to be radically different from those of the past ten years, the decade of the Youth Revolution. From now on the center of population gravity will shift steadily upward and by 1975 the dominant age year will be 22 or 21."

"In urban and developed economics such as ours, the four years that separate age 17 from age 21 are the true generation gap. No period in a man's life - except perhaps the jump from fulltime work at age 64 and eleven months to complete retirement at 65 - involves greater social or psychological changes."

"Seventeen-year olds are traditionally (and for good reasons) rebellious, in search of a new identity, addicted to causes, and intoxicated with ideas. But young adults from 21 to 35 - and especially the young adult women - tend to be the most conventional group in the population and the one most concerned with concrete and immediate problems."

Today's teenagers are children of change - at a rapidly changing time in their own lives and in a rapidly changing environment.

Because of television, this is probably the best educated, most aware generation in the history of any civilization. The mythologies that have earlier been transmitted by parents to children now are reinforced on the TV screen - however in its direct broadcasts of news coverage and in some of its documentaries, the experience is not "edited" - they "tell it like it is." It is real and it is NOW. Their entire experience has been in the Age of the Bomb, television, the war in Vietnam, space satellites, nuclear energy, jet transport, economic affluence, computerized technology, urban dissolution, suburban sprawl, a growing public awareness of poverty and racism and a world order dominated through institutions led by their elders who are not so completely oriented to these things. These institutions continue to be run by a generation that finds it increasingly difficult to be in tune with the technological environment in which it finds itself.

*Because of its timeliness, there is a tendency to think of the generation gap as a recent phenomenon. In reality from earliest recorded history, there have been dire predictions about the younger generation by their elders. Actually if man is to evolve and keep pace with the changing times, intergenerational differences are both predictable and necessary. While there have been periods of history when such change was relatively slow and peaceful, the recent pace of scientific and technological progress has been such that the early socialization experiences of the current older generation are no longer relevant to the youth of today. (Such as "being seen and not heard," respect for elders, etc.)

Seen in this way the generation gap is a part of an evolutionary process, although confrontation at an individual and occasionally at a group level is sometimes necessary. An added factor tending to distort and magnify the problems and to increase the distance between the generations is the role which adults, reinforced by the mass media, play in blowing up a stereotypic picture of adolescence as a period of wild, crazy rebellion, in the face of overwhelming data that the majority of adolescents evolve quietly and without event into responsible and mature adults (who will in their turn, be upset by their own children's quest for identity.)"

U.S. News and World Report says: "Never has U. S. youth reached as deeply into the national consciousness as have the young of the past decade - a time of hippies, campus rebellion, the drug culture and 'doing your own thing.' Now change is developing. Many in the 'turned off' generation are 'turning on' again to a more realistic life."

Whether or not we are witnessing a less active form of dissention in youth, they still have the same major concerns of the youth of the recent past.

The topics dealt with by the task force in the April, 1971 White House Conference on Youth are evidence of their concerns:

- Draft, National Service, and Alternatives
- Drugs
- Economy and Employment
- Education
- Environment
- Foreign Relations
- Legal Rights and Justice
- Poverty
- Race and Minority Group Relations
- Values, Ethics and Cultures

* DeWitt C. Baldwin, Jr. M.D., Professor of Human Behavior and Development and Chairman, Department of Behavioral Sciences and Community Health, The University of Connecticut Health Center, Hartford, Conn. Forum, J.C. Penny, Fall/Winter 1971.

Paul C. Harper Jr. in "Adolescence for Adults," a report by Blue Cross, says, "Sooner or later at the teenage end of the table one of five subjects almost always comes up: money, sex, automobiles (ours), education, the bomb and the war. These five subjects are actually an inventory of the problems - the big deals - facing teenagers today."

He says further:

"Money to teenagers is a liberating force. They're buying not so much material things but adulthood; in their way they are trying to be like grown-ups. Spending it is an expression of adulthood. And in spending it in vast quantities they have institutionalized their tastes.

"Sex - there is no doubt that there is earlier and more intense focusing on sex. Dates in fifth and sixth grade are commonplace. One survey shows that 45% of teenage girls go steady. Teenage marriages have increased 600% since 1940, accounting for half the marriages in the United States. More than 50% are known to have resulted from pregnancy. The Connecticut Health Department estimates that one of six teenage girls in the state was illegitimately pregnant last year (1969). Marvin P. Freedman in "The Young Americans" states his opinion that young men and women need to find security in marriage and family, and that this need far outweighs tendencies toward promiscuous sexual behavior. He believes that this is a reaction against the depersonalization of modern life and sees in the trend to early marriage an indication that family ties will be strengthened rather than weakened in the next several decades. Kids may mature earlier. They may get more stimulation from books, magazines, and movies. But the key fact is that the other pressures he is under force him to seek the security of an intense companionship - the ultimate expression of which is sex.

"Mobility - Teenagers today live in cars. They own 9% of all new cars and an estimated 20% of all cars."

"Education - The questions are: how you get it, how long you go to school, what you do when you get there, what happens if you do not get there. With every year that goes by, the long-term penalties for dropping out increase and the pressures to get into college and stay therefore, increase too. More than ever before have the privilege of going to college. The pressures and the increase in the academic pace have made millions of young Americans more thoughtful than they have ever been before. They discuss deep issues and come out with reflections of real concern with what is going on in the world."

"The Bomb and the War - Each generation has faced the prospect of going to war, but no generation has faced the fact that all of society can be blown up in 30 seconds. This produces deeply religious attitudes in some and impresses others with the absurdity of human life."

One of the greatest traps into which one who tries to generalize about teenagers can easily fall is to lump teenagers as a group. To try to ascribe rigid characteristics to 24 million people in an open society that talks a lot about individual achievement is playing a dangerous game. What is a typical American teenager?

A boy or a girl? A 13-year-old or an 18-year-old? A farmer, a surfer in California, a Groton prep schooler, a Negro in a Detroit slum, a Mexican-American in Arizona, a peace marcher, a drag racer?

One of the questions of relevance of Home Economics Extension is what does it have to offer a youth audience as varied as the one pictured by Mr. Harper - the farm youth, the city youth, the school drop-out, the unwed mother, the Indian on the Settlement or in Sioux City, the black in Waterloo, the poor youth around the edges of Des Moines, Davenport or Ottumwa, the teenager in Eldora or at Toledo, the handicapped young person - to help them with their "big deals" - money, sex, automobiles, education, the bomb and the war.

THE DISADVANTAGED

The Iowa Inter-Agency Cooperative Manpower Planning System (CAMPS) estimates that one in seven Iowa persons is economically disadvantaged. (See table) for breakdown by county. The Iowa Office of Economic Opportunity estimates that 1 in 5 Iowa families fall under OEO guidelines. Figure 4

The Rural Poor

Poverty in rural America is largely invisible and overshadowed by other, more spectacular problems at home and abroad.

The problem here is characterized by too little of jobs, income, education and services, and a continuing one-way flow of people from country to city.

The solution is not simple. The problem is complex, multi-faceted and feeds upon itself. Less economic opportunity in rural America means fewer jobs; underemployment means a lower tax base; a lower tax base means poorer community facilities and education; crippled education and facilities bring the problem full circle by discouraging industry from locating in rural areas.

Rural residents have roughly half the number of doctors per 100,000 people as city people; a third of the number of dentists. The amount of underemployment in rural America is equivalent to 2.5 million unemployed, 6.8 million rural homes are in need of repairs, and 30,000 rural communities need improved water and sewer systems. It is estimated that 60% of substandard rural housing is occupied by families having incomes below the poverty level. The educational achievement rate is some 2 years behind that of urban America and the drop-out rate is 7% higher than in urban areas.

The Urban Poor

"Almost half the nation's urban poor belong to families locked so deeply into poverty they can't escape unaided at any time in the future," says Anthony Downs, a member of the President's National Commission on Urban Problems. He characterizes the nation's urban poor in these ways:

2 of 5 persons are under 18
 1 of 5 families is elderly
 1 in 20 are headed by a disabled male.
 1 in 4 is headed by a female under 65.
 1 in 4 is headed by a regularly employed man under 65
 who is a low wage earner.
 1 in 8 is headed by an unemployed or underemployed man
 under 65.
 54% of the children are white.
 46% of the children are non-white.

Poor children are twice as likely to be living in central cities as in the suburbs. While the number of urban poor children declined by 16% between 1959 and 1968, the number of poor children living in families headed by females rose by 38% among whites and 73% among non-whites.

A sharp increase is likely in the number of impoverished, non-white families, headed by women, particularly in the central cities where the non-white population is expected to increase some 95% from 1960 to 1985.

To policy makers interested in eliminating poverty, particularly poverty in generations to come, these households pose the greatest of all problems.

Dr. Jerome Bruner, director of Harvard's Center for Cognitive Studies, and a leader in the science of human development offers the following statistics for consideration:

- * The United States has fallen to tenth place among the nations of the world in infant mortality. If an infant is poor and black and a resident of Boston, his chances for survival will not be as good as they would have been had he been born in northern Nigeria.
- * In 1968, 2.2 million U.S. mothers with children between the ages of 3 and 5 worked. In the same year there were a total of 310,000 openings in the registered day care centers. In 1970 only nine percent of the children of working mothers were in day care centers.
- * There will be more children whose mothers are their sole support.

TABLE 1
Population and Economically Disadvantaged by County

County	<u>Economically Disadvantaged</u>			<u>Total Population</u>	<u>Farm Population</u>
	<u>Farm</u>	<u>Non-Farm</u>	<u>Total</u>		
1. Adair	633	331	1,964	9,491	4,261
2. Adams	487	803	1,290	6,306	2,833
3. Allamakee	1,225	2,365	3,590	14,733	5,747
4. Appanoose	499	2,258	2,757	14,774	3,539
5. Audubon	775	1,242	2,017	9,627	4,514
6. Benton	883	2,553	3,436	22,587	7,249
7. Black Hawk	717	12,706	13,423	132,533	6,703
8. Boone	394	3,102	3,496	26,169	5,416
9. Bremer	1,083	2,435	3,518	22,451	5,573
10. Buchanan	1,407	2,390	3,797	21,484	7,298
11. Buena Vista	649	2,566	3,215	20,650	5,566
12. Butler	1,115	1,956	3,071	16,343	6,027
13. Calhoun	588	1,955	2,543	13,987	4,745
14. Carroll	1,226	2,970	4,196	22,657	6,611
15. Cass	865	2,493	3,358	16,646	4,345
16. Cedar	942	2,072	3,014	17,489	6,235
17. Cerro Gordo	597	5,637	6,234	48,633	4,958
18. Cherokee	854	2,176	3,030	16,948	5,390
19. Chickasaw	1,216	1,977	3,193	14,821	5,867
20. Clarke	555	1,156	1,711	7,670	2,670
21. Clay	721	2,558	3,279	18,115	4,473
22. Clayton	1,810	2,907	4,717	20,467	8,385
23. Clinton	1,017	5,636	6,653	56,305	8,476
24. Crawford	1,158	2,443	3,601	19,182	6,768
25. Dallas	577	3,083	3,660	25,787	5,317
26. Davis	680	1,124	1,804	8,108	3,961
27. Decatur	569	1,327	1,896	9,578	3,112
28. Delaware	1,843	2,116	3,959	18,447	7,787
29. Des Moines	279	4,983	5,262	46,481	3,798
30. Dickinson	588	2,105	2,693	12,195	2,803
31. Dubuque	1,882	8,527	10,409	89,059	9,088
32. Emmet	523	1,629	2,152	13,709	3,423
33. Fayette	1,669	3,478	5,147	26,656	8,442
34. Floyd	738	2,395	3,133	19,576	5,013
35. Franklin	616	1,710	2,326	13,171	5,208
36. Fremont	391	1,336	1,727	9,406	3,218
37. Greene	508	1,563	2,071	12,836	4,440
38. Grundy	561	1,418	1,979	13,923	5,206
39. Guthrie	1,079	1,743	2,822	12,081	4,924
40. Hamilton	648	2,381	3,029	18,442	5,158
41. Hancock	652	1,657	2,309	13,316	5,588
42. Hardin	779	3,044	3,823	21,939	5,737
43. Harrison	731	2,091	2,822	15,912	5,216
44. Henry	545	2,070	2,615	17,905	4,126
45. Howard	1,569	1,638	3,207	11,264	4,643
46. Humboldt	453	1,461	1,914	12,325	3,614
47. Ida	742	1,414	2,156	9,187	3,732
48. Iowa	846	1,912	2,758	15,353	5,707

Table 1

Economically Disadvantaged

<u>County</u>	<u>Farm</u>	<u>Non-Farm</u>	<u>Total</u>	<u>Total Population</u>	<u>Farm Population</u>
49. Jackson	1,343	2,512	3,855	20,660	6,148
50. Jasper	691	3,711	4,402	35,010	7,032
51. Jefferson	453	1,878	2,331	15,433	3,721
52. Johnson	742	7,828	8,570	71,967	7,461
53. Jones	824	2,492	3,316	19,664	6,086
54. Keokuk	925	2,008	2,933	13,572	5,244
55. Kossuth	1,241	2,729	3,970	22,481	9,494
56. Lee	535	5,020	5,555	41,928	5,407
57. Linn	1,075	15,584	16,659	160,832	9,128
58. Louisa	268	1,197	1,465	10,508	3,333
59. Lucas	497	1,404	1,901	10,031	3,005
60. Lyon	1,334	1,614	2,948	13,077	6,300
61. Madison	582	1,459	2,041	11,446	4,646
62. Mahaska	765	2,858	3,623	21,806	5,575
63. Marion	816	3,038	3,854	25,905	4,468
64. Marshall	635	4,810	5,445	40,301	6,238
65. Mills	311	1,284	1,595	11,773	3,123
66. Mitchell	1,029	1,694	2,723	12,873	4,965
67. Monona	738	1,494	2,232	12,106	4,344
68. Monroe	486	1,243	1,729	9,109	3,190
69. Montgomery	535	1,604	2,139	12,859	3,381
70. Muscatine	463	4,396	4,859	36,747	4,170
71. O'Brien	1,024	2,387	3,411	17,278	5,661
72. Osceola	566	1,165	1,731	8,739	3,787
73. Page	740	2,693	3,433	18,403	3,819
74. Palo Alto	573	1,869	2,622	13,055	4,579
75. Plymouth	1,345	2,986	4,331	24,036	8,432
76. Pocahontas	515	1,739	2,254	12,716	5,204
77. Polk	334	29,883	30,217	281,478	4,858
78. Pottawattamie	1,001	8,452	9,453	86,070	9,504
79. Poweshiek	720	2,384	3,104	18,749	5,162
80. Ringgold	749	850	1,599	6,261	3,066
81. Sac	891	2,035	2,926	15,288	5,532
82. Scott	502	12,185	12,687	141,355	5,537
83. Shelby	959	1,634	2,593	15,348	6,509
84. Sioux	1,814	3,264	5,078	27,668	9,403
85. Story	432	6,794	7,226	62,092	5,437
86. Tama	1,154	2,680	3,834	19,770	6,841
87. Taylor	609	1,260	1,869	8,713	3,753
88. Union	591	1,733	2,324	13,209	2,678
89. Van Buren	661	1,279	1,940	8,510	3,355
90. Wapello	486	5,203	5,689	41,590	4,842

Table 1
Economically Disadvantaged

<u>County</u>	<u>Farm</u>	<u>Non-Farm</u>	<u>Total</u>	<u>Total Population</u>	<u>Farm Population</u>
91. Warren	574	2,661	3,235	27,090	5,270
92. Washington	671	2,705	3,376	18,956	4,793
93. Wayne	768	965	1,733	8,187	3,164
94. Webster	588	5,819	6,407	47,799	5,968
95. Winnebago	755	1,723	2,478	12,758	4,145
96. Winneshiek	1,910	2,378	4,288	21,613	8,654
97. Woodbury	1,242	12,528	13,770	100,680	8,013
98. Worth	542	1,081	1,623	8,737	3,485
99. Wright	455	2,176	2,631	16,933	4,952
TOTAL	<u>80,523</u>	<u>322,260</u>	<u>402,783</u>	<u>2,789,893</u>	<u>526,772</u>

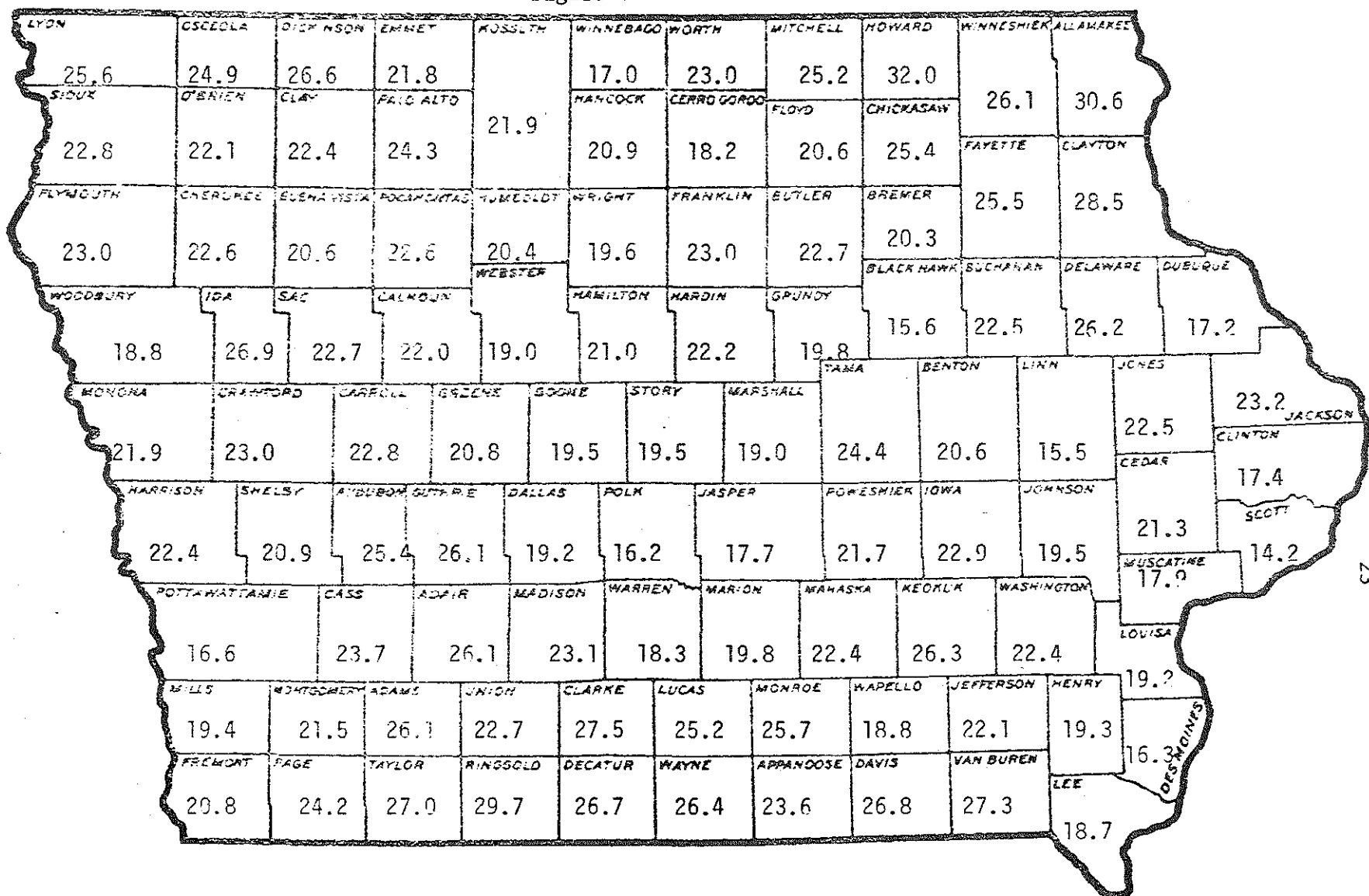
Source: Iowa Interagency CAMPS (Cooperative Manpower Planning System). Information from analysis of 1969 State Income Tax Returns. Population figures based on Iowa Census of Population, 1970 (Preliminary) and Iowa Annual Farm Census, 1969 (Preliminary).

Table 2
U.S. Department of Labor's Annual
Income Criteria for Poor Person

<u>Family Size</u>	<u>Non-Farm Income</u>	<u>Farm Income</u>
1	\$1,800	\$1,500
2	2,400	2,000
3	3,000	2,500
4	3,600	3,000
5	4,200	3,500
6	4,800	4,000
7	5,400	4,500
8	6,000	5,000
9	6,600	5,500
10	7,200	6,000
11	7,800	6,500
12	8,400	7,000

Source: Iowa Employment Security Commission, Des Moines, Iowa

Figure 4



State of Iowa 19.6%

- * In 1969 over half the children born in Black and Spanish Harlem were illegitimate. In none of these cases was there any father in the home. Recession may add to the problem as fathers lose jobs and fail to find work.
- * Of 12 million children in the age group eligible for kindergarten, only 3 million go to such classes.
- * If a child is from a middle class home, he has a four times greater chance of attending kindergarten than a poor child.
- * At the peak of the federally funded Head Start program some 193,000 children were involved. It was estimated that 8 million children were in the age range which Head Start - a preschool learning program - might have served. Of that number, 20 percent or 1.6 million children needed the program to help them cope with the regular school program.

Dr. Bruner reminds us that the point is not to make middle class kids out of the children of the poor - not to give them "middle class attitudes." Rather, we want to help them develop their learning capacities in such a way that they can break the hold that defeatism has on them. Defeatism - an attitude toward life induced by generations of poverty - prevents the child from feeling he has any control over his destiny.

Likewise the poor and disadvantaged women who are defined by or who are living with negative self-images are in the most dire need of help.

These women - the psychologically poor - have been labeled as failures by neighbors and by self-evaluation. They have been called school drop-outs, social drop-outs, illiterates, and numerous other terms which carry negative connotations. Not only have they been viewed and labeled in these ways, but many if not most have developed self-feelings which are equally detrimental.

Research done by Dr. Bruner among poor black populations in the United States and poor whites in this country and abroad has indicated that the conditions of poverty produce the same learning response in all children: persistent poverty creates a culture of survival. Beating the system takes the place of using the system.

The Elderly

The Senate sub-committee on aging reports that out of every four Americans 65 and over lives on a poverty level income. According to the Iowa Office for Planning and Programming, 60% of Iowans over the age of 65 are classified as poor.

Many of these have never had adequate income. Many are on fixed incomes which at one time looked adequate, but are today because of inflation very inadequate. Many have had to spend much of their savings on expensive illnesses.

Each Focus area discusses special problems of the elderly. Both those with adequate income and those without should be considered in each situation.

Those who are culturally and financially disadvantaged face many problems.

Health

Poor health is one of the great problems of low income people as shown in the accompanying graphs. Figure 5

The report of the White House Conference on Children says that "Poor children experience more preventable deaths or permanently handicapping conditions than any other group. Indeed poverty is the most important cause of poor health in children and youth in this country. Other especially vulnerable groups include expectant mothers, young infants, handicapped and emotionally disturbed children and children of migrant workers."

The "health care crisis" takes many forms—high costs, shortage of physicians, etc. One of its most striking forms is the relationship between income and health impairment.

Figures compiled by the Nixon Administration and reported in its recent "White Paper" on health care policy show that the poor suffer much more than the rich from a variety of conditions—heart, mental and nervous conditions, arthritis and rheumatism, high blood pressure, orthopedic impairments and visual impairments.

The chart illustrates the striking correlation between low income and poor health. In each of the categories studied, the higher the income the lower the incidence of the condition.

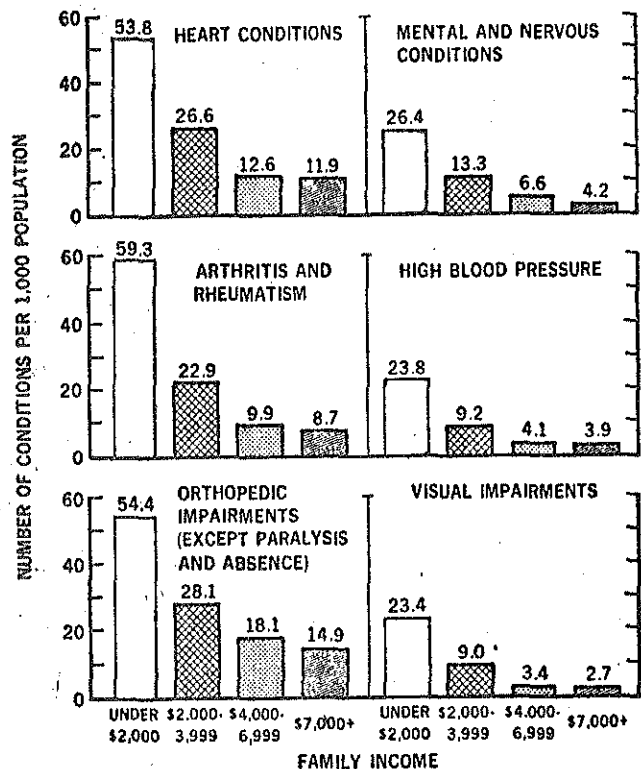
The chart reflects in part the fact that half the families in the U.S. with incomes under \$5,000 a year and two-thirds of families with incomes under \$3,000 have no health insurance. Medicaid provides a measure of protection for the poor, but eligibility and services vary widely by state. In many states, including Iowa, families with both parents in the home are ineligible for Medicaid no matter how poor they are. The ineligibility of the "working poor" for welfare makes them ineligible for Medicaid.

The poor health of the poor is part of the reason the U.S. lags behind many

countries in life expectancy and infant mortality. This country ranks eighteenth in male life expectancy at birth, behind even Bulgaria, Greece and Italy. The U.S. ranks eleventh in female life expectancy at birth, trailing the Soviet Union, and thirteenth in infant mortality. Americans accept many of the con-

Poor People, Poor Health

Figure 5
Activity-limiting conditions, by income 1964



sequences of economic inequality as unavoidable, but we believe they do not accept the idea that a person's physical well-being or life span should depend on the amount of money he has. If access to adequate health care is not a right, it ought to be. Assuring all Americans an adequate level of health care services without regard to their income has to be given high priority in the health care legislation taking shape in Washington.

In some cases poor health may be related to diet. Figure 6

These situations affect the ability to do productive school work, to get and hold jobs, as well as being a constant drain on the family purse.

Government food programs have been established to help insure good diets for the poor. As the Food Stamp Program requirements have become less stringent, the number of participants have increased greatly. In some locations of the state supplemental foods are available to pregnant and nursing mothers and to small children.

On January 1, new school lunch regulations made it mandatory for all schools receiving Federal subsidy for school lunch to provide free or reduced price lunches to those who could not afford to pay. When school starts in September, lunches will be available in nearly all school buildings in the state. However, many of those eligible for the full and reduced price lunch will not be benefiting because they are not aware of the possibility. There is need for personal contact methods to inform those parents who do not get such information from reading official notices that lunches are available on this basis for their children. Especially is this true in rural areas.

These programs all provide the means for improving the diets of needy individuals and families. Many need help in knowing of the programs and taking advantage of them. With the possibility of the purchase of good food, an accompanying educational program can help improve the diets of this group of people.

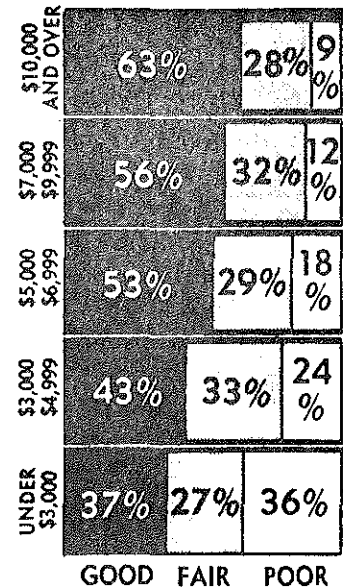
Others in the population who should be considered in program planning are those youth and adults who are handicapped from illness, accident or birth and those with learning disabilities.

Family Planning Services

Planned Parenthood of Iowa reports that 14,500 of the estimated 70,000 Iowa women in need of subsidized family planning services are getting them. Their services are now available to women in 61 counties in Iowa. Women in rural counties are least likely to get such services.

Figure 6

DIET AND INCOME



Income alone does not insure a good diet, but a recent U.S. Department of Agriculture food-consumption survey shows the percentage of families with good diets increases as income level goes up.

If women cannot afford the services, their doctors may mail the bills for counseling and birth control pills or devices to the State Department of Health which pays the bills with funds available through federal grants.

But Iowa lags in providing services to those who cannot afford them. Local money is needed to attract federal family planning money. This now comes primarily from voluntary contributions.

Education

The educational level of Americans is rising which means that those who are not taking advantage of educational opportunities are left behind faster all the time.

The gap between the races is narrowing as blacks increase their schooling faster than whites. People living in suburbs generally have more education than city dwellers. Figure 7

Figure 7

A LOOK AT EDUCATIONAL PATTERNS--

In 30 metropolitan areas

BY RACE

	High-school graduates	College graduates	Median years of school attended
Whites	62.2%	14.0%	12.3
Nonwhites	42.1%	6.8%	11.1

BY DWELLING PLACE

	High-school graduates	College graduates	Median years of school attended
Central Cities	52.5%	11.0%	12.1
Suburbs	65.9%	15.0%	12.4

Source: U. S. Census Bureau

The drop-out picture in Iowa is improving.

In 1970 only 2.5% of the students who had entered 9th grade in 1967 were not enrolled in 12th grade. This compares to 10.2% in 1965. These drop-outs have the choice of going into area vocational schools or of getting high school equivalency certificates by examination after the time when they were scheduled to graduate from high school.

The Minorities

Minority Distribution - Figure 3

Black

32,596 - Iowa's black population

1.2% of total state population is black

26,573 or 82% of Iowa's blacks live in six counties

Polk	11,916	- 4.2% black
Blackhawk .	6,644	- 5.0% black
Scott	4,160	- 2.9% black
Linn	1,807	- 1.1% black
Lee	1,033	- 2.4% black
Woodbury ..	1,013	- 1.0% black

Increases over 1960:

Scott	2,294	- 122.9%
Blackhawk .	1,794	- 37.0%
Polk	1,381	- 13.1%
State	7,242	- 28.6%

Other minorities

State total - 9,018	0.3% of population
---------------------	--------------------

All non-whites in state:

1960 - 29,128
1970 - 41,614

Figure 3

Negro Population in Iowa's Cities of 10,000 or More

U.S. Census: General Population Characteristics, 1970

	Negro Population in Households	No. of Heads of Households	Female Heads of Households	Percent Female Heads of Households	Children Under 15 Yrs. of Age
The State	30820	8911	1980	22.1	11969
Ames	240	90	4	4.4	6.4
Bettendorf	44	13	- -	- -	15
Burlington	755	224	38	17.0	302
Cedar Falls	47	22	2	9.1	6
Cedar Rapids	1691	484	104	21.5	666
Clinton	370	108	20	18.5	125
Council Bluffs	552	166	35	21.1	216
Davenport	4019	1059	287	27.0	1870
Des Moines	11143	3448	814	23.6	4032
Dubuque	47	12	- -	- -	18
Fort Dodge	603	141	45	31.9	288
Fort Madison	305	94	21	22.3	106
Iowa City	369	156	8	5.1	82
Keokuk	546	160	32	20.0	180
Marion	14	4	1	25.0	8
Marshalltown	231	88	13	14.8	59
Mason City	227	72	13	18.1	76
Muscatine	127	38	9	23.7	51
Newton	21	6	1	6.2	10
Oskaloosa	32	17	3	17.6	4
Ottumwa	307	104	14	13.4	78
Sioux City	969	296	57	19.3	355
Urbandale	39	10	1	10.0	15
Waterloo	6479	1588	399	25.1	2810
W. Des Moines	145	46	11	24.0	34

CENSUS BUREAU FINDS SIGNS OF NEW NEGRO FAMILY CRISIS

"Deterioration" Despite Economic Gains

By Philip Meyer

(Des Moines Tribune-Chicago
Daily News Service)

WASHINGTON, D.C. — Signs that Negro family life is continuing to deteriorate, despite gains in educational and economic achievement, are turning up in new data published by the Census Bureau.

A higher proportion of non-white children is growing up with one or more parents absent than was the case 10 years ago.

The same time period also has seen an increase in the number of non-white married women who are separated from their husbands.

In the case of whites, both of these broken-home indicators have held fairly constant in the past decade.

Cited in 1965

The earlier figures were cited in 1965 by Daniel Patrick Moynihan, then an assistant secretary of labor, when he wrote his controversial report, "The Negro Family: The Case for National Action."

"At the heart of the deterioration of the fabric of Negro society is the deterioration of the Negro family," Moynihan wrote. "It is the fundamental source of the weakness of the Negro community at the present time."

Among the figures he cited then was the 33.7 per cent of non-white children under 18 who were not living with their parents. That figure was based on the 1960 census.

In March, 1970, the census bureau's current population survey found that 39.5 per cent of non-white children had one or both parents missing.

Only 10 per cent of white children were without one or both parents in 1960 and 10.9 per cent in 1970.

Another set of figures listed by Moynihan showed that 13.8 per cent of non-white married women were separated from their husbands, in 1960, compared to 4.1 per cent of white married women.

In 1970, the proportion of separated non-white women

had crept up to 16.8 per cent. Among white married women, it was still 4.1 per cent.

Both sets of figures came from the Census Bureau's monthly Current Population Survey, which is based on a sample of 50,000 households. It is subject to statistical sampling error — about half a percentage point in the case of the non-white wives.

Illegitimacy Rates

The illegitimacy rate also has increased for both whites and blacks since the original Moynihan report noted that in 1963 3 per cent of white births and 24 per cent of non-white births were illegitimate.

The comparable 1968 figures are 5 per cent for whites and 31 per cent for non-whites.

Moynihan, who was not available for comment on the new figures, warned in a 1965 article, published in Daedalus, that the Negro family situation might not improve with economic betterment.

The impact of economic disadvantage on the black community may have been so severe he said, that economic improvement would "no longer produce the expected response in social areas."

While it is too early to claim fulfillment of that gloomy speculation, other census data shows that economic conditions for blacks have been improving along with the worsening family situation.

The Moynihan report cited 1963 income figures to show that the median non-white family income was only 53 per cent of white family income. The Census Bureau's latest consumer income study shows that, in 1969 non-white income was up to 63 per cent of white income.

Unemployment

The gap between white and non-white unemployment also is narrowing. For most of the last decade, the rate of unemployment for non-whites has been more than twice the jobless rate for whites. In 1970 it was somewhat less than twice: 4.5 per cent for whites compared to 8.2 per cent for non-whites.

Education also has improved for blacks. In 1960, only 40 per cent of blacks between the ages of 20 and 24 had finished high school. In the 1970, figures, 65 per cent of blacks in that age group had finished high school.

In his Daedalus article, Moynihan noted that the relationship between economic conditions and family stability for blacks was fairly close until about 1962.

"After 1962," he wrote, "unemployment dropped sharply, but the increase in employment opportunities for Negro men was not accompanied by a decline in broken marriages."

"It would be troubling indeed to learn that until several years ago employment opportunity made a great deal of difference in the rate of Negro dependency and family disorganization, but that the situation has so deteriorated that the problem is now feeding on itself — that measures which once would have worked will henceforth not work so well or work at all."

Moynihan also warned in 1965 that the situation could worsen for lower-class blacks at the same time that it improves for those in the middle class. The new census figures indicate that this has indeed happened.

The income gains for blacks have been concentrated among the better-educated, younger, northern, husband-wife families. The very youngest families in this category, those whose head is under 24, have reached approximate equality with whites. Fatherless families have not been gaining on whites at all.

Des Moines Tribune
Wed., March 17, 1971

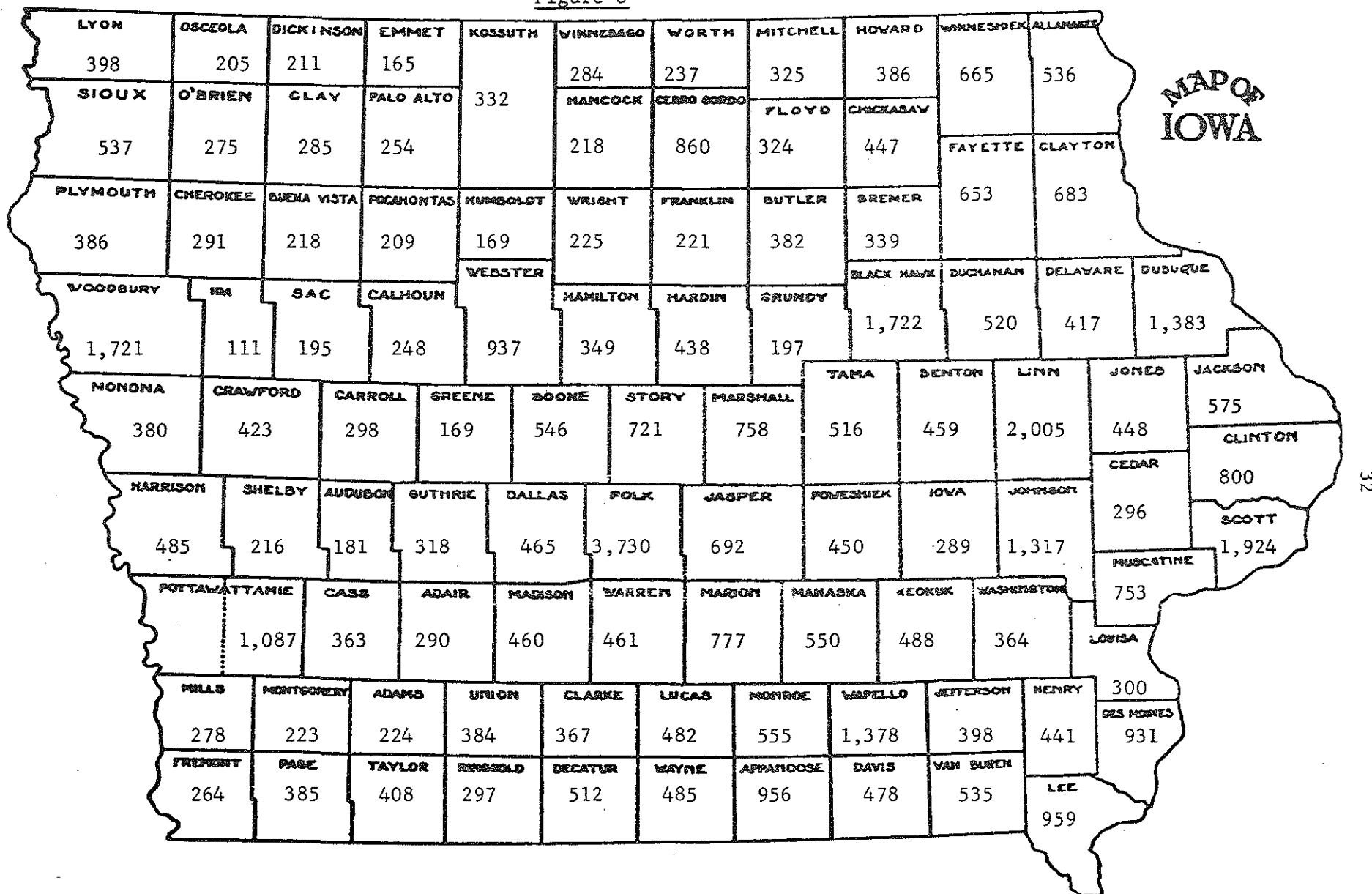
Table 4

All year-round occupied units lacking some or all plumbing
facilities

Unit	Number of units
SMSA	
Cedar Rapids	2,005
Davenport-Rock Island- Moline, Iowa-Ill.	1,924
Des Moines	3,730
Dubuque	1,383
Omaha, Nebr.-Iowa	1,087
Sioux City, Iowa-Nebr.	1,721
Waterloo	1,722
Places of 10,000 Inhabitants or more	
Ames	393
Bettendorf	85
Boone	192
Burlington	685
Cedar Falls	279
Cedar Rapids	1,346
Clinton	459
Council Bluffs	713
Davenport	1,503
Des Moines	2,815
Dubuque	990
Fort Dodge	580
Fort Madison	236
Iowa City	964
Keokuk	301
Marion	93
Marshalltown	479
Mason City	577
Muscatine	441
Newton	223
Oskaloosa	214
Ottumwa	775
Sioux City	1,345
Spencer	123
Urbandale	26
Waterloo	1,066
West Des Moines	90

All Year-Round Occupied Units Lacking Some Or All Plumbing Facilities

Figure 8



State Total - 54,252
Source: 1970 Census

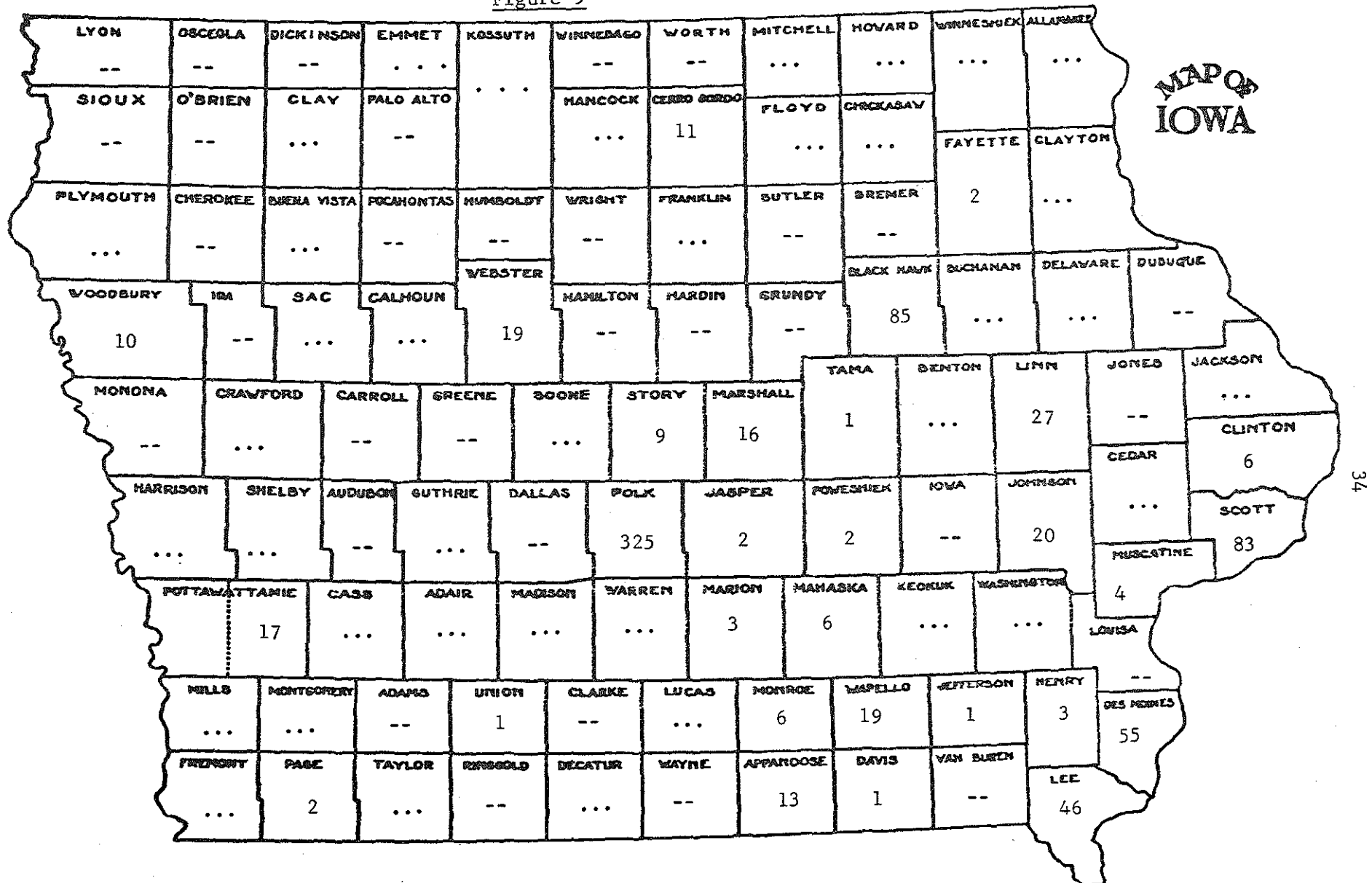
Table 5

All year-round Negro occupied units lacking some or all plumbing facilities

Unit	Number of units
<hr/>	
SMSA	
Cedar Rapids	27
Davenport-Rock Island-Moline, Iowa-Ill.	83
Des Moines	325
Dubuque	-
Omaha, Nebr.-Iowa	17
Sioux City, Iowa-Nebr.	10
Waterloo	85
Places of 10,000 Inhabitants or more	
Ames	9
Bettendorf	-
Boone	...
Burlington	55
Cedar Falls	4
Cedar Rapids	27
Clinton	6
Council Bluffs	17
Davenport	81
Des Moines	279
Dubuque	-
Fort Dodge	18
Fort Madison	14
Iowa City	20
Keokuk	24
Marion	...
Marshalltown	14
Mason City	11
Muscatine	4
Newton	-
Oskaloosa	4
Ottumwa	18
Sioux City	10
Spencer	...
Urbandale	-
Waterloo	81
West Des Moines	5

All Year-Round Negro Occupied Units Lacking Some Or All Plumbing Facilities

Figure 9



State Total - 805

Source: 1970 Census

-- indicates zero

... indicates data withheld

Housing

Of the 896,311 occupied housing units in Iowa, 54,252 (6.1%) lack some or all plumbing facilities. Of the latter group, 805 (1.5%) are occupied by Negro families. Of the 54,254 deficient units, 13,572 are in the urban areas (Standard Metropolitan Statistical Areas) and 3,411 are in other urban areas of more than 10,000 inhabitants. (See tables 4 & 5 and Figures 8 and 9).

A study of welfare recipients in Des Moines (1966) reveals these characteristics:

Property Resources

- * Poor housing conditions were found for all types of families surveyed.
- * All types except for OAA singles believed their houses to be in need of repair, traveled a mile or more to buy food, and moved within the last 5 years.
- * ADC and OAA families with husbands absent were in poorer housing more often than the others.
- * Outlays of money for housing were unusually high.
- * Families generally had major appliances and electrical equipment, but the need for repair was extremely high.

Human Resources

- * 65% of non-welfare families rated their health as good in contrast to about 45% of welfare recipients.
- * Almost 1/2 of the respondents were in a state of normlessness.
- * OAA families scored lowest on morale. Low morale scores related to "planning ahead the things to be done next week or the week after" and worry about money matters.
- * Crises situations most frequently related to money problems, health and accidents, children's education and well being, housing, death, and strained family relationships.
- * Employment proneness (eligibility) seem to be much higher for non-welfare families.

What is developing according to many observers is a new depth to old problems. Acknowledged is the fact that high rates of crime, abandoned families, near-illiteracy, mental illness, disease, indifference to steady work, alcoholism, addiction and unsanitary practices were found among immigrants of the past. What enabled these newcomers to survive

and in most cases to climb out of poverty, social historians say, were conditions far different from those prevailing now.

Jobs for unskilled laborers, then, were relatively plentiful. People tended to accept the dictum of "work or starve" as a necessary condition of life. Additional discipline came from family, religious, and neighborhood loyalties.

Today racial barriers are proving somewhat harder to topple than past ethnic or religious discrimination.

For the poor of all races the supply of easily available jobs at low pay - once the first step up the ladder for newcomers - is decreasing for a variety of reasons, ranging from automation to employment shifts to the suburbs.

Meantime "work or starve" is becoming an empty phrase in today's America.

Increasingly welfare is accepted as a respectable means of survival to the extent that many recipients now belong to the National Welfare Rights Organization in quest of bigger and better benefits to themselves.

This development is seen by many social observers as inevitable at a time when mass communications whet the appetite of all Americans for more of the good things of life - and offer to those who feel "left out" a chance to make their demands heard by the nation at large.

Since 1961 the number of welfare recipients in the U.S. has doubled - from 7.2 million to about 14.4 million. Costs have increased from 4.3 billion dollars a year to nearly 17 billion. Baltimore, New Orleans, New York, Philadelphia, St. Louis, and San Francisco have 15% of their people on relief.

Of the 14.4 million persons on relief:

- 71.0% are on ADC
- 15.0% are on Old Age Assistance
- 7.0% are on general assistance
- 6.4% are disabled persons
- .6% are needy blind

In Iowa welfare costs increased from \$57.2 million in 1961 to \$122.7 million in 1971, an increase of 115%. (This does not include administrative costs.)

A complete new approach to welfare is on its way through Congress (HR 1 by Mills and Byrnes). If the design holds, relief rolls will be opened to almost 26 million Americans. The number eligible in Iowa for benefits would increase from 102,100 to 241,700 - an increase of 137% over those presently eligible. This would amount to 1 Iowan in 12.

The immediate effects of the legislation would be to:

- * Almost double the number of people eligible for welfare nationally; about 26 million including the "working poor" could qualify for cash payments. That would be 1 out of 8 Americans.
- * Establish for the first time - the principle of a guaranteed annual income, paid by the government to every poor family with children.
- * Boost Social Security benefits by 5%, the third hike within 2½ years for an overall rise of 33% in old-age pensions.
- * Raise payroll taxes on the working class by 56% or more in the next four years - and higher in years to come - to pay for bigger Social Security and Medicare benefits.
- * Increase the cost of the total social-welfare package to federal taxpayers by nearly 12 billion dollars over current low in the first year the bill takes effect, and as much as 16.6 billion by fiscal 1976.

The Handicapped

The handicapped both youth and adult in Iowa represent a group with special needs. Some of the handicaps are physical, some mental.

Many of these are adults who have the same responsibilities as those who are more able to cope with maintaining a home and family. The youth are looking forward to taking a place in adult society.

The occurrence of mental retardation in the Iowa population is shown in the accompanying table. (Table 6)

Table 6 *

Estimated Incidence of Mental Retardation in Iowa
Level of Retardation and Age

Age	Level				Total
	Profound IQ 0-19	Severe IQ 20-35	Moderate IQ 36-52	Mild IQ 53-75	
Under 1 year	25	59	101	1,495	1,680
1-4	113	264	454	6,729	7,560
5-15	277	647	1,109	16,447	18,480
16-64	731	1,705	2,923	43,360	48,719
65+	113	265	434	6,729	7,561
Total	1,259	2,940	5,040	74,760	84,000

It is predicted that by 1975, 167,000 persons in the state will be eligible for some phase of the broad range of rehabilitative services available.

* Based upon data from "Current Population Reports", July, 1964, U. S. Census Mental Retardation, A Guide to Community Action, George A. Beal, et al., page 9, 1965.

HOME ECONOMICS EXTENSION
IN
URBAN AMERICA

Crime, visual ugliness, pollution, alienation, unemployment, financial strains, housing inadequacies, and poverty are among the terms often used in describing living conditions in American cities. But the urban setting also provides for its dwellers such unique services as cultural opportunities, social services, and learning facilities.

Newsmen, distinguished university faculty, top-level governmental officials, community leaders and citizens have described vividly the urban scene and articulated the concerns through television documentaries, journal articles, books, news releases, and proposals for action.

The United States has 150 cities with populations of 100,000 or more, according to preliminary figures of the 1970 Census. Their combined population is 55,111,206 or 22 percent of the total population of 205,931,000 enumerated in 1970 in the 50 states and District of Columbia. Thus, one in five of all persons in the United States reside in these cities. The trend to congregate in these growth centers continues. Although problems exist in rural America, the number of people affected requires that increased attention be directed to the urban situation.

Iowa has 5 urban areas with populations of 100,000 or more. Their combined population is 827,969 or 29% of the total state population of 2,824,376. Thus 3 in 10 of all persons in Iowa reside in the five largest urban areas.

Home Economics Concern

Home Economics focuses on the well-being of the family, its members, and its near environment. The urban family is beset with pressures - to make decisions on allocation of resources, to provide an environment conducive to the development of each family member, to interact with and find its place in the community. The family can be an important support system for its members. Tomorrow's families will vary in structure and life style. But the family system in our society needs strengthening if it is to continue its nurturing and supporting functions.

Excerpt from "Home Economics Extension in Urban America," by an Urban Task Force appointed by the Extension Committee on Policy, May, 1971.

For more than 50 years, Home Economics Extension has been addressing itself to the problems and concerns of families. Home Economics Extension programs have been available to all families, regardless of their place of residence, income, education, race, age of family members or the intensity of their problems. Programs also have been directed to influencing the quality of facilities and services for families and the utilization of these facilities and services by families.

In looking to the future, the document, "A People and a Spirit" recommends: "The Cooperative Extension Service must play a significant role in providing educational programs for the family and for American youth, wherever they may live."

Recognizing critical urban concerns directly associated with quality of living, Home Economics Extension will direct its resources to:

Nutrition

Improving the nutrition of limited-resource families will require a major educational effort directed at helping these families secure an adequate diet.

Consumer Competence

Educational programs will help limited-resource consumers secure the most satisfactory consumer goods and services by increasing their knowledge and improving their skills in making decisions.

Family Housing

The need for better housing becomes more acute each year, especially for limited resource families in the inner city. Their housing could be improved through educational programs which would help them develop maintenance skills and would create an awareness on the part of builders, contractors and landlords of the needs of these families.

Family Well Being

Urban parents in the inner city can be made aware of the needs and interests of growing children and thus take positive action to improve the home environment and the family life for all family members.

Home Economics Extension, with its access to the research base in land-grant universities, can help families meet these concerns "head-on" through educational programs - programs which align with the mission-oriented goals and research problem areas of the Association of Administrators of Home Economics.

The prime focus for Extension's urban thrust will be LIMITED-RESOURCE FAMILIES and the programs, services, and facilities necessary for their well-being.

Home Economics Extension's Response

Home Economics Extension brings to the urban setting access to the subject matter and research base in the land-grant university. It also brings the structure and expertise to effectively engage the potential participants in planning. Effectively involving in program development those who will be affected is an essential element in continuing education and problem solving. The alternative responses for allocating Extension resources to urban concerns include:

- * Influencing public policies, attitudes and decisions
- * Influencing family decisions and behavior
- * Providing continuing education for professionals engaged in family related services
- * Designing, conducting and evaluating experimental programs and services
- * Conducting diagnostic and evaluative research.

Each of these responses or combinations of responses will be selected as appropriate in an attempt to solve major problems of limited-resource families residing in urban areas.

Multi-disciplinary action and research programs are imperative if Extension's response to family and community problems is to be meaningful and effective. Home economists - currently the professional group most concerned with family life - are urged to take the lead in getting educational teams formed and in contributing substantially to the team's plans and actions in urban program development.

COMMUNITY RESOURCE DEVELOPMENT

Community Resource Development in Home Economics Extension involves individuals and families as well as personnel of public and private agencies interested in the economic, social and cultural aspects of the community. It includes programs to assist local citizens and leaders to recognize opportunities, analyze problems, evaluate alternatives, set priorities, and organize to achieve goals.

The broad concept of Home Economics Community Development is based on the orientation of man to the total environment. The community environment specifically is classified under three functions: (1) government or political functions which includes government services, miscellaneous community services and public safety, (2) business or economic function which includes production of goods and services, public services (the utilities), distribution, wholesale and retail, and (3) social function which includes educational services, recreational services, health care services (care, prevention and education), welfare service assistance (family counseling, child welfare), correctional services which include institutional care, probation and parole, religious services (worship and educational activities), and associational opportunities (professional fraternal, social and institutional organizations). Within this broad structure and concept, Home Economics contributes to family and community:

- * To help citizens become aware of excellence in community services through opportunities for human, cultural and economic development.
- * To identify family needs which can be served through community efforts.
- * To develop an awareness of needed facilities and services related to family living and then help the families to use them to reach their goals.
- * To identify, train and interrelate the community leadership which is essential to community action.
- * To give assistance to and work with groups, agencies and organizations for community development.
- * To give assistance to community leadership in the coordination and integration of community resources and services.

Prepared by the Community Resource Committee: Bernice Bateson, Chm., Tom Beattie, Jacky Yep and Charlotte Young.

I. Communities Are Changing In Iowa

Growth Rate

Iowa has had a slow, steady growth rate amounting to 2.4% between 1960-1970.

At the same time a negative net migration rate indicates a steady loss of people from the state. However the 1960-1970 loss through migration for this decade is the smallest in 30 years.

Net Migration Loss

1940 - 1950	-7.2%
1950 - 1960	-9.0%
1960 - 1970	-6.5%

Rural-Urban Shift

	<u>Rural</u>	<u>Urban</u>
1900	75%	25%
1960	47%	53% (Over 50% for the first time)
1970	43%	57%

The trends among Iowa's incorporated places reflect the general movement of Iowa toward a more urbanized state. Generally, the larger urban and suburban communities have experienced a greater growth rate than Iowa's smaller communities. The only category of incorporated places which remained relatively constant in population were the incorporated places with less than 1000 population. The trend in Iowa has been toward a greater concentration of population in urban communities. (See the following list of counties for rural-urban classification).

Implications:

The smaller, more rural communities are those losing population. Some have already lost many of their citizens, others are just now feeling the great impact of out-migration. Since those migrating are apt to be in the younger age group, the remaining population tends to be older with a high percentage of "over 65's"

Rural-Urban Trends of Iowa Counties, 1970.

Counties 100% Rural	Counties Over 50% But Less Than 100% Rural	Counties 50% Or More Urban
Adair	Allamakee	Howard
Adams	Appanoose	Humboldt
Butler	Audubon	Jackson
Calhoun	Benton	Jasper
Clayton	Boone	Jones
Fremont	Bremer	Kossuth
Guthrie	Buchanan	Lucas
Ida	Buena Vista	Lyon
Iowa	Carroll	Madison
Keokuk	Cass	Mills
Louisa	Cedar	Mitchell
Pocahontas	Cherokee	Monona
Ringgold	Chickasaw	Monroe
Taylor	Clarke	Montgomery
Van Buren	Crawford	O'Brien
Wayne	Dallas	Osceola
Worth	Davis	Palo Alto
	Decatur	Plymouth
	Delaware	Poweshiek
	Dickinson	Sac
	Fayette	Shelby
	Floyd	Sioux
	Franklin	Tama
	Greene	Warren
	Grundy	Washington
	Hamilton	Winnebago
	Hancock	Winneshiek
	Hardin	Wright
	Harrison	
	Henry	
		Black Hawk
		Cerro Gordo
		Clay
		Clinton
		Des Moines
		Dubuque
		Emmet
		Jefferson
		Johnson
		Lee
		Linn
		Mahaska
		Marion
		Marshall
		Muscatine
		Page
		Polk
		Pottawattamie
		Scott
		Story
		Union
		Wapello
		Webster
		Woodbury

being found in many small rural towns.

Such communities are apt to be over organized, with the excess of organizations depending on an aging and dwindling body of leadership. The fact of more women working away from home also puts a drain on community leadership. An aging population increases the demand for certain kinds of community services with fewer people to support them and a decreasing tax base to support them with. Shortages of manpower and money could both be problems in providing services. The question of how can such communities join with each other or with larger communities to provide needed health services, social services, cultural programs, etc., is an important one.

Urbanization is a vital force in Iowa life today, bringing changes to all parts of the state. The most rapid increase in population and in-migration occurs in the urban areas, with the greatest population growth occurring in the suburban areas.

Problems of finances of new streets, schools, parks and recreation facilities, shopping centers, police and fire protection, etc., and of renewing them in older, declining areas bring many problems to the cities. Overall area planning which includes the central city, suburbia and the surrounding rural area is essential to orderly and effective decision making.

Mass communication and transportation have had an urbanizing effect on the more rural areas of the state. This is evident in where rural persons buy goods and services, where they travel, where they go for recreation.

It influences the number of women in the labor market, and the distance both men and women drive to jobs. It influences the expectations people have about housing, education, cultural facilities, their manners and morals, and their interactions with others in their surroundings. It influences the demand for goods and services and makes quality of the environment a state wide concern.

The expected increase in the 20-40 year age group will show up primarily in the urban areas, where the need for more housing and all of the services families require will be very evident.

Questions raised by the situation:

1. What community decision which are relevant to the family need to be made in the small rural community? In the urban community?
2. Who should make the decisions relating to priorities in communities?
3. What do the decision makers need to know to be able to make good decisions?
4. How do the decisions made about community problems affect the persons living within the community? Those outside the community?
5. What will be the long time effect of lack of community decision about its problems?

II. Women in the Labor Force

To meet the ever growing demand for skilled workers in many occupations, increasing attention is being given to women in the labor market. It is predicted that by 1980, 5.3 million mothers aged 20-44 will be in the labor force. In 1970, 35% of the workers are women.

Nearly all of the 5.6 million women who are widowed, divorced or separated from their husbands are employed outside the home for compelling economic reasons. Others work to raise family living standards, meet rising living costs, education costs for the children and medical care. The more than 6.4 million single women workers must work to support themselves and others.

Relatively few women have the option of working solely for personal fulfillment.

Implications:

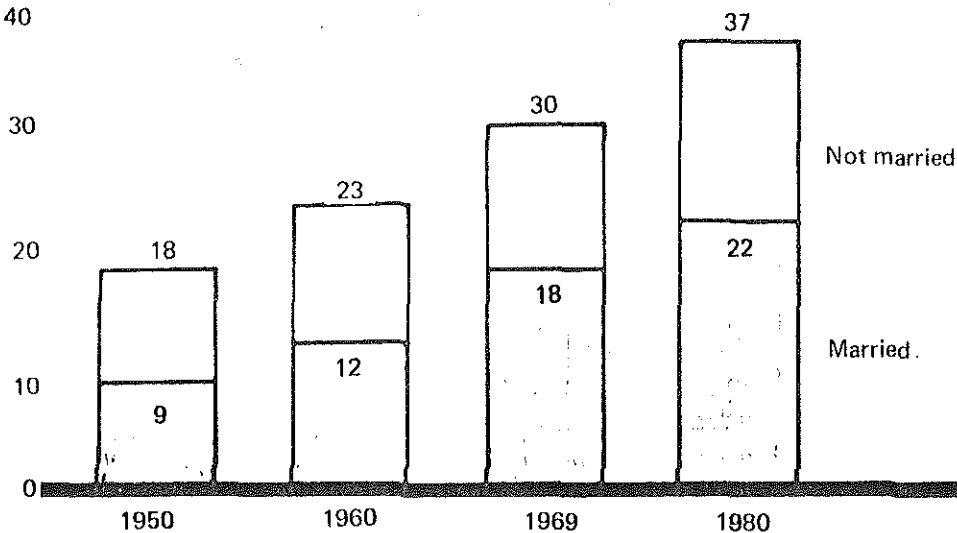
1. Many of the women who are forced by family circumstances or who desire for other reasons to enter the labor market are not always aware of all that is involved:

the costs of working
job opportunities
training needs and opportunities
personal preparation
services available in the community
personal and family decisions which must be made
community attitudes

The increasing number of working women underscores the need for day care, continuing training and part-time employment

FIGURE 1

Millions of women in the labor force

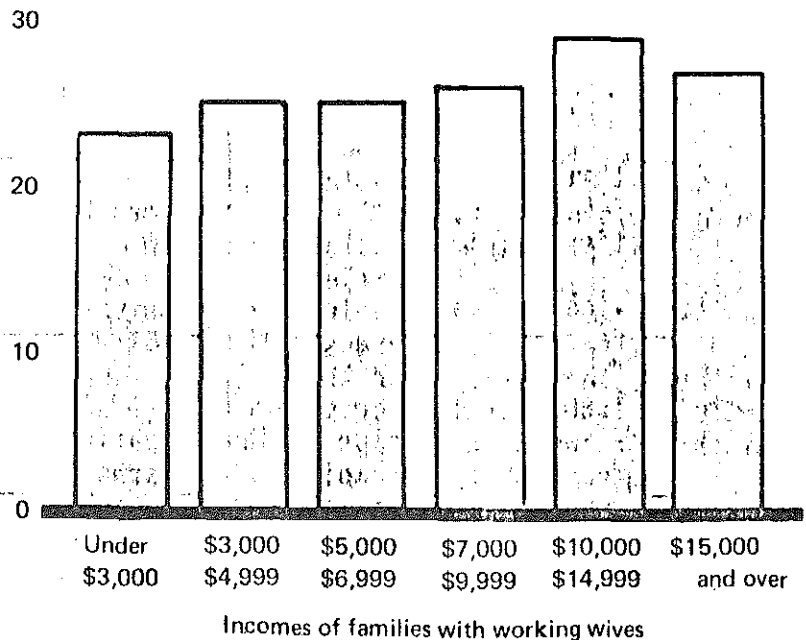


Women presently make up about a third of the total work force and by 1980 will double their numbers of 1950. It is now estimated that 9 out of every 10 girls will be employed sometime during their lives. If the working girl remains single, she will probably spend 40 years in the labor force. If she marries, raises her family, and returns to work, she will still work 23 years before retiring. Many women no longer remain home with their young, for in 1969, 28% of married working women had children at home under 6 years of age.

FIGURE II

Median percent of family income contributed by wives' earnings, 1968

Since World War II the "either marriage or a career" concept for many women has changed to both marriage and a career. And while income received is still less than what men get in many instances, working wives make a significant contribution to total family income. In each income bracket women contribute about one-fourth or more of the family income.



Incomes of families with working wives

2. While the idea of women working outside the home is pretty largely accepted in Iowa, women are not widely recognized as the primary earners in the family as they often must be and consequently do not receive pay and promotion opportunities equal to that of men in many jobs. This is in spite of the federal law prohibiting discrimination because of sex.

Many attitudes about the unreliability of women workers because of health and family responsibilities are not borne out by statistics on absenteeism.

3. Working women need many community services to help them carry on their dual role successfully. The need for these is not always recognized in the community.

III. Child Care Facilities

One of the services needed by the working mother is that of high quality child care. Nearly one in every three women in the United States who have children under 6 are working.

In the U.S. there are 4.5 million children below school age in need of day care, and another 6.1 million children of school age who need after school care. At present only 637,000 children of these millions who need it are in licensed day care centers. Including children to age 14 who need after school care, only 2% of the children of working mothers benefit from a group child care experience.

By 1980 it is predicted that 53 million women, aged 20 to 44 with children under 5, a 43% increase, will be in the labor force. A similar situation exists in Iowa where there are now nearly 500 day care centers, nurseries and pre-schools. Six counties have none and 22 have one day care facility. There are 918 licensed day care homes in 47 counties. Figures 3-7

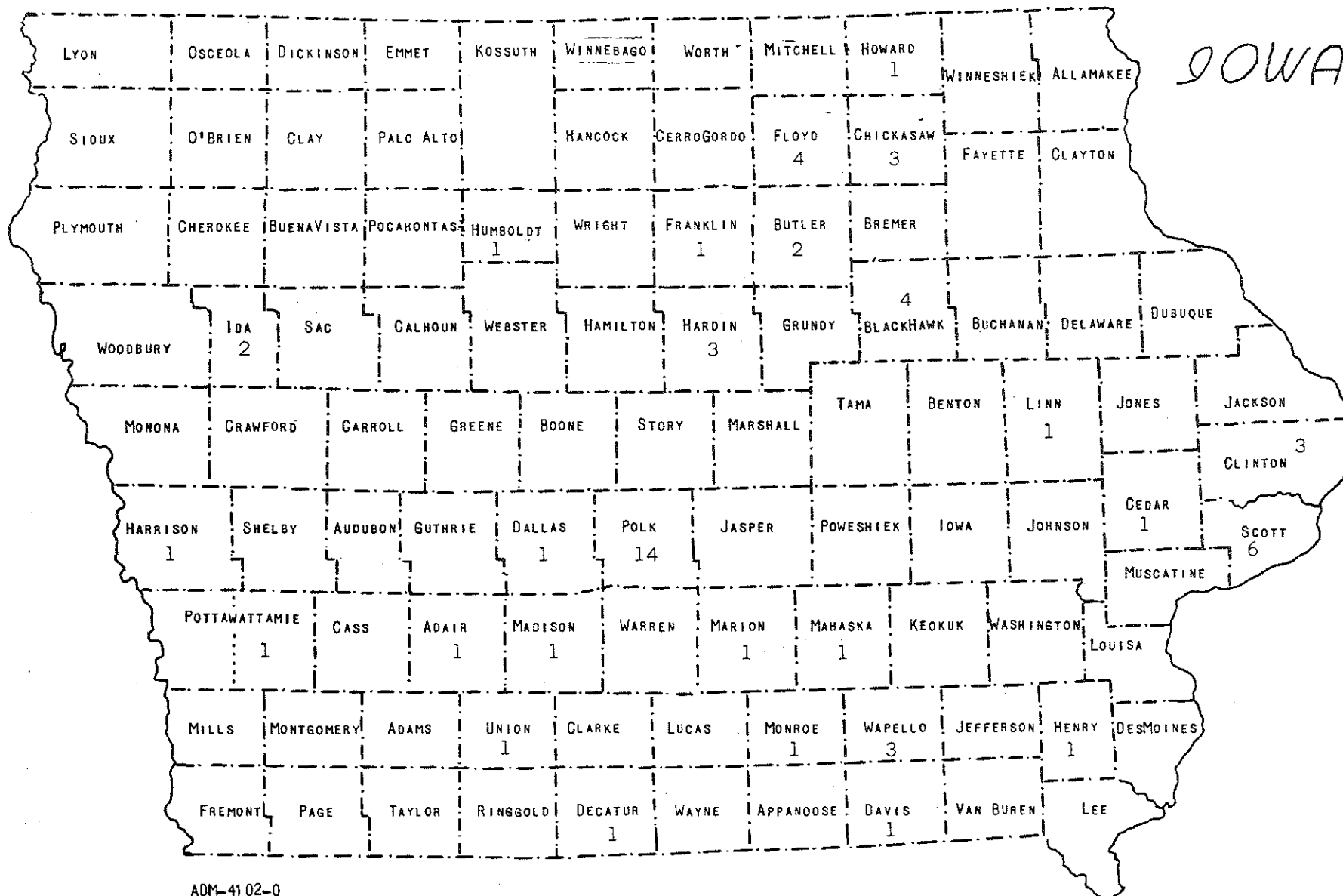
Implications:

1. Many children of working mothers are not receiving adequate care during the times when the mothers are away from home.
2. Since the first few years of a child's life is the period of most rapid physical, social, emotional and intellectual growth, the earliest environmental influences set the developmental patterns. This requires child care in a situation which is more than "baby sitting" but which provides the developmental aspects of the home.

FIGURE 3

50 LICENSED FOSTER FAMILY HOMES (FULL TIME)
SUPERVISED BY STATE DEPARTMENT OF SOCIAL SERVICES
IN 26 COUNTIES

January 1, 1971

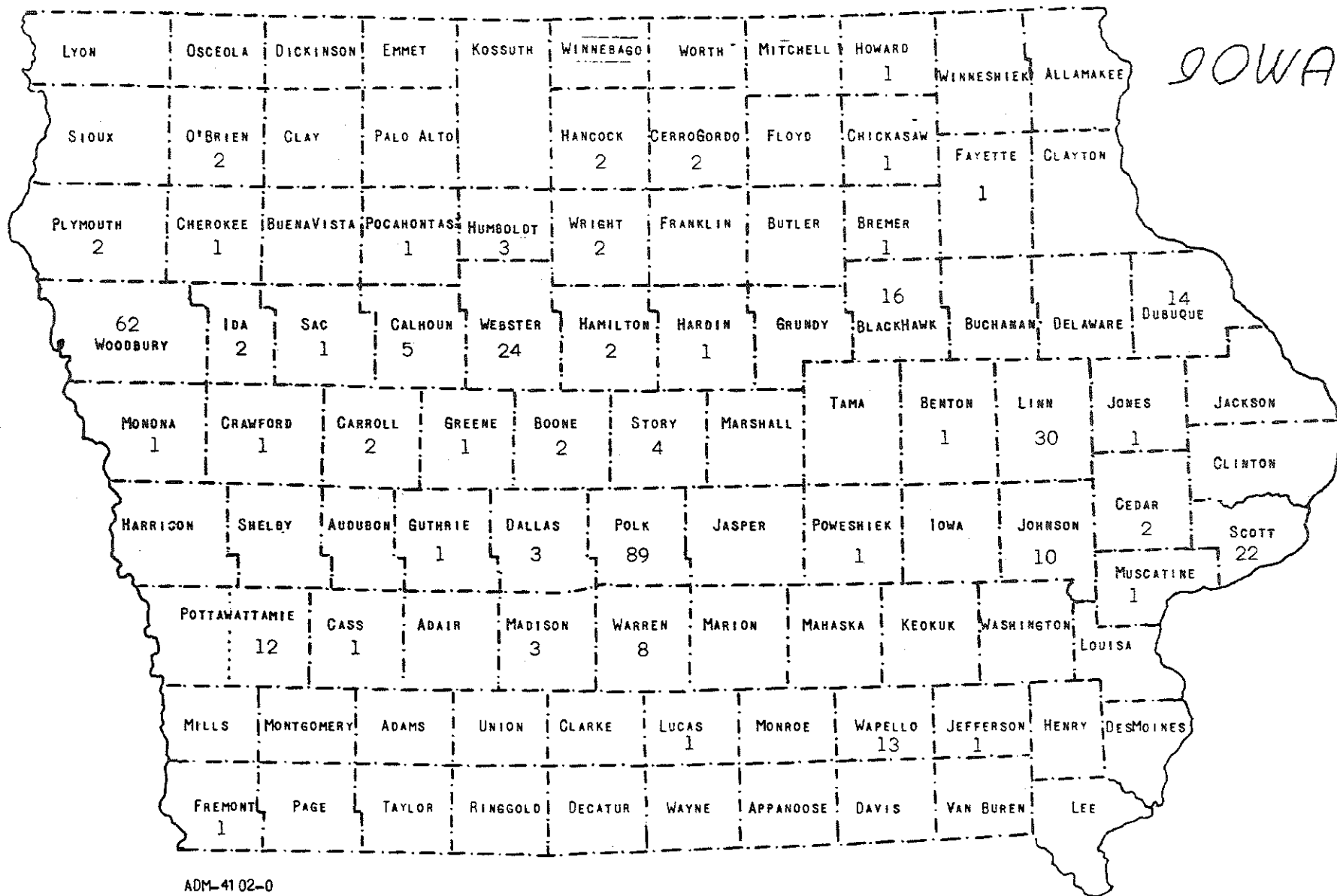


ADM-41 02-0

FIGURE 4

358 LICENSED FOSTER FAMILY HOMES (FULL TIME)
SUPERVISED BY PRIVATE AGENCY IN 46 COUNTIES

January 1, 1971



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FIGURE 5

500 LICENSED NURSERIES, PRE-SCHOOLS & DAY CARE CENTERS

March 1, 1971

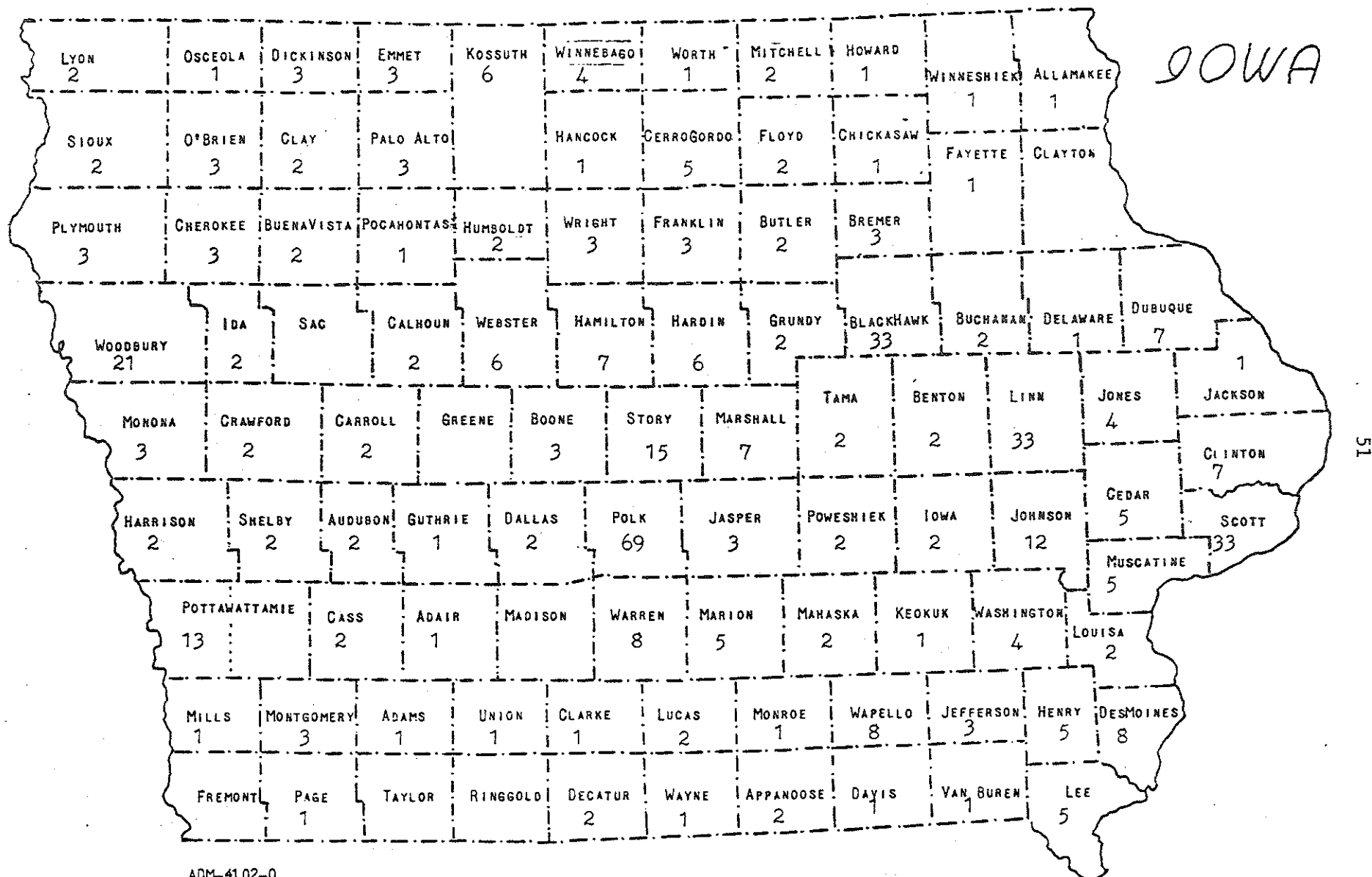
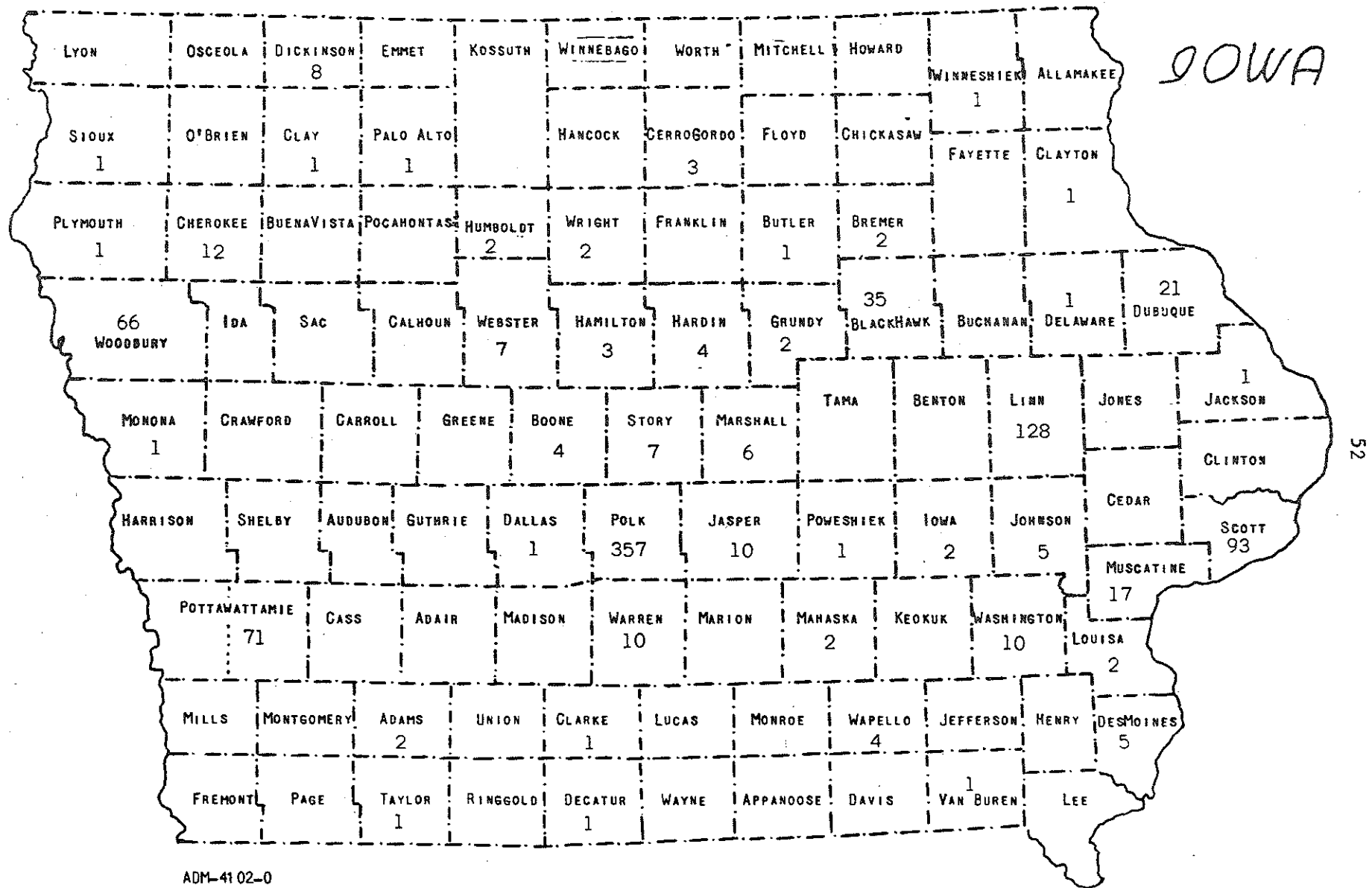


FIGURE 6

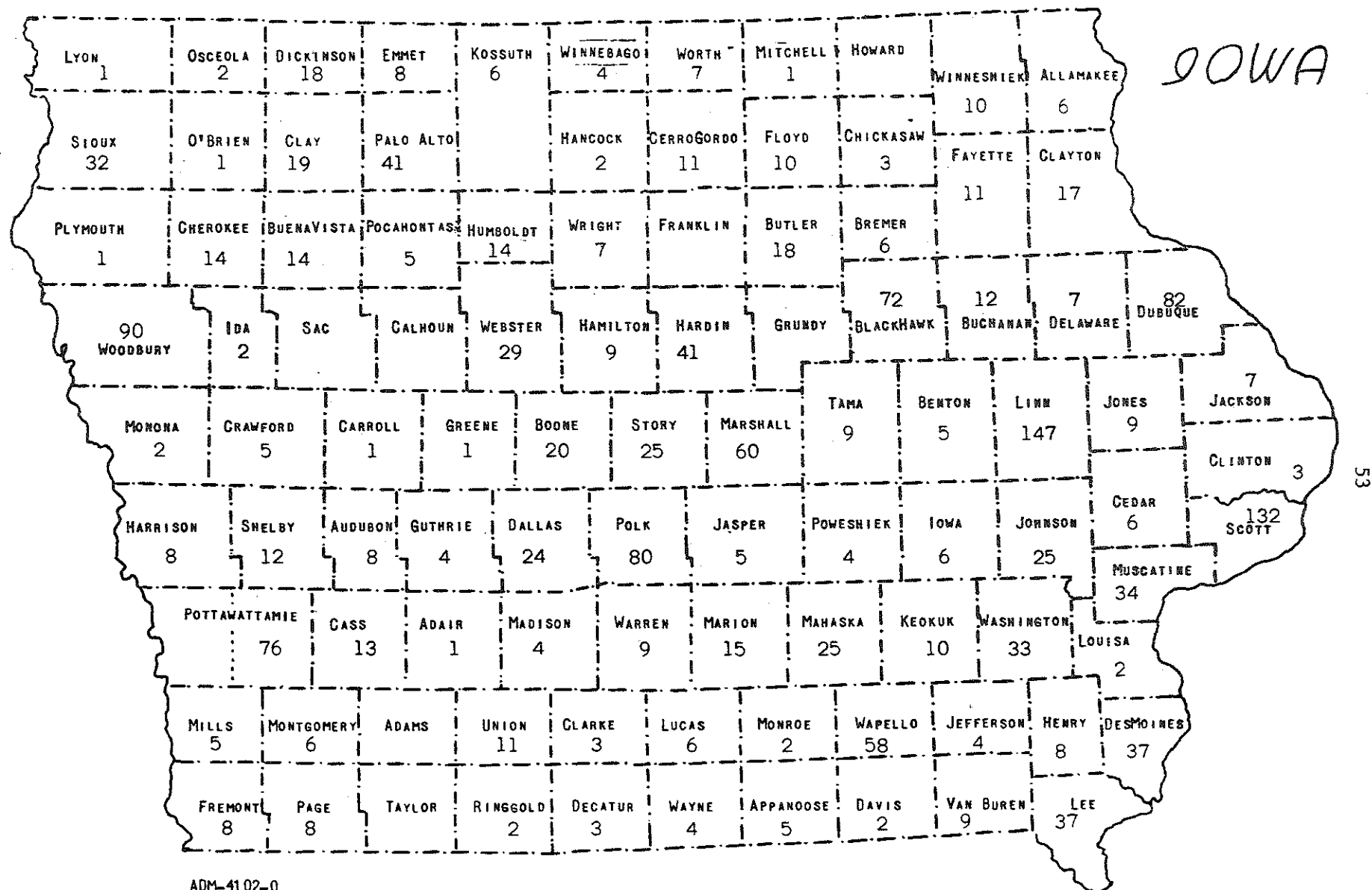
918 LICENSED DAY CARE HOMES IN 47 COUNTIES

January 1, 1971



1681 LICENSED FOSTER FAMILY HOMES (FULL TIME)
SUPERVISED BY COUNTY IN 92 COUNTIES

IOWA



Total of 2912 Licensed Foster Family Homes (Including Full Time and Day Care)
104 Homes Licensed for Both Full Time and Day Care

3. Adequate child care is dependent upon the training received by those involved in the service. If the care is to contribute to the optimum development of the child, those employed in day care centers or providing day care homes need a basis knowledge of child development.
4. In many places, providing child care is not seen as an appropriate community function.
5. Many people concerned do not realize the importance of early child care, the need for day care facilities, the characteristics of good quality day care programs, nor the need which exists within their own communities.
6. Many families wherein there are working mothers do not realize the importance of good day care.

IV. Public Safety (See statistics under HEALTH, Part X)

Crashes on streets and highways have killed and injured millions more Americans than all the wars we have ever fought. Although mechanical failure, obsolete highways and ambiguous road signs are contributing factors, driver error causes most traffic crashes, speeding being one of the chief causes. Three out of four people killed or injured are on dry roads and in clear weather.

Among teenagers who have the disadvantage of limited driving experience, the problem is especially critical. Young drivers have twice as many crashes as adult drivers.

The increase in numbers of vehicles on highways is creating additional safety problems. Motorcycling is the fastest growing sport in the United States. Eight million bicycles have been sold this year. There are in excess of 110 million motor bike operators in the United States. Snow mobiles are an ever increasingly popular recreational vehicle. This creates an enormous potential for accidents.

The use of alcohol has become a significant contributing cause of accidents. Records show that 32% of the year's traffic victims were in crashes which involved drinking drivers.

Driver education courses have proven to be a vital factor in accident prevention on the roads of America. The typical adult has never had professional driving instruction and no matter how they learned to drive, all motorists can benefit from the sharpening of skills that refresher courses provide.

Thousands of persons survive vehicular crashes but later die or become premanently disabled because help is not available promptly enough or because the wrong kind of treatment is given.

Leisure time for a large portion of Iowa's people has grown rapidly in recent years. Many accidents are related to leisure time activities - swimming, boating, skiing, camping, hunting, etc.

Implications:

1. Driver education is an important factor in accident prevention. There should be efforts to provide training for all new drivers and "refresher courses" for experienced drivers.
2. The growing use of recreational vehicles should be recognized and provision made for them to be enjoyed with safety.
3. Those who provide recreation commercially should be aware of hazards involved in their enterprises.
4. Families developing private or public recreational facilities need to know the hazards involved and how to avoid them.
5. Newer methods of handling medical emergency such as victims of auto crashes, etc. are not in use in Iowa. These could save many lives and make such treatment more effective.

V. Health

The situation regarding health care facilities has been outlined in the Health section of this statement.

Provision of many such services are dependent upon community action. Leaders within the community must recognize the need and see what possibility there is for meeting the need by community effort. They often then need technical assistance to organize the community action to get the job done.

In such a way hospitals, clinics, extended care facilities, homemaker-health aide services, home delivered meals, etc. have been established in many communities.

VI. The Aging

The high percentage of elderly persons in Iowa's population gives special cause for consideration of this group which has much to contribute to others in society.

1. Elderly citizens need an opportunity to demonstrate their skills and pass them on to the next generation.
2. Social climates need to be created to give the aging an opportunity to participate and contribute.
3. Twenty-five percent of retired men want to return to work. There is need to provide opportunities to take advantage of the skills they possess.

The demands of this group for services is high. With research on the economic status of the elderly revealing that 60% of Iowans over 65 are classified as poor, it is evident that many cannot pay for the services they need. In many communities the services do not exist. This may be due to lack of manpower, financing, or the recognition of the community leaders that there is need for the community to provide such services or facilities, or that it is the appropriate role of the community.

Many of the smaller rural communities are short of both manpower and money, and it would be very difficult for them to provide services even for those who could afford to pay the cost.

There is need for:

1. Recreational and social facilities which are accessible to older persons.
2. In-home services which enable them to live independently as long as possible. This includes provision for food, simple home repairs, limited personal care and other such services.
3. Transportation for shopping, social life, business and health needs.
4. Suitable housing.
5. Health care facilities.
6. Friendly visitor and similar "caring" services.

Where there is a shortage of funds, many of these could be provided on a volunteer basis. Recruitment, training, and maintenance of a corps of volunteers for this purpose would be a worthwhile community or organizational effort. Better use of existing facilities could also be made such as use of school buses and school lunch facilities to serve the elderly.

Coordination of programs and facilities now in existence would make them available to more people.

The elderly have some needs which must be met by legislative action such as tax relief, use of school buses and school lunch facilities to serve the group and methods of financing in-home services. The last raise in federal Social Security payments was negated for many Iowa citizens because of a state law which cut the amount of the raise from any public aid they were receiving.

Those approaching retirement

In Iowa there are 446,184 in the 55 to 64 year age group which will be turning 65 within the next 10 years and 310,852 in the 45 to 54 age group.

Many of the same problems of health, housing, transportation, employment and income faced by those over 65 are shared or will be soon by these citizens. Many of these are finding themselves "old" in their labor market, caught in a conflict between lengthening of life and the shortening of work careers.

During this time of life there is need for individuals to think about the adjustments involved in retirement and make preparations for the change in income and activity.

The satisfying of the needs of this group may also take some action by the community to provide the services needed to assure economic security, optimum health, recreational and self-enrichment opportunities.

VII. Cultural Activities

The Office for Planning and Programming for Iowa in "The Quality of Life in Iowa - An Economics and Social Report to the Governor for 1970" has reported on the activities of the Iowa Arts Council.

Cultural Output

Another essential ingredient in the assessment of the quality of life of Iowans is the cultural output of the society. Pressures of Twentieth Century living, along with increased leisure time, have resulted in a cultural explosion in the United States. This explosion, measured in terms of increasing attendance at museums, theaters, formations of art councils, etc., has also been evident in Iowa.

A state agency, the Iowa Arts Council, was established in 1967 to assist the growth of cultural activities. The Council sponsors a wide variety of programs and services for communities, schools, museums, and local organizations. These programs include works in music, theater, dance, visual arts, literature, research, and lectures.

An accelerated program, with the slogan "ART is Part of Participate 1971-1972," plans for local art councils to avail themselves of the services of the Council in the coming year. These services include: (1) tours of art groups and circulation of visual art shows, (2) provision of expert consultant services to local communities, and (3) educational services to supplement regularly scheduled classroom work.

Realizing that it is difficult to judge cultural activities in quantitative terms rather than qualitative, several facts concerning the state's cultural output are encouraging.

First of all, 50,000 people were reported as attending art events having some connection with Iowa Arts Council grants alone. This is an increase of 20,000 over 1969.

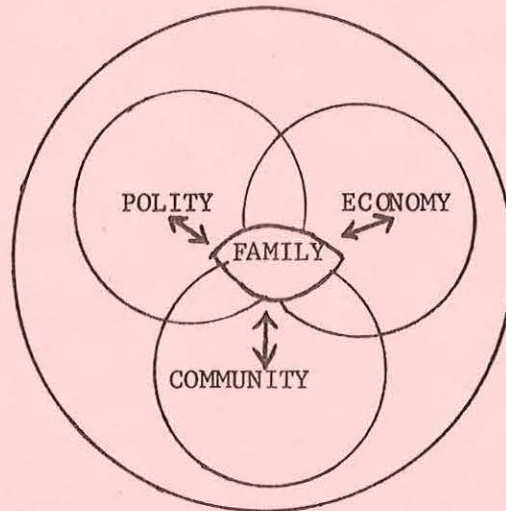
Twelve art councils were in existence in 1970, located in all regions of the state. Communities involved are Ames, Charles City, Des Moines, Fort Dodge, Sioux Center, Davenport, Waterloo, Indianola, Denison, Cherokee, Dubuque, and Sioux City.

Four communities have had a professional artist-in-residence for one month or longer to teach classes and exhibit works of art.

With this type of public activity to promote the cultural arts in the state, there is need to expand the efforts being made as much as possible in order that more of the state can benefit. Special effort needs to be made in the more rural areas of the state in order that persons there can have the same desire for and the same access to the life-enriching activities as do those in the more urban areas.

CONSUMER COMPETENCE

All behavior takes place in a social setting, no one can operate in a vacuum. As the family becomes more of a consuming unit instead of a producing unit, the interaction increases with other consumers, the economy, community and polity. This relationship can be illustrated with the family as the core as:



Some examples of the family interaction are:

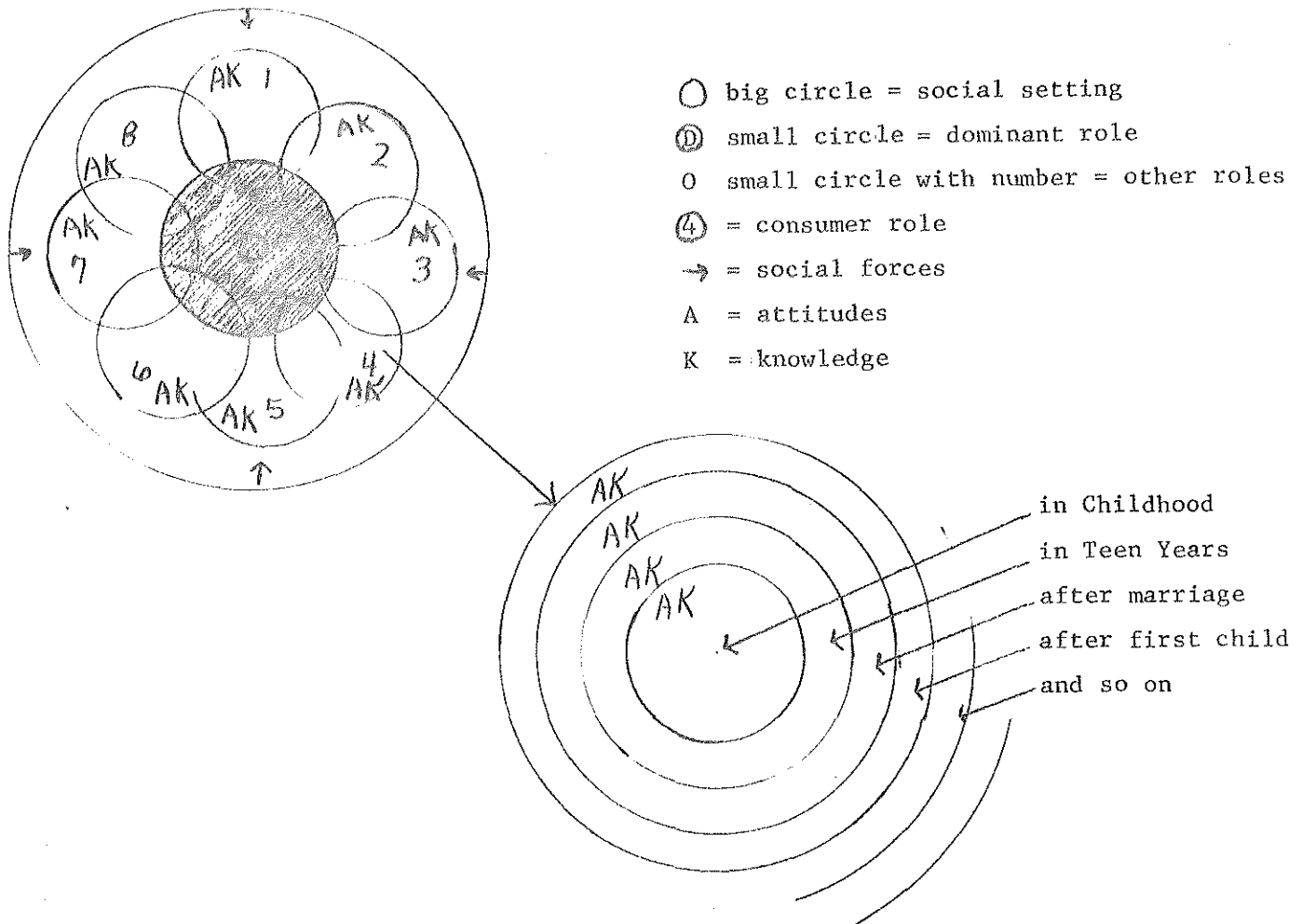
	<u>Family Gives</u>	<u>Takes</u>
Polity (Governments)	taxes selects public officials supports programs	justice protection (meat inspection to defense) services (snow removal to education)
Economy	spends in marketplace invests resources	receives money income receives consumer goods and services
Community	support in terms of time, money, loyalty	goods and services provided by schools, churches, civic organ- izations, and social clubs, etc.

Consumer behavior is a part of human behavior. The consumer role is one of many performed by each individual. Consumer behavior patterns of each individual vary at different points in life. Past experiences influence consumer behavior. The attitudes and knowledge relative to the consumer role and other roles are an accumulation of the attitude and knowledge from previous experiences in the consumer role.

Prepared by the Consumer Competence Committee: Karen Hull, Chrm., Lois Ingels, Lois Nuehring, Phyllis Olson, Gertrude Smith, Enid Wortman.

Individuals all play many roles, the same one may not be dominant at all times. The consumer role may not be the dominant role much of the time as other roles such as wife, father, farmer, student may be dominant. However, the consumer role is a universal one and significant considering the amount of resources devoted to it throughout the life cycle. Considering the amount of knowledge needed to perform this role satisfactorily, consumer education is a continuing need.

The following model shows relationships of consumer behavior to total human behavior and the forces influencing that behavior.



Human Behavior and Consumer Behavior¹

Consumer Competence situation statements could be presented in various ways. The problem approach concentrates on major issues affecting the welfare of consumers. The disadvantage is that it needs constant up dating. The product approach is another possibility. It focuses on the specific goods and services, especially those with long term implications and those that demand the most resources. However, this approach may be limiting as over all patterns could be overlooked. The roles or dimensions of consumer behavior is a third approach. This is the framework selected as it encompasses the range of consumer needs and concerns and it has greater duration over time. The situation statements presented for each role include the first two approaches -- (1) the major problems and (2) the goods and services with long term implications and most demanding of resources.

¹Adapted from: Dimensions of Consumer Behavior by James U. McNeal.

The seven roles or dimensions of consumer behavior have been defined by research at ISU. They are

ALLOCATION: distributing the family resources among alternative uses (not buymanship)

SPENDING: buymanship of goods and services after decisions on resource allocation have been made

SAVING-DISSAVING: adding to or reducing the family's net worth

SOCIALIZATION: developing in family members competencies in their consumer roles

ACQUISITION OF RESOURCES: obtaining money income by earning and/or other means

CONSUMER-CITIZENSHIP: participating in community affairs and supporting government and related organizations concerning consumption and consumer welfare

FAMILY SERVICES: activities carried on by and for members of the family for no pay, including (1) managerial decision making and administration (2) physical task performance and (3) creating a climate to foster human growth and development.

Following is what we believe to be the situation as Iowans play their consumer roles. When the 1970 Census information becomes available on incomes and occupations, it should be helpful. As much as possible we have supplied facts and figures to interpret the situation, point up trends and draw implications for extension education programs.

I. CONSUMER ROLE: ALLOCATION

A. Family Spending Patterns

Results of the national Survey of Consumer Expenditures in 1960-61 is the best indication currently available of family allocation patterns.

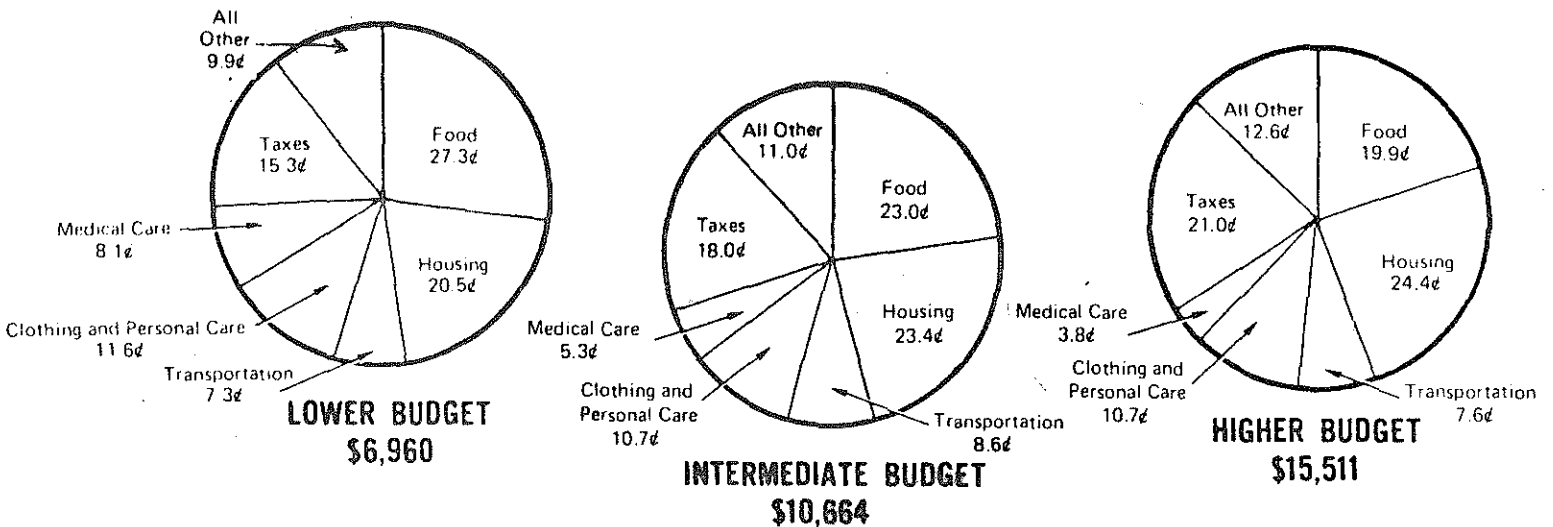
Expenditures and Savings of Families ¹		
Expenditures for Current Consumption:		percent
food		21.1
housing		25.0
shelter	11.3	
utilities	4.3	
household operation	5.0	
furniture and		
equipment	4.5	
transportation		13.0
clothing		8.9
medical care		5.8
recreation		3.4
personal care		2.6
other		6.4
Personal Insurance		5.1
Gifts and Contributions		4.8
Savings		3.9

Another survey is planned for 1972-73.

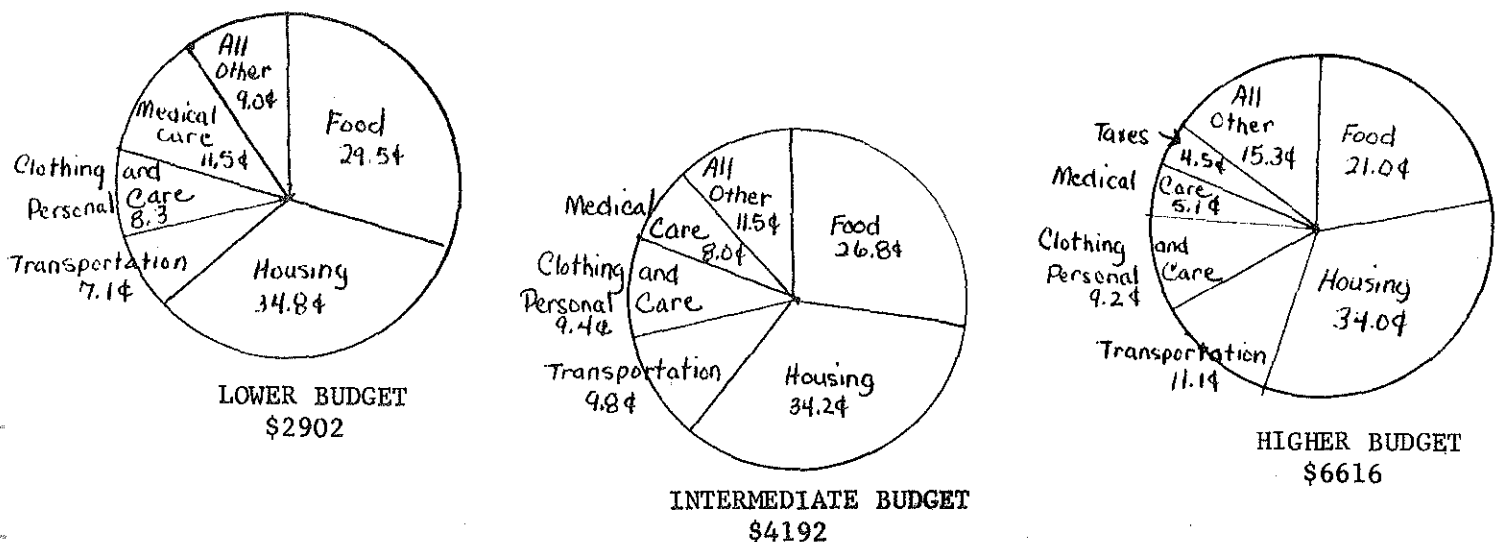
¹Personal Finance, Virginia Britton.

Iowa farm family expenditures can be studied by reviewing the family living expenditure records of Extension Farm and Home Development couples and families working with Farm Business Association.¹

Other sources of information about patterns of spending include cost estimates for urban family budgets at a low, intermediate and higher level. Based on spring 1970 prices, the budgets are 6% higher than a year earlier. A breakdown of where dollars go for an urban family of four is shown below:



The Urban Retired Couples Budgets are also given at three levels. The spring 1969 allocations and totals follow:



¹1970 Family Living Expenditures of 317 Iowa Farm Families, Iowa State University. June 1971, Bulletin FM-1611.

The indexes of Consumer Financial Behavior, developed by National Consumer Finance Association, show interesting relationships among selected income and expenditure factors over a period of years.

B. Factors Influencing Allocation

Spending patterns differ widely for families depending not only on income, but also on the family size and age make-up, manner of living and place of residence.

Rising educational levels, changing age mix of the total population, greater prevalence of working wives; shifting social values, product innovation and diverse price trends all contribute to changing patterns of consumption.

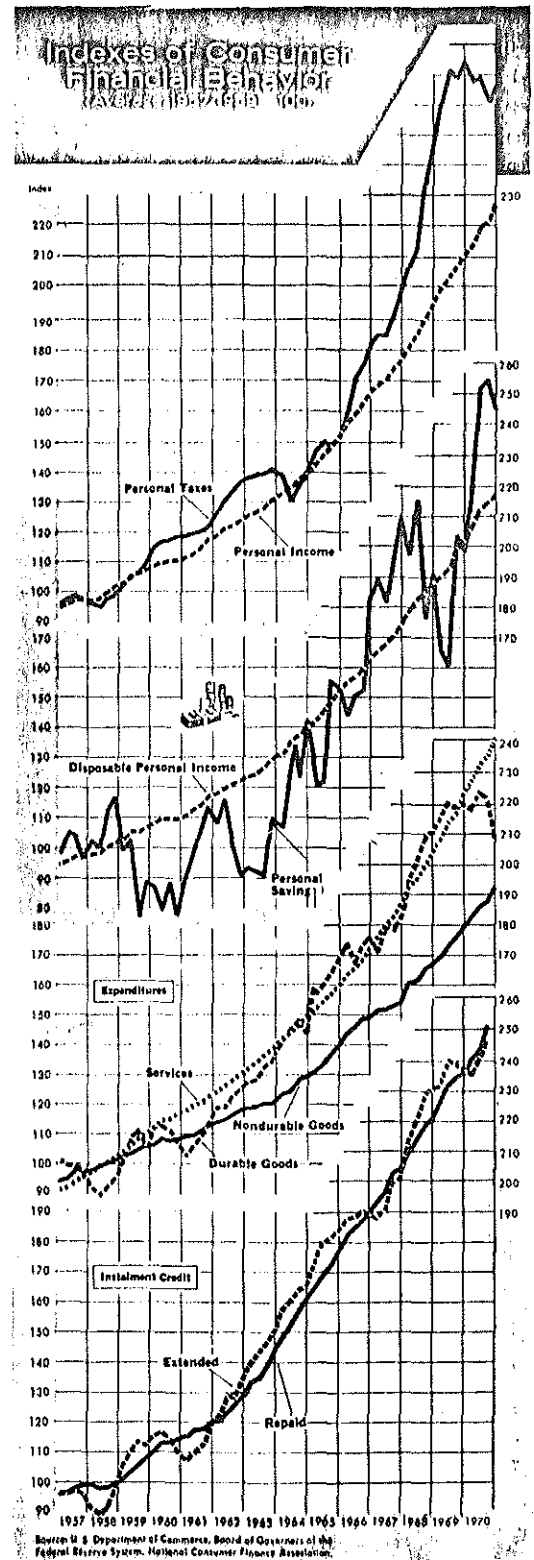
Consumer spending patterns are subject to a continuous process of change. Generally rising income levels have shifted expenditures from the basic requirements of food, shelter and clothing to services and goods which fit the general category of luxuries.

In 1960, 16% of all households owned two or more cars; in 1970 it was 29%. Ownership of color television sets, clothes dryers, and dishwashers increased sharply during the 1960's. Approximately 3% of U.S. households in early 1967 had a second home for year round use.

Some trends in spending are the increased popularity of second cars, of eating out, of convenience foods, and home production. Sales of mobile homes have increased faster than conventional home sales. Leisure time goods also have become more popular -- campers, snow mobiles, skis, gourmet equipment and foods, craft supplies, products needed for leisure activities.

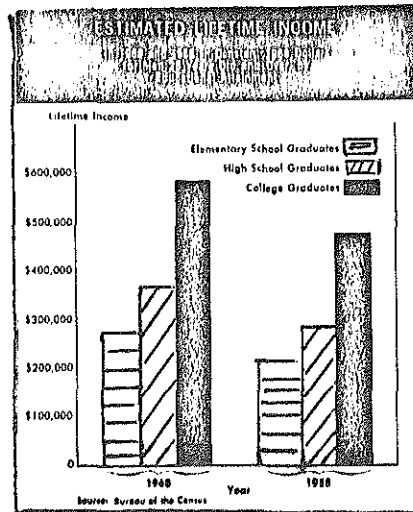
Discretionary purchasing power (income + credit-essential and committed expenses), discretionary savings and discretionary spending have continued to rise as shown below in billions of dollars:

<u>Averages for</u>	<u>Discretionary</u> <u>Purchasing Power</u>	<u>Discretionary</u> <u>Saving</u>	<u>Discretionary</u> <u>Spending</u>
1955-1959	\$131.2	\$18.2	\$113.0
1960-1964	\$164.2	\$23.3	\$140.9
1965-1969	\$240.4	\$35.5	\$204.9



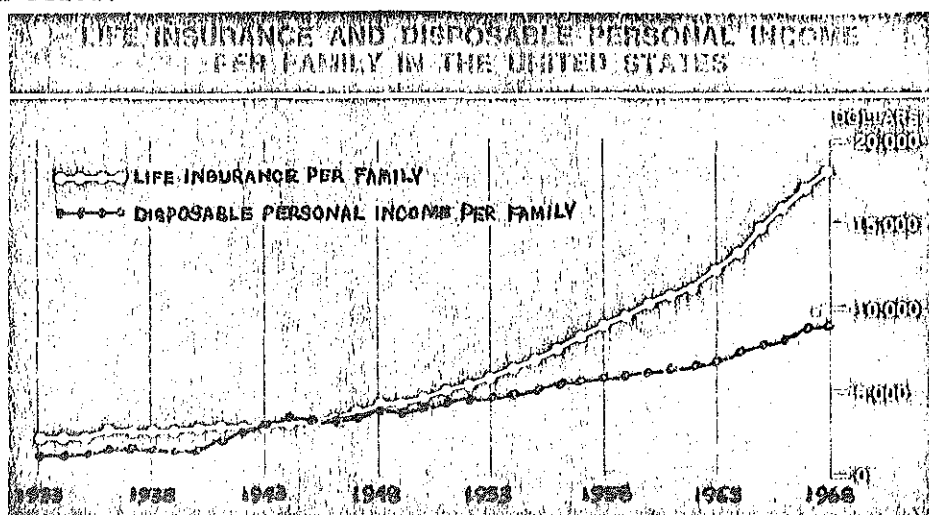
¹1971 Finance Facts Yearbook. National Consumer Finance Association.

Evidence of increasing allocation for education of family members comes from figures showing that the greatest proportion of our local and state tax dollars go to education. Also, the educational level of the U.S. population has made great gains in the last 30 years. Among young adults 25-29 years of age, 75% in 1969 had at least a high school education, including 16% who had also completed 4 or more years of college. By contrast, only 38% of this age group in 1940 were high school graduates, including 6% with 4 or more years of college. Since education is one of the most important determinants of an individual's income, investments in this expenditure have a long range effect upon family resources.



The costs of higher education are increasing. From 1960 to 1970, costs for college tuition, room and board went up 75% for private institutions and 47% for public.

The increasing popularity of all kinds of insurance as a means of protection against risks experienced by family members influences allocation also. In 1969 at a time when national medical insurance was being proposed, 88% of the population had one or more forms of private health insurance. In the same year 56% of the population age 65 and over still held private health policies to supplement Medicare. The number of persons covered by long term disability income protection has nearly tripled between 1963 and 1969. For both medical and disability coverage the greatest growth has been in coverage furnished under group rather than individual policies. The average amount of life insurance in force per family in Iowa increased from \$7,100 in 1958 to \$19,800 in 1970. The growth of life insurance per family can be seen below.



¹1969 Life Insurance Fact Book, Institute of Life Insurance.

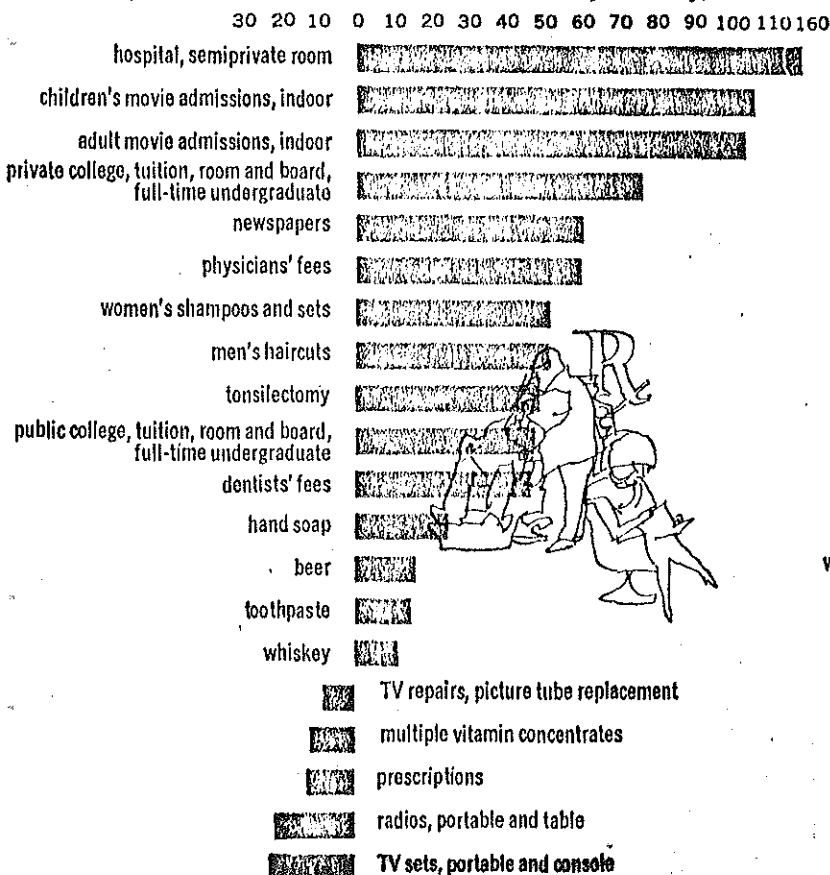
The Consumer Price Index showed a 32% increase from 1960-70 for all items combined, while there was an increase of 24% in commodities and 47% in services. Some areas of spending have been affected more than others. Those involving services have grown the fastest. Others, such as appliances, have actually decreased as shown below.

Services - Increases from 1960-70 ¹

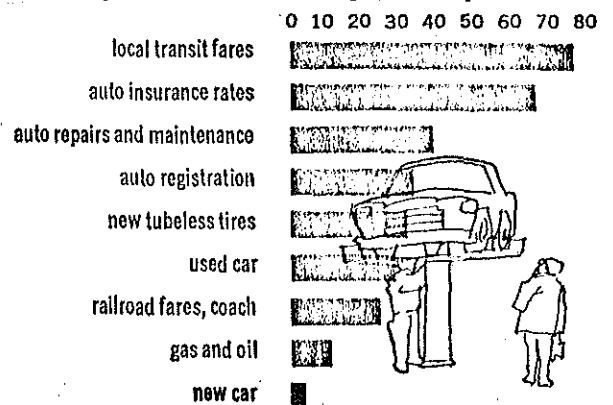
<u>Health</u>	<u>up%</u>
physicians' fees	58
dentists fees	47
hospital daily services	160
<u>Housing</u>	
property insurance rates	50
repainting rooms	90
reshingling roof	57
housekeeping help	70
<u>Transportation</u>	
auto repair and maintenance	40
auto insurance	65
public transit fares	75

Price changes from 1960-70 ²

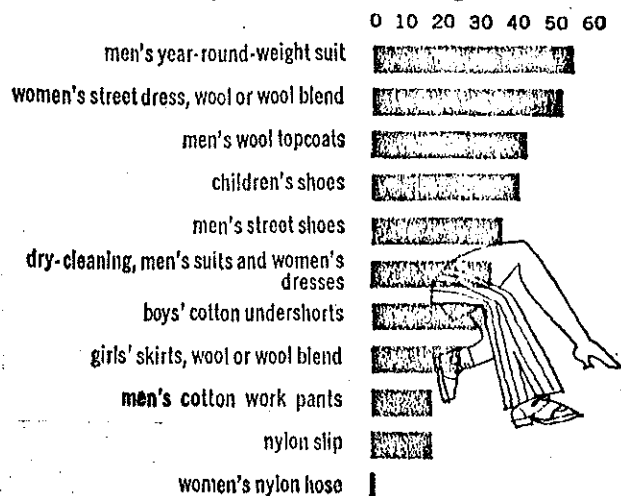
Health, education & recreation: Stay healthy, watch TV



Transportation: The going gets expensive



Clothing: It costs more to get dressed

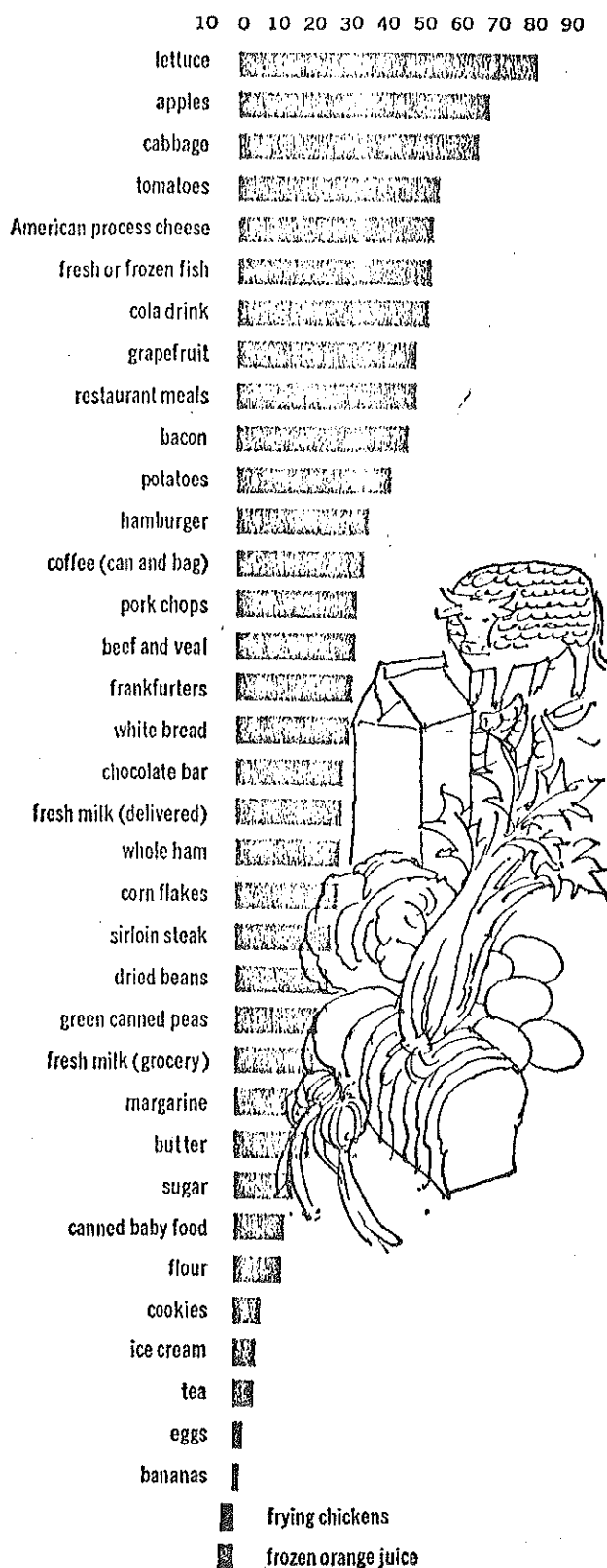


¹Wall Street Journal, August 19, 1970.

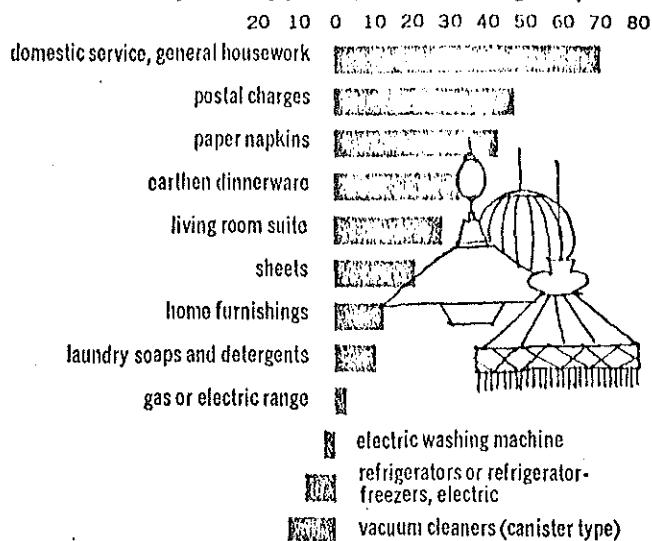
²Changing Times the Kiplinger Magazine, April 1971.

Price changes from 1960-70¹

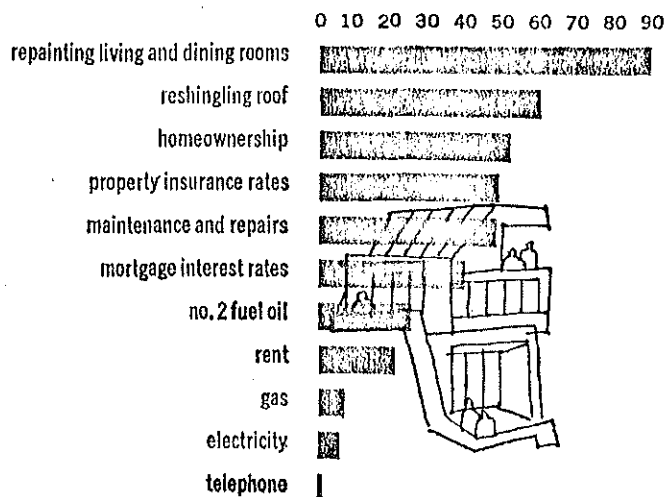
4. Food: Can you live on bananas and eggs?



7. Housekeeping: Appliances are a bright spot



6. Housing: The overhead on a roof overhead

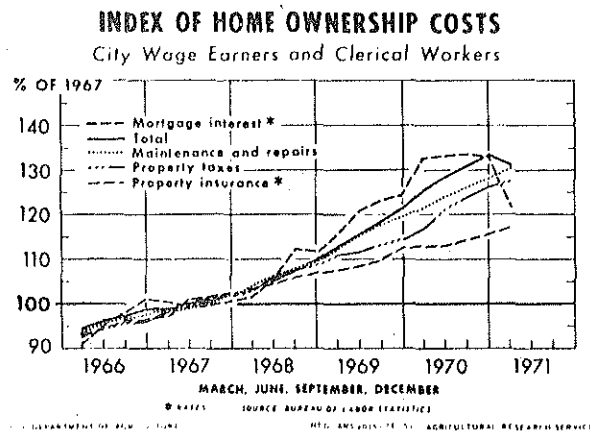


The increases in some cases are the result of actual increases in the cost of commodities or services, while some are a result of improvements in quality. For instance, expenditures for medical care have nearly doubled in the years between 1960 and 1969. Higher prices caused much of the increase while population growth, increased use of medical care services and greater availability and use of costly new medical supplies and techniques contributed also. The public share of medical care financing increased rapidly after 1966 when Medicare and Medicaid went into effect.²

¹Changing Times the Kiplinger Magazine, April 1971.

²Family Economics Review, September 1970.

Costs of homeownership have been increasing faster than most other expenditures. From 1967 to March of 1971, homeownership costs were up 31% while the all-items index had risen only 20%. The following shows the upward trends of the components of homeownership costs.



For a comparison of costs of owning and renting, the Bureau of Labor Statistics reports the following percentage increases in costs from 1966-69.

	<u>owning</u>	<u>renting</u>
1966	5.0%	1.6%
1967	3.4%	2.0%
1968	7.7%	2.8%
1969	10.2%	3.7%

The Federal Housing Administration estimates today's land value to be 20.3% of the total value of a new house. The estimated value of new home sites (land) was \$1,626 in 1955, \$3,427 in 1965 and \$4,277 in 1969.

According to the advanced report of the 1970 Census of Housing, there's a great variation in the median costs of buying homes in cities in Iowa from a high of \$23,800 in Urbandale to a low of \$9,600 in Ottumwa. The median rent varies from \$153 per month in Urbandale to \$64 in Ottumwa.

Pressures on family income include the increasing costs of fixed commitments to government -- income tax, property tax, sales tax and social security payments. These will likely continue upward considering the demands for government services. A greater share of family income is going to support programs like education, social security, and defense and probably additional ones such as national health insurance and income maintenance. These unpredictable, unplanned expenses over which consumers have limited control contribute to financial stress.

Federal income taxes are scheduled to drop for the next three years. However, state and local taxes have increased by 101 to 129% per person in Iowa from 1957-69. Iowa's personal income tax just increased by 1/3 retroactive to January, 1971. Some property tax relief can be anticipated as the new state tax plan for support of schools (general-fund) goes into effect, but this will be limited to 10% per year starting in 1973.

The present social security contribution by an employee is 5.2% of first \$7,800 earned and 7.5% for the self-employed. These contributions are expected to increase by 1977 to 7.4% of first \$10,200 for an employee and 8.3% for self-employed.

The current rapid rate of inflation is taking its toll on family incomes. Government has and will take steps to curb inflation. However, families need to consider inflation in long term planning.

<u>year</u>	<u>Inflation</u> ¹
1961	1.3%
1962	1.1%
1963	1.3%
1964	1.6%
1965	1.8%
1966	2.8%
1967	3.2%
1968	4.0%
1969	4.7%
1970	5.3%

Growing inflation and increasing costs of fixed commitments to the government are a two-way squeeze on family income.

Advertising, peer pressure and the "instant" communication of how others live have prompted the purchase of new models and the latest style and seeking of a higher level of living. This also is the result of built-in obsolescence in products. Some reverses may be coming -- cars not changing styles each year; tighter economy may force consumers to use current possessions for a longer time; seeking of a "personalized" life style.

Rites of passage defined by our social structure influence allocations of family resources. Changes in social status or life situation such as graduation, weddings, birthdays, showers for expectant mothers, and retirement dinners have become occasions for gift giving and targets of promotions by marketers.

Shifting social values influence a family's pattern of spending. Concerns about the scarcity of natural resources and wastes by an affluent society, the anti-materialistic attitudes of segments of the population and the increased emphasis on sharing and giving are some examples.

The prevalence of working wives in the labor force and the number of teens contributing to family income influence time and money resources of the family. Labor force participation rates have been rising among married women for many years regardless of the level of unemployment or prevailing economic conditions. The percentage of wives (husbands present) in the labor force increased from 30% in 1960 to 40% in 1970. The economic pressure of raising children evidently influences many wives to work.

The availability and use of credit will influence the family's allocation of income and may encourage acquisition of durable goods by mortgaging future income.

Implications

The following areas constitute major expenditures for the family. Because of increasing costs of these items there is a need for educational programs to assist families in financial planning for:

¹Wall Street Journal, February 7, 1971.

housing
 medical care
 insurance - all kinds
 education of children
 retirement

With increased complexity of all products there is a need for specialized service and repair. Because of the complementary nature of goods and services, the decision to allocate money to any expenditure commits current and future income which will not be available for other spending. For example, purchasing a car means insurance, license, repairs, and maintenance. Educational programs should include future commitments which can be anticipated as a result of any allocation.

Total resource mix needs to be examined when decisions are made. Reevaluation of relative importance of saving time in buying and saving money in the marketplace is an example. More emphasis needs to be given to substitution of other family and community resources for those which are most limited.

Since the quality of living is determined by allocations of total resources, there is a real need to help families define their own value patterns and set priorities so that external forces will not have undue pressure on decisions made.

II. CONSUMER ROLE: SPENDING

The marketplace is more technical and complicated. Mass production and marketing of goods and services and urbanization have resulted in an impersonal market. Consumers generally are not loyal to merchants or brands. This is unlike the personal relationship of consumer, and businessman or producer, in the small towns. Some marketing techniques attempt to make the market more personal, i.e., department store dividing floors into shops and boutiques, employees greeting every shopper.

One of the consumer rights is the right to information. Recent laws passed provide consumers with information about package contents, fiber content, cost of credit, credit rating information, etc. Regulations by the Federal Trade Commission and Food & Drug Administration have also provided consumers with information including "cents off" sales, light bulbs, and octane ratings of gasoline. There are legislative proposals for information in other areas such as ingredient labeling of foods, detergents and cosmetics, unit pricing and dating of perishables. Release of government testing information about consumer products supported by tax funds is also an issue. Regulations and laws on the books are not a guarantee as lack of enforcement has often been a problem.

A major consumer complaint involves services and repairs. The lack of availability of service in Iowa communities; the poor quality of service when it is available and the high cost of service, parts and repairs are frustrations and cost pressures for consumers.

Government and business policies affect consumers. An example is economic agreements such as tariffs. The U.S. is studying implications of a change to the metric system. Some reasons for converting are that most other countries use the metric system and the U.S. loses trade because of not using it.

Implications

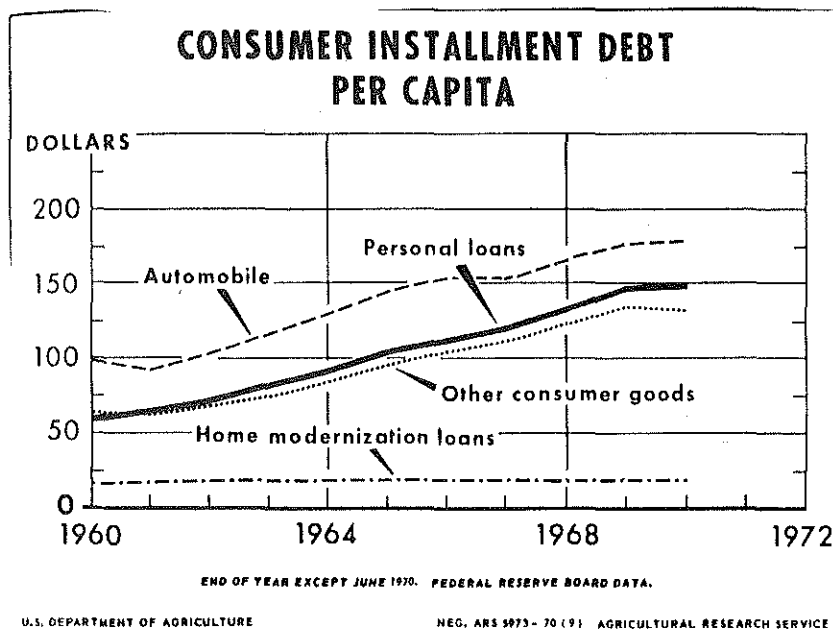
The market place is increasingly complex and technical. It is impossible for anyone consumer to be informed about all areas. ISU Extension can help consumers find information as needed.

Consumers are being affected by the U.S. trade policies such as tariffs. ISU Extension can help consumers gain an understanding of the economic agreements such as tariffs.

The standardization of sizes and weights and measures are also consumer concerns. The U.S. change to the metric system is predicted. ISU Extension can aid consumers in making the transition.

III. CONSUMER ROLE: SAVING-DISSAVING

The use of consumer credit is increasing. This trend is partly due to the growing variety of forms of credit. Bank credit cards are the fastest growing form of credit because they can be used for so many kinds of purchases nation wide. About 26% of U.S. households had a bank credit card in mid-1969.



The uses of consumer credit are expanding. The buy now-pay later plan extends to a variety of purchases from airline tickets to newer uses such as paying for college expenses, taxes and even jail bail.

The age and stage in the family life cycle relate to use of credit. Families with heads between 18 and 24 used the most credit, 49% of this group used credit in 1967. 44% of the group 25-34 did and this group owed the most in installment credit in 1967. As an example of the use of credit, 2/3 of automobiles are financed on credit. In 1967 the largest credit users were families with income from \$7,500-\$15,000, 60% owed some installment credit.

Fixed commitments have a first lien on family income. The higher these are (credit contracts, house payments, insurance, etc.) the less there is for flexible categories such as food. If this money were available, the family might have used it for food.¹

Excessive or misuse of credit as well as other factors relate to the increasing number of families with financial problems which have sometimes resulted in bankruptcy. The number of bankruptcies in Iowa have increased as shown:

Voluntary Bankruptcy Cases Commenced During Fiscal Year - Iowa²

Fiscal year Ending	Non Business			Business	Total
	Employee	Other	Total		
June 30, 1968	1499	407	1906	154	2060
June 30, 1969	1624	481	2105	196	2301
June 30, 1970	1793	611	2404	226	2630

The amount saved by consumers is often used as an indication of economic security and attitudes. In 1970, 7.6% of disposable income in the U.S. was put into savings. This was the highest percentage saved in almost 20 years.

Investments of families appear to be more sophisticated and diversified. In addition to savings bonds and land, more are investing in the stock market, commodity-futures market and various combinations of savings plans.

Families also are investing in leisure time pursuits -- a second home, vehicles such as snow mobiles, camper-trailers, and camping equipment. Families often use their savings or credit to acquire durable goods. See page 6 for increased amounts in life insurance.

Implications

- ISU Extension can aid consumers in learning about
- consumer credit -- sources, costs, wise use and credit ratings.
- alternatives for savings and investments.
- savings programs for special purposes such as education, retirement, and emergency needs.

¹Family Economics Review, March, 1971.

²Tables of Bankruptcy Statistics, Administrative Office of U.S. Courts, Washington, D.C.

IV. CONSUMER ROLE: SOCIALIZATION

With rapidly changing economic and social conditions, all consumers need to up date knowledge and skills in order to operate effectively.

The attitudes, skill, and knowledge children acquire in the use of resources come from a variety of sources, including family and school.

The need for consumer education has been recognized. Steps to require it in schools have been taken. It is required by law in Illinois and Hawaii. Proposals to make it mandatory have been introduced in other state legislatures, including Iowa. Consumer education has been declared a national priority need from the President's office. The Office of Consumer Affairs, has developed Suggested Guidelines for Consumer Education Grades K-12 and other materials.

Shoplifting, damage to merchandise, shopping courtesy to clerks and other consumers and responsible use of community property reflect attitudes and values which are greatly influenced by the family and the home environment. Teaching responsibilities of consumers are equally important as teaching rights of consumers.

Mass media has played a role in socialization of consumers. The ads and the programs both contribute. The youth have been selected by marketing as a target group. This is because of their increasing numbers, their discretionary income and the hope to build brand loyalty for later years. Ads, products and credit have been aimed to woo teens. The youth market in broader terms appeals to older age groups who like to appear youthful.

Implications

ISU Extension should be recognized as a resource in consumer education and can assume the responsibility of providing family members, teachers and other professionals with information about developments and resources.

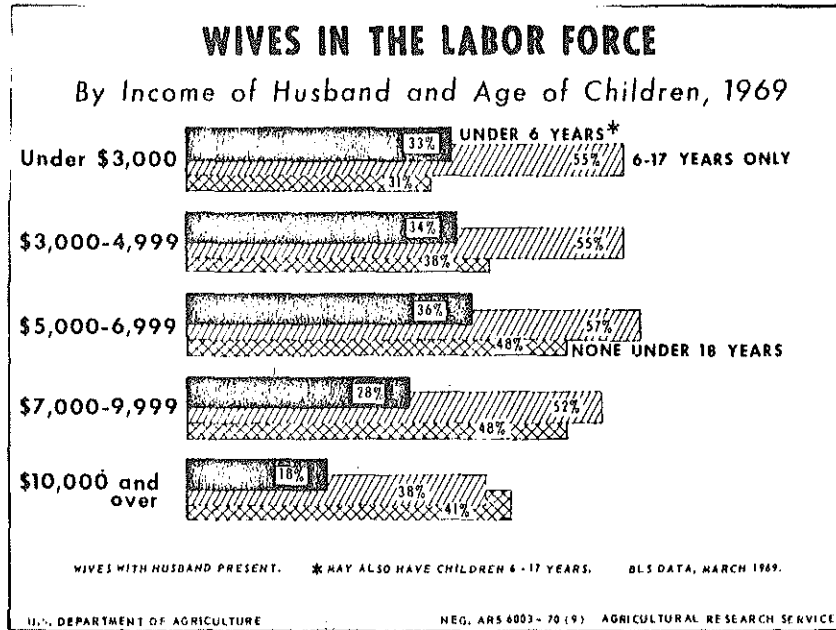
Educational programs highlighting external socio-psychological pressures that influence consumer behavior need to be expanded.

V. CONSUMER ROLE: ACQUISITION OF RESOURCES

The employment situation is directly related to the financial well-being of consumers. Recently unemployment and underemployment characterize the employment scene. Nationally, layoffs in 1970 reached the highest level in 6 years. Iowa's unemployment was 3.5% in 1970, up from 2.6% in 1969. A new group affected is the professional and white collar workers such as engineers, scientists, teachers, and high level technicians.

A second job has become a means of earning for many, including both professionals and nonprofessionals. The tight economy has increased the desire to moonlight yet the tight job market has not only cut down the number of second jobs available, but also reduced overtime. Both cutbacks have reduced potential incomes of some workers.

About 26% of all wives with children under 3 were in the labor force in 1970. About 37% of all wives with children 3-5 and 49% with children in school were working. The percentage of all wives in the labor force has increased from 30% in 1960 to 40% in 1970. The effects of husbands income and age of children on employment of wives can be seen in this chart.



Other employment trends in some locations in Iowa are the 4 day work week (with longer hours for the 4 days) and the longer vacation periods.

The median income of U.S. families has grown since World War II. Median income has increased at an annual rate of 3.1% since 1957. The changes in income distribution nationally can be seen by:

**CHANGING PROFILE OF INCOME DISTRIBUTION,
1956, 1968 AND 1980**

ALL FIGURES IN 1968 DOLLARS: DISTRIBUTION OF FAMILIES

\$15,000 & OVER	4.8%	14.8%	33.5%
\$10,000-\$15,000	12.5%	24.9%	27.5%
\$7,000-\$10,000	23.3%	23.4%	16.0%
\$5,000-\$7,000	22.3%	14.5%	9.0%
\$3,000-\$5,000	18.0%	12.1%	8.0%
UNDER \$3,000	19.1%	10.3%	6.0%
	1956	1968	1980

Source: The Conference Board

In 1969 Iowa ranked 22nd among the states for per capita income. From 1960 to 1970, Iowa's personal income increased 87% per capita compared to 76.4% nationally. However Iowa's increase from 1969 to 1970 was 6.4% compared to 7.1% nationally.

USDA family food assistance such as the USDA Food Stamp Program and the Supplemental Foods Program are a means families can use to increase their resources. USDA Child feeding programs such as School Breakfast, School Lunch, and Special Milk are other ways in which families in need can increase their resources. Ever changing regulations at the federal level cause fluctuations in participation in these programs in Iowa. For example: in 1970, participation in the Food Stamp Program in Iowa boomed because of changes in regulations. It is anticipated that there will be some increase in 1971 as new regulations are implemented.

Implications

As the unemployment rate fluctuates with the economy, families need to be made aware of ways to make best use of available resources such as money, time, energy, special government assistance programs, and training programs.

Some families need help in recognizing the advantages of enrolling in training programs to learn marketable skills.

For working women, education is often needed to prepare for the combined job of worker and homemaker.

VI. CONSUMER ROLE: CONSUMER CITIZENSHIP

Recent years have shown a growth of awareness of consumerism and the rights and responsibilities of consumers. The current consumer movement dates back to President Kennedy's consumer message to Congress and declaration of the consumer rights to

- be informed
- safety
- choice
- be heard

Succeeding Presidents have reaffirmed the government's commitment to improvement of the well-being of consumers.

Interest in consumers has grown. Not only interest by and for himself as a consumer but also for the welfare of other consumers, or groups of consumers, especially those with limited resources.

One of the main avenues of reform and proposals of solutions of consumer problems has been through government regulation. Recent laws include the Fair Packaging and Labeling Act, Truth in Lending, Flammable Fabrics Act, Toy Safety Act, Meat and Poultry Inspection Act, and the Fair Credit Reporting Act. These are attempts to set mandatory standards in the marketplace instead of depending upon business to voluntarily set standards and police themselves.

Another avenue of reform is through voluntary consumer groups. Almost every state has a consumer organization. The Iowa Consumers League was formed in 1969 and has about 400 members. It attempts to coordinate efforts throughout the state for added impact and works to solve the major Iowa consumer problems through education and representation. Other consumer groups have been organized in various parts of the state such as the Des Moines Consumer Education and Protection Organization (CEPO), the Iowa City Watchdog group, and the Linn County consumer organization. Some are action-oriented and

attempt to solve local complaints through a variety of means including confrontation.

Consumers are delegating more responsibilities to others and are more dependent on the government for services and protection. Government provides consumers with food assistance programs, housing subsidies for low and middle income families, educational programs and social security. Taxes are required to finance these. Proposals such as national health insurance and income maintenance will mean more taxes will be needed. The growing population requires more services and thus more tax revenue just to provide the existing programs. There also has been growth in the feeling that basic consumption needs are rights of citizenship rather than a function of the economic processes. Minimal standards and guarantees of health, nutrition, housing and legal counsel have received more public support in recent years.

Some current consumer issues:

The safety of goods and services has long been a consumer concern dating from the early days of The Jungle by Upton Sinclair and meat inspections. Cars, drugs, foods, fabrics and medical devices are some that are current problems. To prevent injuries and deaths, there are proposals to regulate these products. On the other hand, eliminating some reduces consumers right to choice. Consumers also have to pay the price for higher quality and government regulation. The formulation of the National Commission on Product Safety and the passage of the Toy Safety Act are examples of the national concern and attempt to reduce the safety problems.

The quality of goods and services and the integrity of the business community are often questioned. In some cases, business has not been responsive to consumers. The need for repairs and replacement and the high cost and low quality of service have been an aggravation. As a result consumers have become increasingly skeptical of business and have turned to government. FTC proposals and bills in Congress relate to this such as the regulation of warranties and guarantees.

One of the main consumer issues is the lack of an independent body to speak for the consumer. Over 40 Federal government departments and agencies administer hundreds of programs affecting consumers. However, they all have another priority interest, besides consumers, to serve such as agriculture, labor and commerce. Consumer representation which does not have a political tie is needed to aid consumer's welfare. Such a body or representative could give consumers' view in policy decisions such as setting utility rates, public transportation charges and government hearings.

The need for legal know-how for consumers is increasing. Consumers would like more recourse in the marketplace. One proposal is for class action. It would allow consumers as a group (class) to file suit for a common grievance. This would reduce the prohibitive court costs which have made it uneconomical for individuals to file suit.

Consumers' concern about the wise use of resources has become an important issue as it relates to limited supply of natural resources and pollution, recycling and the population crisis. Iowa and other states are moving more toward an urbanized society. The closeness of others is a consideration related to consumption. Problems such as noise, fumes, litter, waste and other by products of consumption and the population crisis are problems that need to be recognized and dealt with. There is more awareness of the affects of one's decision on others and the total environment. More consumers are assuming the responsibility for the end result of decisions made.

ISU Extension can assist consumers in their roles as consumer citizens through education dealing with:

- . legal rights and responsibilities.
- . considering wise use of resources.
- . communication likes and dislikes to policy makers in the polity, economy, and community.
- . pros and cons of shifting responsibility for consumer protection and resource allocation to government agencies and to organizations.
- . considering family value patterns and community needs when deciding about private and public (taxation) giving.

VII. CONSUMER ROLE: FAMILY SERVICES

Home production is becoming more popular. Home sewing, preservation of foods, gardening, refinishing furniture and other crafts have increased. This trend may be due to the satisfactions from creative activity, the status gained from some of these activities, and the need to substitute time and talents for lack of money.

A study by the McCall Pattern Company published in 1969 indicated that the reasons for the increase in home sewing include the psychological need for self expression, economy, the declining quality in ready-to-wear clothing, more leisure time, simpler fashions, more promotion by the pattern companies, and more home economics education in the schools.

An example of an unpaid family service that has become more important in recent years is chauffeuring. The lack of public transportation in most Iowa communities contributes to the chauffeuring that parents, especially mothers, do for children. The large number of after school activities students participate in is also a factor.

Family members provide many unpaid services from doing the laundry to providing counseling. A recent time study shows the kinds of activities and the amount of time various family members contribute. Interestingly, working mothers receive little extra help but really are doing both jobs.¹ Another study attempted to assess the value of these tasks performed by the wife.² Replacement value is high, it is impossible to hire one person to do all the jobs and impossible to hire anyone to do some.

¹"Time-Use Patterns for Household Work Related to Homemakers' Employment", Cornell University.

²PhD Thesis, Cornell University, Geraldine Gage.

Accurate information on preservation of food, refinishing furniture, gardening, home sewing and other creative forms of home production are essential if satisfactory results are to be reached. ISU Extension can provide such information to those interested.

A service provided by many homemakers is that of decorating their homes. ISU Extension can provide information to help homemakers to decorate their homes artistically within the needs and budgets of the family.

Indetermining the amount and type of insurance to carry on different family members, a factor often forgotten is the value of the tasks performed by the wife. Iowa State University Extension can help families to consider all important factors when making insurance decisions.

Many family members do not realize the value of the services wives or mothers provide for other family members. Iowa State University Extension can help women evaluate the many considerations related to the alternatives of seeking employment or staying at home.

Housekeeping responsibilities of homemakers are often considered to be drudgery. ISU Extension can provide information to help homemakers use their time and energy in doing housekeeping tasks more efficiently.

ISU Extension can work with families to help develop environments for the growth and development of family members in their consumer role of family services.

VIII. Special Consumer Problems of the Elderly

Retirement in most cases means a reduction in income. Of particular concern to those on fixed incomes is the erosion of their buying power by inflation. Many who at the time of retirement thought they had adequate finances, now find them stretched greatly if not completely inadequate.

Many retirees are also outliving their expected life span and are finding that they are living beyond the time when they had planned for their money to stretch. This comes also at a time when they have increased need for money due to health costs and services which they require.

The elderly in urban areas are particularly caught in the financial pinch because of the rising living costs.

Limited income makes it more difficult for older people to obtain the necessities: adequate diets, suitable clothing, suitable housing, transportation, health care, social contacts.

Since older people are not as mobile, they often are unaware of many items and products on the market. This may be the low-cost convenience foods, clothing made from easy care fabrics, labor saving equipment for their particular needs, and others. These products are unfamiliar and may also seem expensive for them to use.

The clothing industry has not provided well for the older consumer. There is need for clothing that is attractive in design, color and fabric, easy to care for, which fits well and is easy to get in and out of.

Many elderly persons do not know of or understand existing services available to them. There is need for help in obtaining public assistance, in getting into social groups, in obtaining housing, prepared meals, etc. They are concerned also about business and legal affairs: wills, taxes, disposal of personal property, arrangements for burial, etc.

The elderly are especially susceptible to consumer frauds, particularly in the areas of health and home maintenance and repair.

HEALTH

According to Top Presidential Advisor, Dr. Roger Egeberg, head of federal medical agencies, Assistant Secretary for Health and Scientific Affairs in the Department of Health, Education and Welfare, "The No. 1 health problem is the distribution of health care - making it possible for all people to have adequate care. That includes preventive health care, education in how to live healthfully, and treatment when you need it - including hospitalization."*

He also indicated the following:

1. "The health of children is a primary national problem. During the nine months of pregnancy and the first five years of life, nutrition can affect total intelligence."
2. There is a need for 50,000 more physicians, a couple hundred thousand more nurses and almost 150,000 technicians.
3. "We must find new ways of delivering health care. There are many things that doctors now do that nurses or others could do. For example - we must educate the people in how to live, eat, and what to do to keep themselves healthy. That is the province of the health educator."
4. The distribution of institutions, clinics and professionals is a problem - rural areas and city slums are inadequately served.
5. "Alcoholism, a national problem, is a disease that demands a broad approach."
6. "Drug use - addiction and abuse - Use of marijuana by the young (under 21) is as bad as if they all got drunk habitually. The widespread use has helped keep some young people from growing up."

"Regardless of what we feel about marijuana, its use - along with alcohol or any other drug that helps to take people away from reality - is something we have to approach as one of our very serious problems. I think it has got to be approached by a combination of law and medicine."
7. "Our Great Dental Problems - There are 800 million cavities in American's teeth. One quarter of the people of this country have no teeth. Another quarter have only half their teeth."

*U.S. News and World Report, Inc., February 23, 1970.

Must try to prevent cavities - impossible to meet needs of all needing dental work. The findings of a great deal of malnutrition among people who could afford to buy good food is due to the fact that they can't chew or can't chew well. So they pick foods that suit their mouths and do not get enough protein or minerals. Also they do get infections from bad teeth."

Dr. Egeberg suggests as alternatives to this problem fluoridation, early prophylactic care and continued dental care education.

8. "Research - If we are going to solve problems of cancer, aging, circulation, respiratory disease, our great dental problems, we have to keep research going at least at the present rate."
9. "Birth Control - The pill is certainly the best thing that has come along to solve a problem that could be disastrous if we don't solve it - nearly everything has some risk inherent in it."
10. Medicare (for the aged) and Medicaid (for the needy) have added 30 million patients to an overburdened system. "We have to find a way of seeing that health care is provided for all people. My own philosophy is that I would like to see it be a broadly joint effort between private health-insurance industry and the government."

In fiscal 1969, the nation's health bill was \$59.5 billion. At the end of 1970 the total reached \$67.2 billion. Medical bills for Americans rose 12% from fiscal 1969 to 1970. On a per capita basis the medical bill for each American came to \$324.32 - more than double what he had paid for his health care in 1960 and \$33 higher than in fiscal 1969.

The major areas contributing to the rise in prices are the costs of hospital care and physician services.

The major ingredient in hospital costs is the payroll which accounts for three-fifths of total hospital expense.

The latest year for which expenditures are available by age is fiscal 1969.

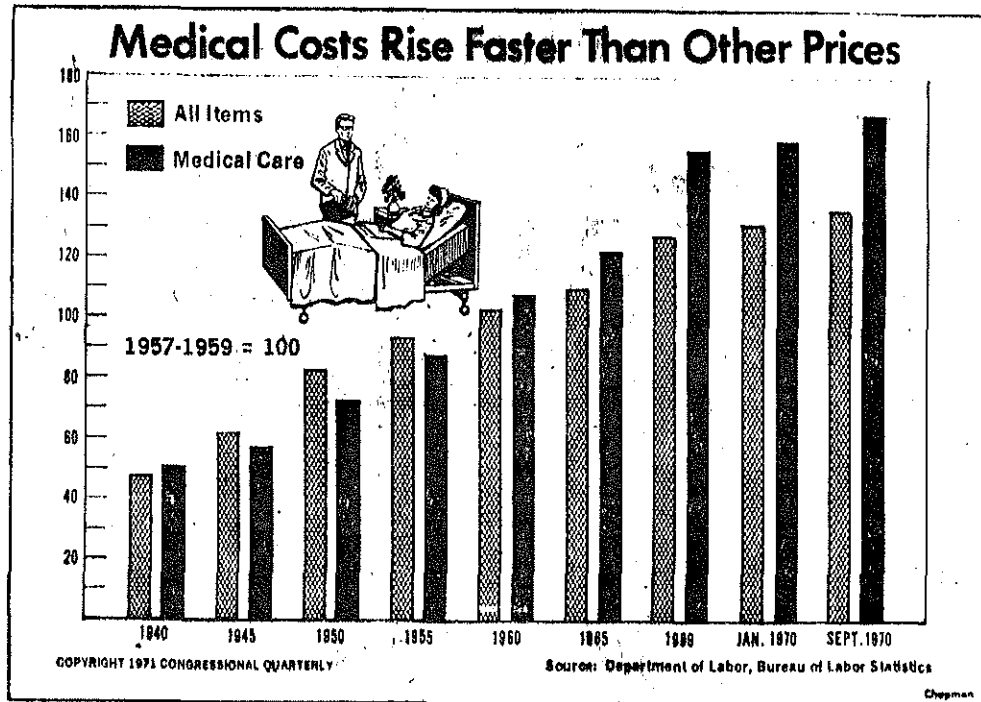
1969 - \$52.6 billion expenditures for medical care:

Table 1

Age	Percentage Distribution	
	Expenditures	Population
Under 19	16.0	36.7
19-64	58.3	53.9
65 and over	25.7	9.5
TOTAL	100	100

The aged have more and costlier illnesses than the younger population. In 1969 the average health expenditure for each aged person was six times that for a youth and two and one-half times that for a person in the 19-64 age group.

Figure 1



I. Iowa Health Care Situation

An examination of health care in Iowa indicates that there is a shortage of health manpower. In 1970 the number of doctors per 100,000 population decreased to 108.7, well below the national average of 144 per 100,000 population.

The number of dentists showed a slight decrease from 45.11 in 1969 to 44.30 per 100,000 in 1970.

The number of nurses increased to 811.82 from 776.52 per 100,000 population in 1969.

The geographical distribution of health manpower is also a critical problem.* Small towns, rural areas which are not growing economically and socially find it difficult to attract new health personnel to replace those retiring. The uneven distribution of health manpower is

* The Quality of Life in Iowa: An Economic and Social Report to the Governor for 1970.

also evident in the poorer areas of large cities where medical care is not available. The geographical distribution of physicians in the state for 1967 is shown on the map, Figure 2 and Table 2. Iowa had 2,911 non-federal physicians in 1967, 2,566 M.D. and 345 D.O. providing patient care. There were 140 federal physicians in Iowa in 1967.

Figure 2

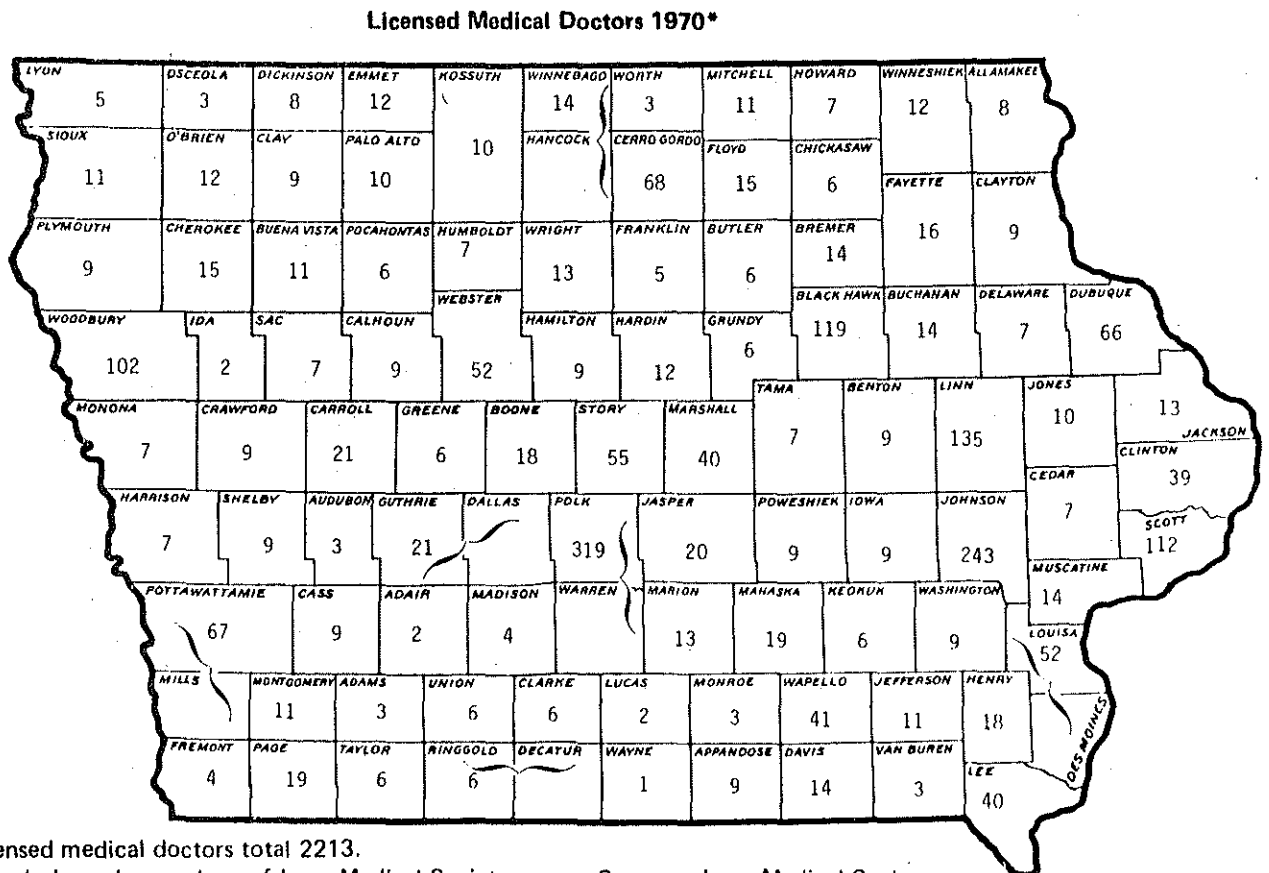


Table 2
Non-Federal Physicians (M.D. & D.O.)
by County, State, and Region: Iowa 1967

County	Total Physicians (MD & DO)	Patient Care							Inactive & No Informa- tion	Popula- tion: Patient Care Physician Ratio
		Total Patient Care	Solo, Partnership, Group or Other Practice				Hospi- tal Based	Other Activity		
			General Practice	Specialties						
				Medical	Surgical	Other				
Adair	5	5	5	0	0	0	0	0	0	1,866
Adams	4	3	3	0	0	0	0	0	1	2,120
Allamakee	11	10	9	1	0	0	0	0	1	1,596
Appanoose	13	13	12	0	0	0	1	0	0	1,175
Audubon	4	4	4	0	0	0	0	0	0	2,505
Benton	12	11	11	0	0	0	0	0	1	2,014
Black Hawk	130	123	39	12	41	27	4	2	5	1,019
Boone	23	22	14	0	3	5	0	0	1	1,165
Bremer	16	16	11	2	3	0	0	0	0	1,309
Buchanan	34	33	8	0	0	2	23	1	0	620
Buena Vista	15	12	11	0	1	0	0	0	3	1,720
Butler	7	7	7	0	0	0	0	0	0	2,327
Calhoun	14	14	12	0	2	0	0	0	0	1,134
Carroll	24	23	11	2	7	3	0	0	1	1,057
Cass	15	15	11	0	2	2	0	0	0	1,205
Cedar	10	10	10	0	0	0	0	0	0	1,805
Cerro Gordo	79	76	27	15	22	10	2	0	3	639
Cherokee	37	34	8	1	2	5	18	2	1	520
Chickasaw	10	9	6	0	3	0	0	0	1	1,606
Clarke	6	6	5	0	0	1	0	0	0	1,270
Clay	14	13	11	0	0	2	0	0	1	1,384
Clayton	11	11	10	0	1	0	0	0	0	1,954
Clinton	51	47	20	6	13	8	0	1	3	1,197
Crawford	10	10	8	0	1	1	0	0	0	1,954
Dallas	32	30	22	0	1	1	6	1	1	806
Davis	13	13	2	5	5	1	0	0	0	675
Decatur	6	5	4	1	0	0	0	0	1	1,476
Delaware	9	7	7	0	0	0	0	0	2	2,433
Des Moines	57	53	9	6	21	17	0	1	3	900
Dickinson	12	11	7	1	2	1	0	0	1	1,165
Dubuque	73	67	12	15	28	12	0	1	5	1,315
Emmet	13	11	7	0	1	3	0	1	1	1,298
Fayette	21	21	19	0	2	0	0	0	0	1,387
Floyd	17	17	12	0	3	1	1	0	0	1,227
Franklin	8	8	6	1	1	0	0	0	0	1,716
Fremont	7	6	6	0	0	0	0	0	1	1,647
Greene	12	10	8	0	2	0	0	0	2	1,329
Grundy	7	7	7	0	0	0	0	0	0	2,004

(Cont.)

Table 2a County		Total Physicians (MD & DO)	Patient Care						Inactive & No Informa- tion	Popula- tion- Patient Care Physician Ratio
			Total Patient Care	Solo, Partnership, Group or Other Practice			Hospi- tal Based	Other Activity		
				General Practice	Specialties					
					Medical	Surgical				
Guthrie	11	11	11	0	0	0	0	0	0	1,181
Hamilton	17	17	15	1	1	0	0	0	0	1,173
Hancock	9	8	8	0	0	0	0	0	1	1,739
Hardin	18	18	16	0	2	0	0	0	0	703
Harrison	14	13	13	0	0	0	0	0	1	1,295
Henry	26	23	11	1	0	3	8	1	2	756
Howard	7	7	7	0	0	0	0	0	0	1,777
Humboldt	9	9	9	0	0	0	0	0	0	1,443
Ida	5	4	4	0	0	0	0	1	0	2,353
Iowa	14	14	13	0	0	0	1	0	0	1,185
Jackson	13	13	13	0	0	0	0	0	0	1,607
Jasper	27	26	19	0	4	2	1	0	1	1,336
Jefferson	12	11	10	0	1	0	0	0	1	1,354
Johnson	555	381	20	8	19	9	325	164	10	156
Jones	17	14	12	0	1	0	1	2	1	1,433
Keokuk	6	6	6	0	0	0	0	0	0	2,542
Kossuth	14	14	14	0	0	0	0	0	0	1,753
Lee	44	41	22	3	11	4	1	1	2	765
Linn	171	159	65	18	37	28	11	2	10	916
Louisa	6	6	5	0	0	1	0	0	0	1,780
Lucas	6	6	6	0	0	0	0	0	0	1,688
Lyon	7	6	6	0	0	0	0	0	1	2,337
Madison	9	9	9	0	0	0	0	0	0	1,330
Mahaska	21	18	11	2	4	1	0	0	3	1,200
Marion	20	18	15	0	3	0	0	0	2	1,454
Marshall	44	42	17	3	15	6	1	0	2	991
Mills	12	10	6	0	0	0	4	2	0	1,137
Mitchell	14	12	10	0	2	0	0	0	2	1,140
Monona	10	9	9	0	0	0	0	0	1	1,449
Monroe	5	5	5	0	0	0	0	0	0	1,882
Montgomery	11	10	8	0	2	0	0	0	1	1,307
Muscatine	27	24	16	1	4	2	1	0	3	1,445
O'Brien	13	12	12	0	0	0	0	0	1	1,582
Osceola	4	4	4	0	0	0	0	0	0	2,242
Page	25	21	9	1	4	1	6	2	2	907
Palo Alto	12	12	10	1	1	0	0	0	0	1,098
Plymouth	13	11	9	0	1	1	0	2	0	2,202
Pocahontas	8	8	7	0	1	0	0	0	0	1,685
Polk	481	427	113	60	96	89	69	25	29	639
Pottawattamie	73	71	19	17	24	11	0	1	1	1,190
Poweshiek	12	11	9	0	2	0	0	0	1	1,649
Ringgold	2	2	2	0	0	0	0	0	0	3,575

(Cont.)

Table 2b		Patient Care							Inactive & No Informa- tion	Popula- tion- Patient Care Physician Ratio
County	Total Physicians (MD & DO)	Total Patient Care	Solo, Partnership, Group or Other Practice				Hospi- tal Based	Other Activity		
			General Practice	Specialties						
				Medical	Surgical	Other				
Sac	11	11	11	0	0	0	0	0	0	1,476
Scott	154	143	52	22	40	25	7	0	11	863
Shelby	8	8	7	1	0	0	0	0	0	1,975
Sioux	11	10	8	1	1	0	0	1	0	2,642
Story	71	63	24	12	13	7	7	2	6	866
Tama	9	9	9	0	0	0	0	0	0	2,265
Taylor	8	7	6	0	0	1	0	0	1	1,353
Union	17	16	8	1	4	3	0	0	1	831
Van Buren	8	7	7	0	0	0	0	0	1	1,340
Wapello	53	50	21	6	11	11	1	0	3	892
Warren	13	10	8	0	0	2	0	0	3	2,171
Washington	14	12	11	0	0	1	0	0	2	1,582
Wayne	7	5	4	0	1	0	0	0	2	1,744
Webster	62	58	21	9	15	12	1	1	3	825
Winnebago	7	7	7	0	0	0	0	0	0	1,813
Winneshiek	12	12	10	0	1	1	0	0	0	1,637
Woodbury	132	124	49	20	43	9	3	0	8	852
Worth	5	5	5	0	0	0	0	0	0	1,794
Wright	14	14	13	0	1	0	0	0	0	1,343
Region 1	41	40	36	1	2	1	0	0	1	1,738
Region 2	151	145	89	16	28	11	3	0	6	1,082
Region 3	83	75	62	2	5	6	0	1	7	1,440
Region 4	215	198	93	22	47	15	21	6	11	1,063
Region 5	124	120	77	10	20	12	1	1	3	1,075
Region 6	83	80	51	3	19	6	1	0	3	1,110
Region 7	225	216	87	14	49	29	27	3	6	1,114
Region 8	95	87	32	15	28	12	0	1	7	1,449
Region 9	235	217	88	29	57	35	8	1	17	1,000
Region 10	793	601	143	26	57	38	338	168	24	500
Region 11	678	607	224	72	120	106	83	28	43	777
Region 12	72	69	53	2	10	4	0	0	3	1,397
Region 13	165	154	79	19	32	13	10	5	6	1,225
Region 14	48	44	33	2	4	5	0	0	4	1,377
Region 15	145	135	84	13	22	13	2	0	10	1,181
Region 16	133	123	47	10	32	25	9	3	7	982
State	3,286	2,911	1,278	256	532	331	503	272	158	946

Physicians in rural areas are on the average older than those in larger communities. In 1965, 55 percent of medical physicians in towns under 2500 in population were older than 50 years of age. In towns over 2500, only 42 percent were over 50 years old. In 1967, nearly 25 percent were over 60 years of age, at the same time, less than 50 percent were over age 50.

Table 3

Age distribution of Total Physicians (M.D. and D.O.) for Iowa 1967

	<u>Under 30</u>	<u>30-39</u>	<u>40-49</u>	<u>50-59</u>	<u>60-69</u>	<u>70-over</u>	<u>% 50 & Over</u>	<u>% 60 & Over</u>
M.D. (Non-Federal)	217	698	768	550	372	284	41.7	22.7
D.O.	11	37	97	100	94	59	63.5	38.4
Total Physicians	228	735	865	650	466	343	44.3	24.6

Selected Characteristics of the Physician Population 1963 and 1967. Special Statistical Series, American Medical Association and American Osteopathic Association Yearbook and Directory of Osteopathic Physicians, American Osteopathic Association.

Table 4

Percentages of Medical Physicians in Iowa Older than 50 and Older than 60 by Town Size and Type of Practice: 1965.

City Size	Percent of Medical Physicians Older Than 50			Percent of Medical Physicians Older Than 60		
	General Practitioners	Specialists	Total Medical Physicians	General Practitioners	Spec's	Total Medical Physicians
Under 2,500	55	57	55	33	25	32
Over 2,500	50	38	42	24	15	19
Over 10,000	50	36	40	26	14	18

Derived from John C. MacQueen, "A Study of Iowa Medical Physicians," The Journal of Iowa Medical Society, November 1968.

Table 5

Number of Newly Licensed Medical Physicians in Iowa: 1963-1969

Year	1963	1964	1965	1966	1967	1968	1969
Numbers	190	216	191	185	216	212	223

Iowa Medical Society, Des Moines, Iowa. These figures, of course, represent the maximum number of newly established practices in any given year.

A sample survey in 1968 shows how Iowa's employed registered nurses were distributed by field of employment, and the following tables show position of employment.

Table 6

Percentage Distribution of Iowa's Employed Registered Nurses by Field of Employment: August-September, 1968

<u>Field</u>	<u>Percent</u>
Hospital	62.63
Nursing Home	7.78
School of Nursing	3.44
Private Duty	2.30
Public Health	3.06
School Nurse	5.36
Industrial Nurse	1.40
Office Nurse	10.33
Other	3.70

Data provided by the Health Economics Research Center,
Department of Economics, The University of Iowa.

Table 7

Percentage Distribution of Iowa's Employed Registered Nurses by Type of Position: August-September, 1968

<u>Position</u>	<u>Percent</u>
Director or Assistant	4.60
Consultant	.39
Supervisor or Assistant	8.29
Instructor or Faculty Member	4.60
Head Nurse or Assistant	15.31
General Duty or Staff	45.54
Office Nurse	10.59
Other	10.59
Not Reporting	-

Data provided by the Health Economics Research Center,
Department of Economics, The University of Iowa.

In December 1967, there was a population of 3,640 practical nurses in Iowa with active licenses. The distribution of employed licensed practical nurses by field of employment is presented.

Table 8

Percentage Distribution of Iowa's Employed Licensed Practical Nurses by Field of Employment: August-September, 1968

<u>Field</u>	<u>Percent</u>
Hospital	56.38
Nursing Home	24.51
Private Duty	2.94
Office	6.86
Other	9.31
Data provided by the Health Economics Research Center Department of Economics, The University of Iowa.	

There are 44 Homemaker-Health Aide Services in Iowa, and they are helping meet family needs.

In 1970, the Iowa Legislature passed a number of bills intended to improve the quality of health care. Among these were bills to provide medical assistance to individuals and families whose income is not sufficient to meet the cost of necessary medical care; laws to license, inspect and regulate nursing homes and health care facilities; laws to improve enforcement of drug regulations.

In addition to the action of the Legislature, the Governor through the Office for Planning and Programming and the Department of Health has developed a comprehensive health planning program for fiscal 1970-71. This program includes as goals:

1. To meet the shortages in the state's health manpower, the Comprehensive Health Planning Council is promoting increased productivity in the state's educational and training institutions, a climate attractive to the practice of health callings, and the efficient utilization of health care skills.
2. To assist communities throughout the state in the developing of area wide comprehensive health planning programs.
3. To assure all citizens of the state the availability of comprehensive health services of the highest quality.
4. To assure adequate and efficient distribution and utilization of health care facilities throughout the state.

5. To cooperate with and encourage the cooperation of other agencies and organizations, public and private, in places and programs for the betterment of health care in Iowa.
6. To assure environmental conditions throughout the state which contribute positively to healthful living.

II. Mental Health

Mental illness is the number one health problem in the United States. More than half of all hospital beds are occupied by mental patients. One out of 10 persons needs treatment for mental illness now, and one out of 12 will be hospitalized for mental illness in his lifetime.

More than half the people who visit a doctor with physical complaints have emotional problems that are partly or wholly responsible. Mental health is a factor in delinquency, divorce, alcoholism, drug abuse, and crime.

Mental retardation, although basically different from mental illness, touches the lives of everyone in a community. There are about 5.4 million retardates in the United States. An estimated three out of every 100 newborn babies are retarded. Fortunately, only 5 to 6 per cent will need institutional care at any one time.

The mildly retarded account for 90 percent of the retardates and are capable of being educated within limits. Their development is slow, but with special education, special vocational training, and appropriate supervision they can work in competitive employment and live independent adult lives. This, of course, depends upon community resources to help families educate and train the retarded.

Advances in new drugs and treatment for the mentally disturbed reduced the number of mental hospital admissions in Iowa per 100,000 population to 183.6 in 1970 from 202.8 in 1969. This trend could free medical resources for use in other patient care, such as the aged.

III. Health Careers

In 1950 the Health Service Industry was the nation's fifth largest employment field. In 1960, it ranked third behind agriculture and construction. Soon it may surpass both to become the nation's top employment field. For many years the nation's most critical health personnel need was for more physicians. While this need continues, the need for persons trained in related health fields is growing more rapidly. Today's medical patients require highly specialized and carefully coordinated care by various members of the medical team whose efforts are directed by the physician. The demand for skilled personnel continues to exceed the supply. There are at least 700 different career possibilities in the health professions and occupations.

Leaders in medicine and allied professions estimate that in the next 5 to 10 years, the nation will need 229,000 more professional nurses, 125,000

more practical nurses, at least 50,000 more physicians, 40,000 more speech pathologists, 38,000 more medical technologists, 30,000 more dietitians and 18,000 more medical social workers. They also estimate that we will need hundreds of thousands of support personnel in hospitals, laboratories and other medical facilities during this same period.

Some reasons for the increased medical personnel are:

1. The most significant is the enormous scientific advances which have been made in medicine and its allied fields during the 20th century.
2. There is a growing health consciousness on the part of the American public. People are becoming more concerned about protecting their health and that of their families.
3. National prosperity and increased earning power has enabled the public to satisfy its desire for better medical care.
4. The nation's population is increasing at the rate of more than 3,000,000 persons a year.*

Health Career Opportunities in Iowa

There are almost limitless health career opportunities in Iowa. To put all of the scientific and medical gains into widest possible application, more and more young men and women are needed in virtually all health professions and occupations.

Health occupations education is a rapidly expanding field. Health workers are prepared for positions supportive to the health professionals. The health occupation programs in Iowa are administered primarily by area community colleges and vocational-technical schools.

In 1968, the College of Medicine at University of Iowa had 480 medical students - one of the largest medical schools in the country.

College of Dentistry - 212 students

College of Pharmacy - 275 students

College of Nursing - 400 students

Drake University:

College of Pharmacy - 300 students

Iowa State University:

College of Veterinary Medicine - 300 students

Des Moines College of Osteopathic Medicine and Surgery:

335 students, approximately 90 graduates per year.

There are now four-year, three-year, and two-year nursing programs at various colleges and hospitals in the state.

* Horizons Unlimited - AMA Handbook Describing Rewarding Career Opportunities in Medicine and Allied Fields.

Dr. Edward Jakubauskas, in a study on "Comprehensive Health Manpower Planning", projects what is expected to happen to the occupational pattern of the medical industry for certain health occupations between 1960 and 1975.

The trend factors for each of the sixteen occupations in Iowa between 1960 and 1975 are presented in Table 9 (as well as total occupational requirements). In addition, the occupational requirement is broken down between those required in the medical industry and those in all other industries.

The trends range from .93 for student nurses to 2.60 for technicians, medical and dental. Thus all but one occupation will increase its requirements between 1960 and 1975. Furthermore, six of the sixteen occupations are expected to double. These include biological scientists, psychologists, technicians, chiropractors and therapists, hospital attendants, and practical nurses. The latter four are principally employed in the medical industry.

The trends for Iowa are quite close to those of the nation although smaller in each instance.

Table 9

Health Occupation Needs of Iowa, Projected to 1975

Health Occupations	Total 1975	Number in Medical Industries (using National Percentages)	Number in Other Industries	Overall Trend 1975/1960
Biological scientists	263	58	205	2.01
Dentists	1,893	1,847	46	1.33
Dieticians & Nutritionists	355	237	118	1.34
Nurses, professional	14,574	13,544	1,030	1.62
Nurses, student	1,188	1,188	0	.93
Optometrists	328	279	49	1.27
Osteopaths	317	317	0	1.23
Pharmacists	1,274	114	1,160	1.01
Physicians & surgeons	4,669	4,628	41	1.58
Psychologists	341	61	280	2.09
Technicians, medical and dental	4,662	4,461	201	2.06
Veterinarians	1,169	55	1,114	1.30
Chiropractors and therapists	1,819	1,521	298	1.96
Opticians & lens grinders	287	40	247	1.35
Attendants, hospital	19,626	18,603	1,023	2.23
Nurses, practical	5,497	4,719	778	1.92

IV. Venereal Diseases

National Situation

"VD is a national problem. It is the second most communicable disease, ranking behind only the common cold," according to Mrs. Jeanette Goddie, a VD specialist in Iowa.

The following quotes are from the American Medical Association Education Service, January 1971.

"Gonorrhea ranks first and syphilis fourth among reportable communicable disease in the United States."

"Only twice before have venereal disease pandemics been reported to exist in this country, at the close of both World Wars."

"For the year ending June 30, 1970, infectious syphilis morbidity was 8% higher than the previous year. The estimated incidence of syphilis is 70,000 to 80,000 cases, and that of gonorrhea in excess of 1,700,000."

The American Medical Association in their publication, "VD is Still a World Problem", gives the following statements:

"Only a few years ago venereal disease was dismissed as an unimportant public health problem. Penicillin and other antibiotics had become available for general use and had been found effective as a cure for both gonorrhea and syphilis. When there was a spectacular drop in the number of reported cases, the venereal disease problem was believed to have been solved."

"A short time after this drop, there was a world-wide upsurge of venereal disease. In the United States the incidence rose so rapidly that syphilis and gonorrhea now represent the most serious communicable disease problem."

According to the Ohio State Department of Health:

"Each day in the United States, 900 teenagers become infected with one of the two most prevalent diseases, syphilis or gonorrhea. More than 2,800 gonorrhea and 280 syphilitic infections occur daily."

"Each year more than 4,000 people in the United States die as a result of syphilis. Cost for the care of persons with syphilitic insanity and blindness exceeds \$40 million annually."

The pamphlet, "Plain Talk About Venereal Disease" tells the following regarding afflictions resulting from VD:

"One in fifteen victims of syphilis will become permanently crippled heart victims. One in fifty will develop syphilitic insanity. An overall rate of one in twenty-five of those afflicted will become in some way permanently crippled or incapacitated

due to syphilis. Untreated gonorrhea can, and does, cause serious physical damage, such as sterility, heart trouble, arthritis, and blindness."

Iowa Situation

In Iowa in 1970, 6,116 cases of VD were reported by the Iowa State Department of Health. Most of the cases (5,556) were gonorrhea while 540 of the total reported were syphilis.

Cases were shown in all but two of the ninety-nine counties. The range in number per county was from one case to 1,567 cases.

In Des Moines and Polk County, VD cases reached a record high in 1970, when there were 1,567 cases treated, or reported to the Social Health Clinic, compared with 1,226 in 1969. In Des Moines and Polk County by June 30, this year, they were already one hundred cases ahead of this time last year.

As of August 12 this year, the Social Health Clinic of the Des Moines-Polk County Health Department has examined 3,011 people compared with 2,099 during all of last year. Kent Forbes, Communicable Disease Control Officer, reported that he expected the number of venereal disease cases treated - both gonorrhea and syphilis, to double in 1971 over 1970. The biggest increase is among 18 to 20 year olds, the group that ordinarily decreases during the summer, but this year, with the unemployment, this group seems to have more time on their hands and there is more venereal disease.

The total cases of syphilis reported in 1966 were 1,043 compared with 540 in 1970. However, the reported cases of gonorrhea have increased from 3,031 in 1966 to 5,556 in 1970.

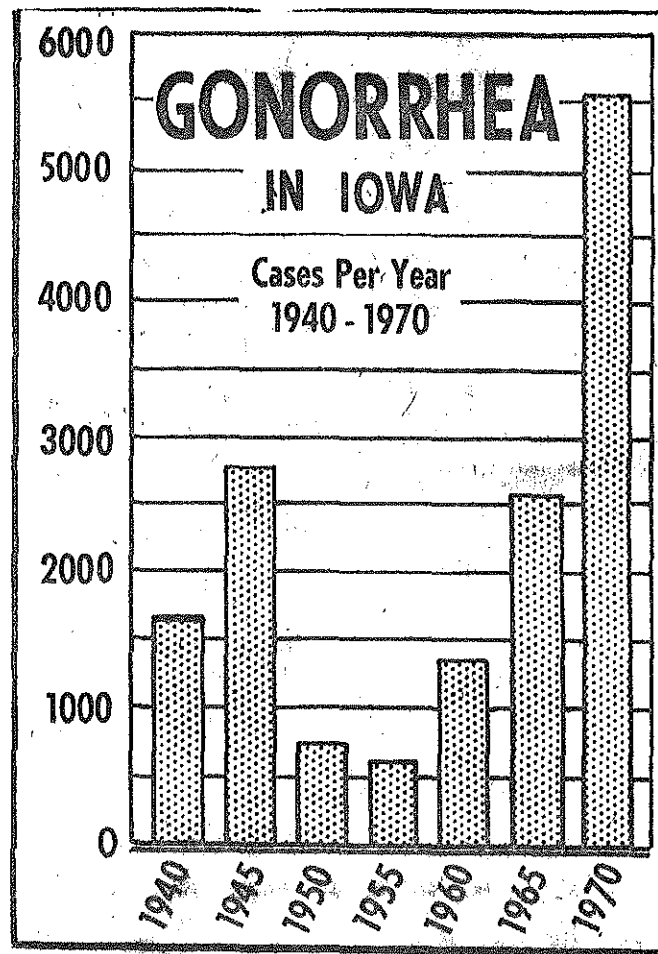
State Health Commissioner for Iowa, Arnold M. Reeve, said he is alarmed because the annual gonorrhea total keeps rising despite educational programs in the schools and the ability of youths over 16 to obtain treatment without parents' knowledge. Iowa physicians reported 5,556 cases of gonorrhea in 1970, a 27 percent increase over the 4,360 cases reported in 1969.

Reeves estimated that only about 20 percent of all cases are reported to the Health Department.

The seriousness of Iowa's situation is noted in this quote of Dr. Reeves from the Des Moines Register. "The reported cases are enough to scare hell out of you and they're only the top of the iceberg, the total in Iowa for 1970 was probably 25,000. We've got more gonorrhea today than during World War II."

Dr. Reeves contends that today's youths are more promiscuous than their parents, noting the highest 1970 incidence of gonorrhea was in the 20-24 age group (2,253 cases) and the second highest in the 15-19 range (1,522 cases).

Figure 3



Following are the 1970 Iowa figures for age groups:

Under age 10	10
10-14	61
25-29	775
30-34	341
35-39	152
40-44	79
45-49	42
Over 50	52
Age unknown	289

Percentages by certain age ranges of gonorrhea reported in Iowa in 1970 show 86.05% were in the age range from fifteen to twenty-nine. Further age group percentages were 15-19 years, 28.78%; 20-24 years, 42.62%; 25-29 years, 14.65%. A total of 70 cases were reported in the 10 to 15 age group and 350 cases in the 35-40 age group.

While gonorrhea rises, syphilis, a much more serious disease, has been declining gradually in recent years. Reeves attributed the syphilis downtrend to premarital blood testing and vigilance of physicians and public health agencies.

The Social Health Clinic of the Des Moines-Polk County Health Department reported that in 1970 approximately 75 percent of the patients who came to the clinic were in their teens or early 20's. Also that many students find it easier to go to the Clinic for treatment than to the family physician.

Iowa law requires that anyone under age 16 must have written permission from his parents before he can be treated.

Who's responsibility is Venereal Disease control? The following quote is from the booklet -- Scholastic Book Services:

"The prevention and control of venereal disease should be a matter of concern to everyone. For the uninfected individual this public health problem is important in the sense that he or she should be made aware of the possible dangers, the steps for prevention, and the necessity for examination and treatment if indications of infection arise. For the infected individual, it is a matter of even greater concern."

The American Medical Association, in their publication "VD is Still a World Problem", puts the responsibility as follows:

"Both the physician and the patient have a role to play in the control of venereal diseases ... public apathy and reluctance to face the problem openly have contributed to the recent resurgence of this scourge. Young people have not been adequately warned about the dangers of promiscuous behavior. This is a serious reflection on modern social attitudes and points to the need for adequate public education in the matter of personal and community living."

"In too many instances parents have been unable, or have neglected to give proper sex information to young persons. Also, the subject of venereal disease control has not been considered fit to be included in the curriculum in many schools. The venereal diseases are still considered to be hidden diseases in many ways - socially, clinically, statistically, and educationally."

V. Drug Use and Abuse

It has become evident that the drug culture in this country is reaching alarming proportions. This problem is no longer restricted to the inner city but has expanded to suburban and rural communities as well. In most instances, drug abuse is believed to be synonymous with heroin, but there are many more people addicted to pills in the form of amphetamines, barbiturates and tranquilizers, than to hard drugs.

Drugs tend to affect each person in a different way. As every state and community in America is unique, so is its drug problem. In California the major drug problem is the use of amphetamines; in New York it is the use of heroin; in Iowa at the present time, it is the use of soft drugs, the non-heroin.

Many experts believe that drug use leads to drug abuse which in turn leads to crime in many cases. It has been shown in Washington, D.C., that where drug abuse is contained, the crime rate drops immediately. Crime rates and the juvenile delinquency rate in Iowa are up.

In New York City, 80% of the crimes are reported due to drugs, especially heroin. It has also been reported that people living in New York have a 50% chance of their homes being broken into and robbed.

In the city of Los Angeles alone, 167 young adults under 25 died of an overdose of barbiturates in 1969. In New York 504 juveniles died of heroin during the same period.

Iowa has not yet reached the critical point where members of the community die regularly from drug abuse. The first known death from drugs has just been reported (August 1971). This means there is much to be done, both to anticipate community-wide drug abuse and to deal effectively with the environment in order to reduce social pressures which produce drug abuse.

Research is very limited on the drug abuse problem. There were 145 high school students from 54 counties who attended a state-wide youth conference in Des Moines in May 1971 and filled out opinionnaires in which the large majority said that marijuana (pot) is easy to come by in Iowa, but it should not be legalized. Sixty-three percent thought their parents were badly informed about drugs. Most of the students estimated that less than 20 percent of students in their schools smoke marijuana. But 19 percent thought from 40 to 60 percent of their student body smoked the drug and 14 percent put marijuana use at 20 to 40 percent. About half of the group were of the opinion that current drug education is unreliable. The false note, they indicated, is usually enough to turn young people off on any authority who plays it, no matter how sincerely motivated he may be.

The treatment center for drug addicts, Lexington, Kentucky, reports that heroin addicts have a 95 percent failure record to cure with only about five percent who are helped or cured. The chances of success in rehabilitation are not good. The addict cannot be rehabilitated unless he wants to get off of drugs.

The issue of drug abuse involves conflicting attitudes among and sometimes between younger and older persons. It must be stressed that if there is one addiction in a community, there is one problem - a community problem.

Before establishing any community drug program it is recommended that long range planning be done to include well thought-out comprehensive plans which effectively utilize local resources in such a manner as to insure continued on-going programs. There are local individuals to be contacted as resources to be involved in the field of drug abuse programming.

The state has been divided into 16 districts with an area coordinator.

The director of the Iowa State Drug Abuse Authority, Paul Flynn, has said, "There can be little question that we are living in a drug-oriented society. The attendant problems of abuse are as widespread as the substance themselves, from the pill infested medicine chest to the ten year old heroin addict. In the past several years not only the number of substances being abused, but also the number of people abusing substances has increased dramatically."

"There is no city, no town, and no family that is safe from the creeping concern of drug abuse and we must communicate concerning problems and new ideas among ourselves if we are to have any chance of success."

VI. Nutrition

The following observation is from the White House Conference on Food, Nutrition and Health, December, 1971:

"National nutrition programs must recognize that the family is the basic distributive unit...programs must consider the entire age spectrum of normal families."

The Seventies will be the decade of young adults. The age group of 20-30 years will increase 34% by 1980 compared to 6% for all other ages. By 1980 in Iowa, estimates for the 20-30 age group based on current population figures are in the same range or slightly higher than the national figure (for Iowa, about 40%). This figure includes the allowance for the anticipated outmigration based on the rate of recent years. The 20-30 year olds represent the segment of population in Iowa for which outmigration is the highest.

Also to be expected is a rising number of births, up another 1.3 million a year to 5 million annually. Howard Johnson reports in Food and Nutrition News, May 1970, that this rise is attributed to the large number of children born after World War II who are themselves now entering the childbearing age. Another factor which contributes to the large number of pregnancies in adolescents is the steady decline in the average age at which sexual maturity is reached in girls.

It may be that if efforts are concentrated to reach young adults the results, in terms of establishing good food habits for youth in first stages of independency, young newlyweds, young parents with preschool and school-age children, would prove to reap lifelong benefits to society. Because of the vulnerability of teenagers, those in the period of pre-adulthood, 15-20 years of age, need to be included also.

The following statements with regard to nutrition concerns for the above listed categories are offered:

A. Infants and Children

The physical and mental results of malnutrition can be identified with slow growth and failure to reach growth potential, structural weakness in bone and muscle, impairment of normal functioning of body processes, impairment of mental development all the way to the severest degree of irreversible damage to brain growth. The extent of damage depends on when the energy or nutrient deprivation occurs, the specificity of the deprivation, how long it lasts and how severe it is. The effect of nutrition on the functioning of the central nervous system cannot be separated from the effect of a whole complex of environmental factors. This necessitates the educational approach be from a multi-discipline aspect.

Malnutrition in infants and children endangers the individual and the society in which he lives. The adult functioning potential may never be achieved.

Lifetime eating habits (those hard to change) are learned during the formative years. Young children are influenced to a great degree by eating habits of those who surround him, particularly those of the siblings and the father. However, in general, mother determines what food is put on the table.

Many studies report the growing problem of caloric overnutrition among children in the United States. Retrospective studies show that overweight children tend to become overweight adults. The folk notion that a fat child is a healthy child seems to persist.¹

B. The Teen Years

Concern with regard to teenage pregnancies results from the fact that death rates have been found to be much higher for infants born to these very young mothers as compared to the rates for infants of older mothers. In addition to high prematurity rates and high rates of infant mortality, pregnancy in school girls is much more likely to be complicated by pregnancy toxemia, anemia, and difficulties in labor and delivery. It is well known that nutrition for the female must be adequate throughout her life, if deleterious effects on her offspring are to be prevented. The

¹E.D. Munves, Nutritional Well-Being: Our Goal for All Children, "Children and Today's World," Association for Childhood Education International, Washington, D.C., 1967.

nutritional status of many adolescents in the U.S. today is such as to contribute unfavorably to the outcome of pregnancy.

Evelyn Spindler says of the eating habits of teenagers:

- * The older the child, the poorer his diet
- * The teenage girl is likely to be the poorest fed member of the family
- * Boys are better fed partly because they consume more food.

Data from U.S. Diets of Men, Women and Children, USDA, 1965, show that calcium, iron, vitamin A and thiamin were the nutrients in shortest supply in the diets of teenage girls. Teenagers in the lowest income groups had the least favorable average intakes of the same nutrients. The largest amounts of soft drinks and grain products were consumed by teenagers in the low-income groups, whereas larger quantities of milk and citrus fruit tended to be consumed by teenagers in the higher income groups. Among females, the decline in consumption of milk and milk products set in after the 9-11 age group.

In the Nutritional Status of Teenage Children in Iowa, conducted by Hodges and Krehl in 1965 some results were:

- * A considerable number of teens ate no breakfast
- * Students who ate at lunch counters selected carbonated beverages, french fries and candy
- * Teens preferred meat, potatoes and milk and often rejected salads and vegetables at the evening family meal
- * Snacks often contained cheese, milk or ice cream
- * Dental cavities occurred frequently
- * A few girls were frankly anemic.

In Adolescent Nutrition and Growth, edited by Felix P. Heald, 1969, Dr. Krehl comments further in his chapter entitled: Nutrition of the Low-Socioeconomic Class Adolescents:

"Lest there be some doubts in your mind concerning the nutritional status of the adolescent group in Iowa, I would like to emphasize that there is considerable evidence of malnutrition in this group, despite the fact that an abundant food supply is readily available to them.

The most frequent reason given for not eating breakfast was that the mother was not there to prepare it. Teenagers do not like casserole dishes, particularly if they can't identify what is in them.

Another characteristic is that teenagers do not have a high preference for fruits, vegetables or salads. Dr. Krehl views the

problem of nutritional deficiency particularly in the low income groups in what he calls the eternal triangle which encompasses the child within the most unbreakable barriers which link poverty, disease and ignorance. He continues...not that children or people are necessarily ignorant, but they have limited opportunities to learn."

The indifferent attitude of a teenager toward eating is often related to a poor diet. When asked why they do not eat better, many say they don't have time. However, they are really saying, "I don't care about what I eat, I don't think it's important." John Condry states: "I am impressed that although most nutrition programs focus upon health, the food habits of teenagers seem to be affected by other consideration." The teen girl is more concerned with appearance, popularity and peer acceptance. How, then, can we fashion programs to show the teenagers that what they eat makes a difference now and later?

Helping the student to arrive at a decision for change is much more difficult than the acquisition of knowledge concerning a nutritionally adequate diet. The meanings of food to adolescents are not necessarily those of adults. People do not change their behavior without some benefit or reward, but, unfortunately improvements in diet in the main do not spell instant success. Nutrition education programs for teenage boys and girls should be a part of of the larger pattern of education for good food habits that had its beginnings in the preschool years and that has continued in a carefully planned, integrated, and sequential program through elementary and secondary school years.²

"Teach Us What We Want to Know," a survey of the health interests of 5,000 students in Minnesota, concluded that there is little concern about food and nutrition in the first five grades and at no time are they of major importance to a majority of students. This tells us that sensitivity to what besides health is interesting to children becomes all important so that programs can be geared to planning nutrition education through these interests.

C. Young Homemakers and Parents

Mothers of preschool children in the 12 North Central states were interviewed regarding the eating behavior of their children and certain family characteristics. Results of this study were reported by Eppright et al., in the Journal of Home Economics, April, May and June, 1970. Some of the findings which have implications for Extension are:

- * Planning meals that are appealing, quickly prepared and economical was regarded as a chore by 40% of the mothers

²Corinne Robinson, Underweight and Undernutrition in Teenagers - A Problem for Nutrition Education, Food and Nutrition News, National Livestock and Meat Board, December, 1969.

- * About one-half of the mothers considered cooking as a way to get attention, and one-half saw it as an outlet for creativity
- * On the test of nutrition knowledge, mothers tended to score higher on the items of general nature but tended to miss those that related to food composition and those that might have been influenced strongly by advertising
- * Favorable attitudes toward nutrition were without influence in the nutritional quality of the diet
- * Of the socioeconomic variables, the amount of money spent for food was the most influential in the quality of the diet of the children
- * Mothers of children whose diets were classified in the lowest 10% with respect to nutrition quality had a relatively low level of nutrition knowledge and unfavorable attitudes toward meal planning and food preparation and a highly permissive attitude toward the eating behavior of children

Increased efforts in nutrition education need to be exerted for mothers of preschool children in all segments of the population but especially for those living in the large cities, those with large families, those with low food budgets, and those who are poorly educated.

D. Obesity

Obesity is likely to develop during certain periods in life: infancy, the time of starting school, puberty, and in females, the first pregnancy and the menopause.

A pattern of obesity can be established in infancy. Overfeeding an infant produces a fat baby who tends, successively, to become a plump child, an obese adolescent, and an overweight adult.

The incidence of overweight in the United States is increasing. At least 10 million teenagers, representing 15 to 20 percent of the age group, are overweight. The proportion is even higher in adults, for it includes those persons whose patterns of obesity continue and an additional group of individuals who become overweight after the age of 25.

In this country, possibly the most salient factor in calorie imbalance contributing to increase of obesity at all ages is decrease in physical activity.

Many calorie-conscious people tend to omit breakfast and lunch and concentrate on one meal in the evening. This pattern of eating does not insure reduction of calories and may make weight maintenance or loss more difficult.

In an attempt to shed pounds quickly, many teenage girls often go on fad diets. Part of the problem is that some teenage girls do not have a realistic idea of what their ideal weight should be.³

The first approach to education in the realm of obesity should concentrate on prevention. Success in the maintenance of weight loss has proved to be very low. The group approach to weight loss programs seems to be most beneficial for success in losing pounds and maintaining weight loss.

Except for the footnoted reference, the material with regard to obesity is taken from Obesity, edited by Nancy Wilson, F. A. Davis Co., Phil., 1969.

E. The Elderly

From the Work Book on Nutrition for participants in Community White House Conferences on Aging: Nutrition affects the aging process because it contributes directly to the functioning of every cell in the body. Conversely, aging affects the body's ability to absorb and use food efficiently. Dietary deficiencies are found frequently among older as well as younger people. Deficiencies are found less often among people with high incomes and a high degree of education.

U.S. News and World Reports state that the group over 60 will increase at a rapid rate, second only to that of the young adults, in the decade of the 70's.

The factors which affect the nutrition of the elderly are also those which are often the reason why older people are malnourished:

- * Attitudes toward food and early childhood eating habits

- * Nutrition knowledge

Dr. Wilma Brewer, I.S.U., states: A lack of awareness of the importance of adequate nutrition may be a limiting factor in the diet of aging persons. For some, there may be an awareness of the "importance" of food, but

- a lack of knowledge of how to select foods to provide an adequate daily diet
- a lack of motivation to purchase and prepare foods that would comprise an adequate diet
- a belief in the adequacy of one's diet, based on a life-time pattern of eating
- a belief that the right food is important for children, but that for older people, food does not make a difference

- * Income

³ A Fresh Approach to Healthy Eating, Family Health, July 1970, Ruth Huenemann, Adolescence.

- * Dental health
- * Chronic disease
- * Life-style (living alone may mean that an elderly person gives little attention to his food)
- * Early senility, limited mobility, physical handicaps

Nutrition problems of the elderly are multiple and the development of solutions becomes a problem of community health.

VII. Physical Fitness and Exercise

Total fitness, the over-all well-being, encompasses physical, social and emotional components. Physical fitness is a mixture of the best possible bodily health plus the physical condition to perform everyday tasks effectively and to meet emergencies as they arise.

Physical fitness, a condition which must be acquired and can be maintained only by activity, involves muscular strength and endurance, muscle tone, heart action and response to agility, balance and coordination.

A person who is physically fit is able to withstand fatigue for longer periods than the unfit, is better equipped to tolerate physical stress and has a stronger and more efficient heart. Research studies indicate a relationship between physical fitness and good mental alertness and absence of nervous tension.

Dr. Charlotte Young states that one of the educational emphasis in any efforts directed toward the prevention of obesity must be the promotion of greater physical activity.

In this century, possibly the most salient factor in calorie imbalance contributing to increase of obesity at all ages is decrease in physical activity. Active use of human muscle power has been replaced by relative inactivity as a result of reliance on appliances and machines powered by electricity. Studies in children and adolescents show that the obese eat less than the non-obese but also are less active.¹

Jean Mayer states that the view that exercise expends relatively little energy is completely erroneous. He believes that inactivity is the most important factor explaining the frequency of "creeping" overweight in modern societies.

Increased appetite is not necessarily directly proportional to increased physical activity. As exercise decreases, a point is reached when food intake no longer decreases. Mayer suggests that the appetite control mechanism is apparently not well adapted to function at very low levels

¹Obesity, edited by Nancy Wilson, F. A. Davis Co., Philadelphia, 1969

of activity.

The full promise of happy later years in life comes only to those who are healthy, alert and active. Physical fitness at all ages can be improved, at whatever the individual level of performance, by progressing in easy stages.

Emphasis toward a total concept of physical fitness needs to begin from earliest schooling. The value of a lifetime program of individual physical activity, not just in weight control measures alone, must be instilled at an early age.

"Trying to fit more physical activity into our lives takes time, thought and often community planning for suitable opportunities and facilities, but the result in improved physical fitness seems well worth thoughtful consideration of parents and community leaders - not only for their children and future generations, but for themselves as well." (Dr. Charlotte Young)

VIII. Food Misinformation and Faddism

The American Medical Association has estimated that the American public spends over \$10,000,000 each year on falsely represented vitamin products and so-called health foods. Consumers need guides to help them recognize typical techniques used by promoters of food quackery. Studies have shown that food faddists have received substantially less nutrition education than non-faddists. Nutrition education builds resistance to food faddism through disseminating facts.

Many dangerous fad diets are employed by those with weight problems. Those particularly vulnerable are the teenage girls who desire to shed pounds quickly.

The rash of newspaper and magazine articles indicates increased public interest in so-called "organic farming". Many of the organic food cultists, who go arm in arm with the "health food" faddists, appear to have a semi-religious conviction that what is natural is a manifestation of God's purpose, while what is scientific is a denial of God's plan.¹

IX. Food Safety and Sanitation

A. Home Food Production and Preservation

The number of families who produce and preserve food for home food consumption has decreased. However, many of our vulnerable families (young families and limited income families) do and are often encouraged to produce and preserve food in the home as a way of increasing the food supply (especially of fruits and

¹The "Organic Food" Kick, R. A. Selig, June 1971 Supply Letter, United Fresh Fruit and Vegetable Association.

vegetables). It involves a large investment of time and energy. Unless recommended procedures are followed in preserving food, the returns in relation to the investment may be very disappointing. Homemakers uninformed about and inexperienced in the skills of home food preservation may unknowingly endanger the health of the family through improperly prepared food products.

B. Food Consumed Away from Home

The trend toward the consumption of food away from home, both meals and in-between meal items, is constantly increasing.

Data from the two national household food consumption surveys (USDA) show that \$74.00 was spent per person in 1955 for food and beverages purchased and eaten away from home. This figure increased to \$97.00 for the year 1965.

Families in Iowa should be able to purchase food away from home with reasonable assurance that the food is safe for consumption.

1. Food for Profit Establishments

Food service managers and employees throughout Iowa lack training in proper procedures for the preparation, service and safety of quality food.

2. Non-licensed Food Service

Community groups serving food in church, fraternal or other community facilities which are not licensed as restaurants encounter problems in the layout and designing of facilities, preparation, service and safety of quality foods.

3. School Food Service

School food service managers and employees are in need of training to assist in providing quality food service in the public schools. Departmental research has indicated this overall need and has identified specific areas where instruction is required. Short course programs have been offered by the department for over twenty years.

X. Safety

Accidents are the major cause of death in the United States for people one to 35; and they are the leading cause of permanent physical impairments. An estimated 48.7 million persons were injured during 1969, representing a rate of 24.7 persons injured per 100 persons per year. The largest proportion of these injuries occurred in the home - 19.7 million. About 3.7 million persons were injured in moving motor vehicle accidents, of these 3.3 million were injured in traffic accidents.

Many children become victims of accidental poisoning resulting from the ingestion of medicines, household cleaners and polishes and pesticides. Cases of poisoning of children due to aspirin show an increase.

The chemical age has made available to the family chemicals of many kinds for use around the home, yard and farm. These products have expanded at a more rapid pace than the family's understanding and knowledge of safe use, sanitation and handling.

Industries including farming must exert caution with chemicals to avoid injuries as blindness or even death.

Motor Vehicles

More motor vehicles being driven more miles by more drivers resulted in more traffic deaths on Iowa roads in 1970.

1970 Motor Vehicle Deaths - 908 (new high)

1969 Motor Vehicle Deaths - 781

There was a three percent increase from 1969 to 1970 in registrations - a new high. Also an increase in number of operators of 1.5 percent - also a new high.

Records show that 32 percent of year's traffic victims were in crashes which involved drinking drivers.

Upwards of 85 percent of Iowans who were in motor vehicle crashes last year were within 25 miles of their homes and more than 50 percent were within five miles of their homes. See map for Motor Vehicle Fatalities by Counties.

In addition to those killed, the number injured in traffic accidents was in excess of 25,000 persons in 1970. There were 71 pedestrians killed, two by motorcycles. Motorcycle victims numbered 37, ten bicyclists became victims, twice as many as in 1969. Train-vehicle crashes took 42 lives, eight fewer than in 1969. Motorcycling in Iowa has increased greatly. There were 48,173 registrations in 1969 and in the spring of 1971, there were 62,000. See map.

Bicycles

Studies by the National Safety Council disclosed that in one year 700 bicycle riders were killed in accidents involving motor vehicles. Two-thirds of these were 14 or younger, and another 34,000 riders were injured. Figures are not available on accidents involving only bicycles but it is believed that many of them could be avoided with proper guidance and instruction in safe riding practices and rules of the road. Fatalities and injuries in bike-auto accidents are about equally divided between urban and rural areas.

The six most critical problem areas are street or road intersections, stopping distances when braking, riding on the wrong side of the road, riding bikes of improper size, playing games on bikes, and riding at night. In 21% of the latter accidents, bicycles did not have reflectors. Greater safety consciousness is needed among all bike riders, especially the young.

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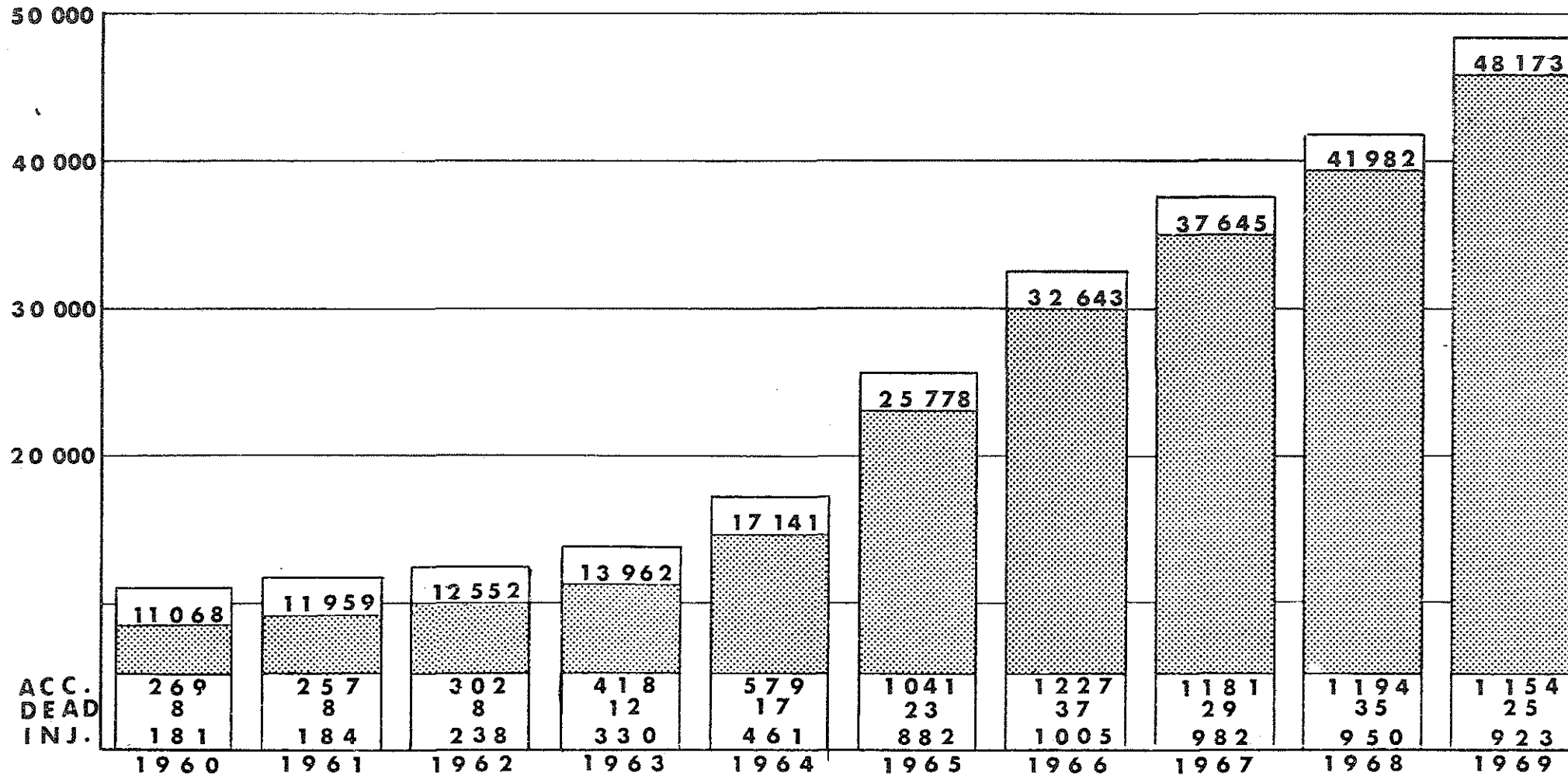
Figure 5

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The Growth of Motorcycling In Iowa

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REGISTRATIONS



1971 - 62,000 registrations

It is predicted that the sales of new bicycles will climb to an all-time high of 8.5 million units this year. In 1970, total sales of foreign and domestic models hit 6.9 million.

Minibikes

Just recently the National Highway Traffic Safety Administration warned that minibikes are a serious risk to children who ride them on streets and sidewalks and that more and more young children are going to be killed unless they and their parents recognize the dangers involved in the use of minibikes.

The Traffic Safety Administration estimates more than 1.5 million minibikes will be off and running by the end of the year--most operated by children under 16 years old. Most minibikes can travel 25 to 45 miles an hour, depending on the size.

All but a few of the most expensive, better equipped models are outlawed on highways because of lack of headlights and proper braking systems disqualify them for licensing.

First Aid

It is important that citizens be knowledgeable to assist with first aid for the injured and help prevent permanent injuries and save lives.

Women and Farm Machinery

Many farm women are assuming the role of the extra helper for farm field work. They may not be adequately trained to operate the powerful equipment which they may be handling some distance from home.

Pest and Rodent Control

There are disadvantaged families with poor housing as well as other families in certain cities and areas in Iowa where pests and rodents are a menace. Many diseases are carried and spread by rodents. Rats are invading yards and homes for food in some areas due to the sanitary landfills.

XI. Special Health Problems of the Elderly

Economic structures affect the elderly in many adverse ways, not the least of which pertain to matters of health. Decreases in income at retirement come at a time when a person requires more medical attention than at anytime of his life. About 80% of the aging population suffer some chronic disorder and for these people expenditures for medicines double.

The ever rising cost of medical and health care and the distribution of facilities over the state make such services unavailable to some.

While neither health nor other problems force a great share of the aging to the confinement of the institutional setting, it is a major

cost item. In the spring of 1970 over 80 nursing homes were certified for Medicare, but a year later only 52 were participating. This meant a loss of beds from 2,830 to 2,351. Nationally only about 4% of the elderly live in nursing homes.

Loneliness, isolation, and lack of social contacts contribute to the deterioration of physical and mental health and purpose of living.

There is a tendency for older people to be "accident prone". Many living quarters do not have safety features built in or hazards eliminated.

Diets of the elderly often do not maintain them in a state of good nutrition. This may be caused by:

- * No way to get food supplies
- * Lack of energy to prepare meals
- * Lack of interest in food because of sensory loss (vision, hearing, taste)
- * Dental problems
- * Lack of money
- * Lack of knowledge of what a good diet is
- * Inability to shift from old eating patterns
- * Eating alone

It is hard to find clothing on the market with special features for the physically limited.

There is need for knowledge of what happens to physical human systems with increasing years and the implications of these changes for emotional adjustments; i.e., adolescents learn to live with more hormones, the elderly learn to live with fewer. Adjusting to sensory losses is a "crisis" of old age.

Special facilities are needed in case of chronic illness such as arthritis -- doorknobs, faucets, stairless homes, etc., making the housing situation critically related to health.

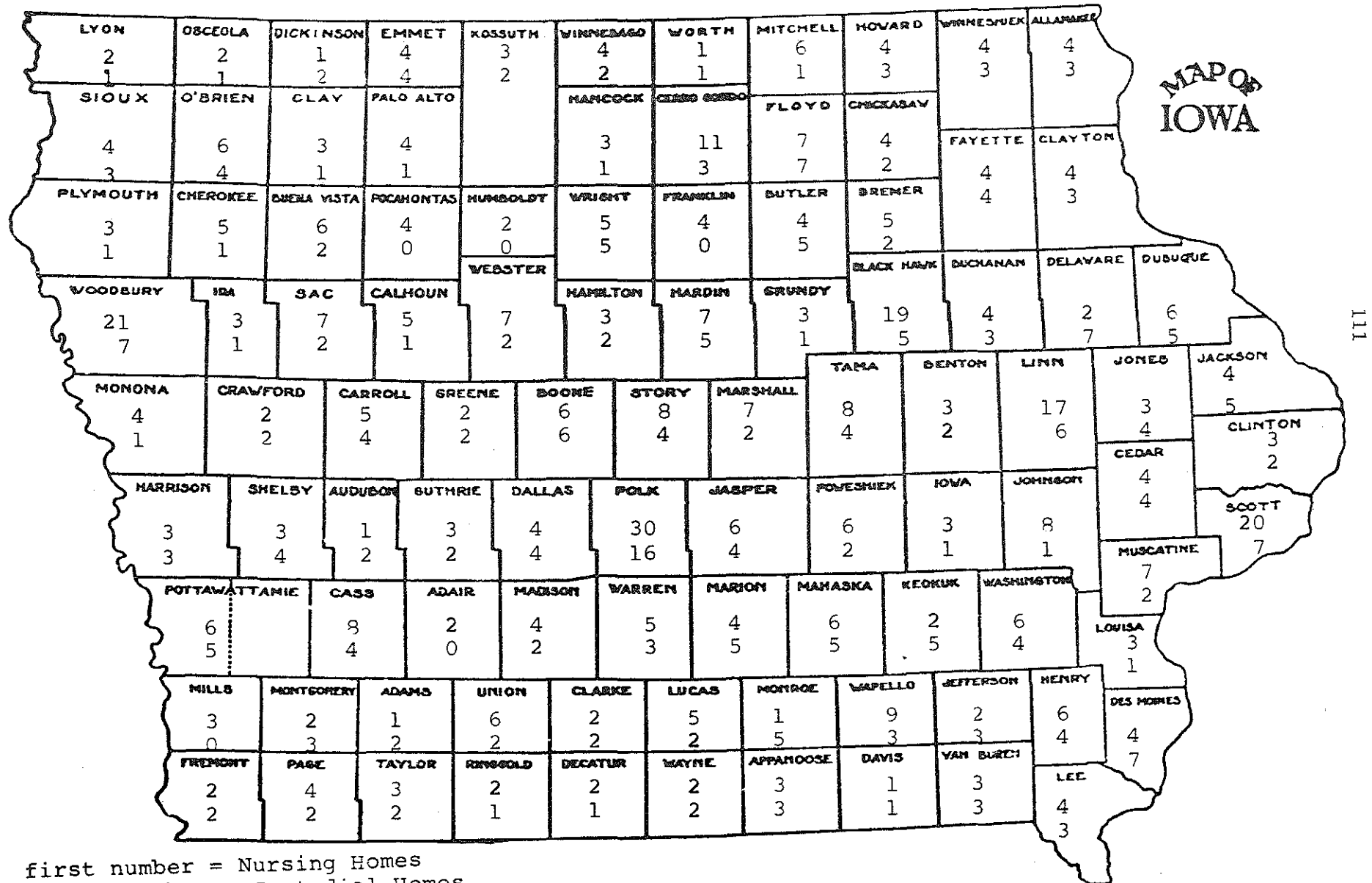
It is possible that there is greater need for mental health services for the elderly than has been recognized. The problems of adjusting to retirement and the possible feeling of lack of usefulness and purpose; adjusting to the deaths of spouses and friends and facing one's own death may be more than the individual can handle alone.

XIII. Environmental Quality

The relation between organisms and their environment -- what is often called ecology -- is a complex web of which the organism, man, is a part. The nation's growth or productivity have resulted in many new and complex environmental problems which seriously challenge man's health and well-being.

Figure 6

Licensed Nursing Homes and Custodial Homes in Iowa



What many would call a crisis has its roots in growth and maldistribution of population, products of technologies which pollute the environment and the underlying philosophy that man should exploit natural resources rather than manage them in the best interests of national security and citizen well-being.

Included in the concerns of man's relation to his environment are problems related to the contamination of air, water, soil and food; occupational and community stresses--noise, temperature, vibration, congestion; radiation and other hazards.

Iowa has many of these problems; the nature and seriousness varying from community to community.

Air and Water

The Office of Planning and Programming for the State of Iowa in "The Quality of Life in Iowa -- An Economic and Social Report to the Governor for 1970" discusses air and water quality in the state.

"Iowa is fortunate since it does not suffer from excessive air pollution. This is due to the nature of Iowa's industry and general atmospheric conditions.

Iowa is a part of the Great Plains Atmospheric Area established by the federal government. This area is characterized by a relatively flat terrain, high winds, and rapidly changing atmospheric conditions which provide for the natural dissipation of air pollutants.

The types and sources of air pollution in Iowa are shown in Tables 11-1 and 11-2. The major source of air pollution has been motor vehicles which makes up 60 percent of the total pollution in the state. Correspondingly, the major pollutant is carbon monoxide in the amount of 1.8 million tons per year.

Table 11-1
Types of Air Pollution in Iowa

Index of Pollution	Tons per Year	Percent
Particulate Matter	490,766	15.6
Oxides of Sulfur	255,659	8.8
Carbon Monoxide	1,814,949	59.8
Hydrocarbons	346,167	11.1
Oxides of Nitrogen	179,002	5.7

Source: Iowa Air Pollution Control Commission.

Table 11 - 2
Sources of Air Pollution in Iowa

Categories	Percent
Combustion of Fuel, Stationary Sources	20
Combustion of Fuel, Motor Vehicles	60
Combustion of Refuse	4
Industrial Process Losses	16

Source: Iowa Air Pollution Control Commission.

Because the quality of air resources is not threatened by pollutants to any great extent, the thrust of Iowa's Air Pollution Control Law of 1967 has been to 'maintain purity of air resources consistent with the protection of health, physical property, maximum employment, and the full industrial development of the state.'

To this end, the Iowa Air Pollution Control Commission, in cooperation with other state offices and local and federal government offices established a state-wide air monitoring network in early 1970. This network consists of sampling stations in all cities and towns with public water supplies.

The Iowa Air Pollution Control Commission has also cooperated with other government officials in the operation of air sampling stations as a part of the National Air Sampling Network. There are stations at Des Moines, representing an urban area; at Backbone State Park, representing a rural area; and at Cedar Rapids, Davenport, and Dubuque representing industrial areas. Reports from these areas indicate that air pollution is below significant levels which endanger public health.

In addition, a mobile unit of the State Hygienic Laboratory conducted pollution surveys in the state's seven Standard Metropolitan Statistic Areas in an attempt to provide technical assistance to local officials.

The Iowa Air Pollution Control Commission put into effect in September, 1970, rules and regulations pertaining to particulate emissions from open burning by public and private parties, salvage operations, and agricultural and industrial operations. Enforcement procedures are provided through cease and desist orders and injunctions against violators. Through the granting of variances or temporary permits, polluters are urged to comply with the regulations.

The Iowa Air Pollution Control Commission also proposed in November, 1970, air quality standards to maintain the purity of Iowa's air resources. Standards for particulates, sulfur oxides, carbon monoxide, oxidants, hydrocarbons, fluorides, and radionuclides have been drawn up. Public meetings to discuss these standards have been scheduled for January, 1971, before the final standards are prepared.

In order to assure high quality air resources for the future, the Iowa Air Pollution Control Commission will give special attention to the air pollution control activities in a new federal program which will establish six designated Interstate Air Quality Control Regions in Iowa.

Water Pollution

Water quality standards are difficult to arrive at since the use of the water resource determines the quality appropriate for that use. A body of water, however, may be used for a variety of purposes and this would necessitate several standards. For example, agricultural users may only be concerned with the amount of flow or the inorganic composition of the water while the swimmer is concerned with other qualities such as coliforms or solid wastes. Table 11-3 illustrates the different uses and quality standards appropriate for such uses. The complex relationships among these standards require expert knowledge to formulate a general water pollution control program.

Related to the establishment of a general water pollution control program are questions concerning the costs involved. How much is society willing to pay for clean water? Should the cost of pollution control be borne by the pollutor through effluent charges? If so, how much should be charged? What are the benefits from pollution control programs? Do the benefits exceed the costs? The answers to these questions are necessarily subjective and complicate any attempt to arrive at an objective control program.

Despite all of these obstacles the Iowa Water Pollution Control Commission has made progress in developing standards to maintain and to upgrade the state's water resources.

The Iowa Water Pollution Control Commission has assisted in the training of 975 wastewater treatment plant operators through fiscal 1970. These operators have helped make Iowa the leading state in the nation with regard to waste treatment facilities through their operation of municipal sewage treatment plants.

A water quality surveillance program conducted by the Iowa Water Pollution Control Commission, Iowa Department of Health, and the State Hygienic Laboratory collect quarterly samples of water from 36 locations throughout the state. These samples are analyzed for more than 40 parameters such as metal, biological oxygen demand, nitrogen, phosphates, etc.

The Iowa Water Pollution Control Commission maintains that the number one water quality problem is the siltation of Iowa's streams from agricultural runoff and the resultant pesticide pollution. The increasing use of farm pesticides has resulted in these chemicals attaching themselves to soil particles during the normal siltation process and settling to the bottom of streams. Fish feeding in this part of the stream have become contaminated and unfit for human consumption. Dieldrin, heptachlor, chlordane, and DDT all have been found in some types of fish taken from Iowa streams. The dieldrin concentration of fish taken from streams draining near crop land have exceeded Food and Drug Administration standards by as much as five

Table 11 - 3
Indicators of Water Quality Appropriate
for Particular Use

Quality Indicators Uses	Amount of Flow	Dis- solved Oxygen	In- organics	Coli- form	Tur- bidity	Tem- pera- ture	Solid Wastes	Others
Agriculture	V		V			V		
Industry	V	V	V		V	V		
Municipal	V	V	V	V	V	V	V	
Flood Control	V						V	
Navigation	V		V				V	
Hydropower	V							
Watershed protection	V						V	
Fish and wildlife	V	V	V		V	V	V	
Scenic amenity	V	V			V	V	V	
Sewage dilution and transport	V	V	V		V	V		
Recreation								
Swimming								
Boating	V	V	V	V	V	V	V	
Fishing								

* V Simply means that the quality characteristic is important for the particular use; absence means it is unimportant.

Source: Joseph L. Fisher "The Natural Environment" Social Goals and Indicators for American Society, Volume I, Philadelphia, 1967, The American Academy of Political and Social Science.

times. The solution to this problem is to reduce the use of these persistent pesticides and to improve soil conservation practices to reduce runoff.

Another source of water pollution is the waste from livestock feeding operations. In an attempt to correct this situation the 63rd General Assembly amended the Iowa Water Pollution Control Commission Law to require registration of potential polluters. The Iowa Water Pollution Control Commission in turn established regulations to protect streams from feedlot runoff. Large feedlots are inspected by officials from the State Department of Health and required to register their operations. Training sessions have been held to instruct feedlot owners in proper design to reduce waste runoff.

The increasing industrialization of the state has also added to the water pollution problem. It has been estimated that the meat packing industry alone in Iowa creates a waste load equal to 3.8 million people, one million more than the state's population in 1970. The Iowa Water Pollution Control Commission requires that industries submit effluent samples for analysis. Enforcement action is taken to correct the situation in the event of a violation.

Runoff from solid waste disposal sites has also served as a source of water pollution. However, recent legislation will require all agencies operating waste disposal projects to comply with strict standards by 1975. Permits will not be issued for projects with open dumps and landfills which may serve as a source of water pollution.

Iowa continued to improve upon its record as the leading state in sewage treatment facilities. Only 9 communities, with a combined population of less than 8,000, are without treatment facilities. This amounts to 99.6 percent of the urban population with waste treatment facilities.

In fiscal 1970 the number of contract awards for new or improved waste treatment facilities was 39, compared to 33 for 1969. The value of these contracts amounted to \$7.2 million."

However, the public water picture does not tell the whole story. A survey in Mitchell County in early January 1970 revealed that water samples from 434 private wells were tested and one-half failed to meet U. S. Public Health Service standards for coliform bacteria or nitrate-nitrogen or both. Perhaps our private supplies of water need better monitoring.

Population

The ever-expanding population is viewed with alarm by many persons. John Tait, Extension Sociologist, has summarized relevant comments from many sources along with some alternatives suggested and some questions raised.

[POPULATION and RESOURCES *]

By the year 2000, there will be two people competing for the air, space and food that one person now claims. (Source: Zero Population Growth)

If population growth continues at the present rate, world population will double in 39 years - from $3\frac{1}{2}$ billion to 7 billion. It is unlikely that this doubling can take place. More likely either the birth rate will decline, or lacking such a decline, the death rate will increase because of food shortages and increased pollution of the environment. (Source: Zero Population Growth)

World population is increasing by 2 percent per year; a gain of roughly 2.2 persons per second, almost 200,000 per day and 70 million every year. Man's living numbers have passed the 3.5 billion mark (half born since W.W. II). Unrestricted growth would mean an additional billion people every 4-5 years by the year 2000. (Source: Conservation Fact Sheet)

In the past we have always equated growth with progress. Now we must seriously consider the impact of further increases on the stability of our national institutions and the quality of our already deteriorating environment. Provisions for adequate housing, schools, doctors, mass transit, employment and food pose grave problems. (Source: Conservation Fact Sheet)

You have probably heard the figures quoted by President Nixon in his Message to Congress (July 18, 1969) about the need to curb population growth. At present growth rates, he pointed out, world population will double by the year 2000 and that of the United States will rise 50 percent to 300 million, taxing intolerably the nation's already over-taxed schools, hospitals, transport, water supply, crime control, waste disposal, natural and recreational resources -- if not our very food supply. (Source: Hugh Moore Fund)

Each American adds 120 gallons a day to the local sewage-treatment plant and four pounds of solid wastes to be disposed of and three pounds of air pollutants. Each throws away 250 cans and 135 bottles or jars a year. You wait for some of these people at the golf course, the national park, the local lake, the bus stop or supermarket. (Source: Rep. Morris K. Udall of Arizona)

We Americans, comprising 6 percent of the world's population, use almost 40 percent of the world's resources. Suppose we could magically bring all the people of the world up to our living standards by tomorrow. The world would then consume about 20 times the iron, copper, sulphur, timber, oil and water it consumed in 1969. The rub is that the planet does not have 20 times its present usable store of resources. In many instances, the margins are very slight. (Source: Rep. Morris K. Udall)

*Summarized by John L. Tait, Extension Sociologist.

We face another fundamental American attitude: the myth that growth is always good business. More people have long meant more prosperity, more markets, more opportunities for everyone. If Arizona with nearly two million people is good, the reasoning goes, Arizona with 20 million will be ten times as good. This kind of thinking is dangerous nonsense. Perhaps the world could find space for some kind of existence for 10 or 20 billion people on the earth instead of the 3.5 billion we have today. But what of the quality of that life? And the relationship of these people to the earth that supports them? (Source: Rep. Morris K. Udall)

"The population problem can not only be blamed on the 'prolific' developing nations. Americans, with their high standard of living consume far more than their share of the world's goods. Thus they are among the major depletors." In the U.S. alone urbanization and transportation draw more than a million acres of soil each year from cultivation. Also, by 1980 Americans may well face a water crises. By that year we will want 700 billion gallons of fresh water a year, but only 650 billion will be available. Another critical shortage will come in mineral resources. By 2000 A.D. the U.S. will be depleted of aluminum, copper, cobalt, nickel, chromium, and manganese. Finally, at present, the U.S. produces about one fourth of the world's oil, but consumes about eight times the per capita figure of the free world -- about 900 gallons per year for every man, woman and child in this nation. If all the people of the world began using the same amount of petroleum products used by each American, all the known petroleum reserves in the world would be gone in about six years. (Source: Washington Ecology Center, Washington, D.C.)

In the U.S. an area about the size of Rhode Island is covered by new construction every six months. Meanwhile we discard enough garbage every year to bury Delaware a foot deep. (Source: Population and Resources)

SOME ALTERNATIVES SUGGESTED

BY INDIVIDUALS AND GROUPS

Limiting family size. No family should have more than two children. Any family wanting to care for more than two can adopt as this provides homes for children without adding to the population explosion. (Source: Zero Population Growth)

Providing birth control information. All methods of birth control, including legalized abortion should be made readily available, at no cost in poverty cases. (Source: Zero Population Growth)

Revision of tax laws encouraging large families. Tax laws should be revised to discourage rather than encourage large families. (This legislation would be devised to affect future families, not punish current ones.) (Source: Zero Population Growth)

The American Society of Mammalogists voices its gravest concern to the President of the United States, the United States Congress, the Governors of the 50 states, officials at other levels of government, and to the people themselves, in the hope that they will assume immediately,

their responsibilities to take large-scale, effective, and unprecedented action to curb population growth by promoting birth control, legalizing abortion, reducing tax incentives for natality and by such other acts as may be needed to realize the larger goal of survival of the human species under acceptable conditions. (Source: American Society of Mammalogists)

America, voluntarily and openly, must face the fact that many of our tensions and failures are due to a spiraling population growth. Every family with two or more children would make a personal, voluntary decision to have no more. Every couple with one child or none would agree to stop with the second. (Source: Rep. Morris K. Udall)

QUESTIONS

What impact will future population growth have on the quality of American life? Are population stabilization and redistribution desirable? The Commission on Population Growth and the American Future, appointed by Congress at President Nixon's request, is examining these questions and in 1972 will present recommendations for a national population policy. The proposed policy will not be an end in itself but rather a means to the achievement of other social goals desirable in their own right. Such goals include improving the social-economic conditions of disadvantaged minorities and easing the pressures on our resources and environment, our health, and educational facilities, and our cities.

The commission is examining in detail the environmental, economic, political, and social implications of population growth and distribution. These questions are being asked:

- . Will population growth magnify the problems arising from the way we use our resources and technology?
- . How will we meet the increased demands for health, education, housing, transportation, and welfare services?
- . How will population changes affect the total economy? The size and composition of the labor force? Individual industries and business?
- . How will population changes affect the representational, policy-making and service aspects of government?
- . What are the social and psychological implications of population density?

(Source: Enid E. Wortman, Extension Consumer and Management Specialist, Iowa State University)]

Technology

A group of scientists in their study of pollution have concluded that pollution is not due to population per se, nor to increasing levels of consumption in the "affluent society", but rather to particular qualities of technological processes man has adopted to increase productivity without consideration for their environmental impact. The big factor appeared to be certain sorts of production. The consumption of plastics which

have various adverse environmental impacts, rocketed in the 1946-68 period by 1,024 percent. The use of mercury in some major industrial processes jumped 2,150 percent. Consumption of synthetic organic chemicals went up 495 percent and the use of nitrogen fertilizer 534 percent, detergent 300 percent, and electric power (a big air pollution source) 276 percent.

Closer to home are the many products of technology in our daily living--detergents, electricity and other fuels, pesticides and herbicides, containers of pre-packaged products, electronic noise producing devices, cars, electrical appliances and many other appurtenances of modern living. Many feel that minimum or no use should be made of many of these.

Not the least problem in control of environmental quality is the cost. Consider adding to the cost of a new car the cost of disposing of it. Or an added 10% to the price of products of mills and factories to pay for the cost of recycling the chemicals used in processing.

Also involved is the cost in comfort and prestige of giving up powerful cars and other items which contribute a disproportionate share of pollution to the environment.

Research shows a complexity of relationships which are not entirely clear in many cases. This is confusing to many persons who do not clearly understand the problems and the issues involved and do not know what courses of action are open to them.

HOUSING

Winston Churchill said: "We shape our dwellings, and afterwards, our dwellings shape us."

"Housing for people, if it is achieving its objective, provides not only shelter from the elements, but also an environment for the optimum development for those who live in it." This statement in Iowa Focus gives us a broader perspective of housing than many people see. As extension educators strive to develop meaningful programs, they must view housing from the standpoint of its role and relationship to the individual families and communities in which they exist as well as an individual unit.

The importance of housing the population has long been recognized. The 1949 Congressional Housing Act which set a goal of "a decent home and a suitable living environment for every American family," slips farther behind all the time. Now since 1968, a ten year goal has been established by the Department of Housing and Urban Development to have 26.5 million housing units built new or rehabilitated with public help.

What are some of the factors which will help to determine program needs in Iowa? Just what is our housing situation? The population and distribution is one item which can give some insights. While the 2.4% population increase might suggest heavy out-migration, one cannot assume a lessening of need for housing in Iowa. What one must look at are areas of growth which tend to show the population of Iowa clustering around "growth centers" or places where jobs are available. These small "bedroom communities" are experiencing greater housing needs than ever to meet population demands. Not only are people migrating from the farms to the population areas, but many people in urban areas are moving out to the fringes. While dwellings are needed to house these people, additional strain is placed on community utilities, protection agencies, educational facilities and other community services. In some areas, minority groups may be branching out, thus bringing human relation problems.

A disproportionate part of the nation's sub-standard housing is found in rural America; percentages were nearly twice that which is in the metropolitan areas. Some of the figures available from the 1970 census show that at least 11.6% of the housing in rural Iowa fails to meet decent standards, compared to 11.3% in Iowa's metropolitan areas. It is estimated that perhaps 60% of this housing is occupied by families having incomes below the poverty level. Poor housing in rural areas is less visible, so gets less attention. Rural residents often find it difficult to locate necessary financing for housing needs. Farmers Home Administration with its special funding programs is an alternative source of credit in rural areas and communities under 10,000.

Prepared by Housing Committee: Naomi Shank, Chm., and Sue Stone.

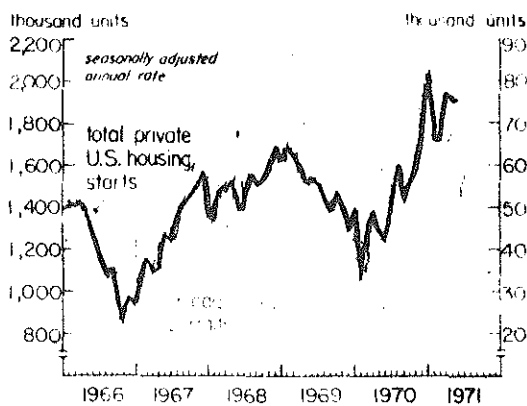
There is a lack of smaller, comfortable, carefree, flexible and hazard-free living units for independent living for those Iowans over 65 years who head 22% of all households. Eighty-four percent of these households contain one or two persons. The number of older women is greater than older men. Due to fewer members in elderly households, less space is required than for all households which average more numbers. It is difficult for the elderly to find such housing in the small cities and towns and near their former residences where they indicate a preference to live. Much has been done in recent years to improve the housing of the elderly in Iowa, both for independent and institutional living, but much more remains to be done. The 1970 census indicates 96% live independently in housing units, 4% in nursing homes and institutions.

Just what is ahead for housing in Iowa? A statement in the Economic Index published by the Iowa Development Commission about the Iowa construction situation gives us one prediction. "The most volatile construction market is in the residential classification. Decreases in mortgage interest rates have resulted in sharply increased buyer demands for homes. There is also a definite trend developing in urban areas toward apartment living, particularly among the exploding segment of our population - the young marrieds. This should assure healthy boosts in the construction of multi-family units. Federal programs to stimulate the construction of housing should result in the continued growth of this segment of the construction industry in Iowa and elsewhere." At the same time a trade organization has predicted a 21% increase in residential construction in 1971 for the region including Iowa. One cannot be assured that the money situation will continue to be a favorable force in increased construction.

Figure 1

From Business Conditions
May, 1971

**Residential housing starts
in second year of rapid climb**



SOURCE: Department of Commerce and
Fidelity Federal Savings & Loan

As more money is now available for new construction, as well as home improvements, from the many government programs, public and private lending agencies - residential housing construction is predicted by some to double in the 1970's.

Housing in the 70's will enter the industrial revolution - the result will be a wide range of housing alternatives at various price levels. Builders are becoming manufacturers, and manufacturers builders. This at a time when nationwide it is estimated 2½ to 3 million new housing units

a year will be needed to take care of the regular replacements and the 14 million new households expected by 1980. Shifts of population from farm to town, and city to rural areas has brought about a need to put housing where people want it, when they need it. It is estimated that 20% of our population move every year.

Always families who have been building, remodeling, repairing, or buying housing have faced many decisions. It's the largest single investment most families ever make. Mostly these housing decisions have dealt with personalized plans, conventional methods and materials. But now, in the 1970's, they will be confronted with decisions relating to methods and materials that are less conventional. For those impatient to obtain a new house it will now be possible to contract an entire house that can be trucked to the site, erected on a completed foundation and will be ready for occupancy in a matter of days rather than months.

Industrialized housing will have a major impact on housing publicity in the 1970's. However, most house manufacturers offer a limited number of choices which will greatly reduce the number of decisions the house buyer will have to make. No dramatic cost advantages are expected. Higher overhead and transportation cost will balance any savings achieved by volume purchasing or efficient use of labor.

Iowans, like other Americans, are becoming more mobile - no longer do we live where and as our grandparents did. Furthermore, today's children are not going to live as their grandparents, for they have been born in a new age of mass-media communications, electronics, rapid changes, reported trips to the moon and the beginning of this industrialized housing revolution of the 1970's. They are going to be more willing to try something new and different. For example, they are acquiring second homes for various uses such as: vacation and leisure time activities - especially at the many new lake and dam locations, for retirement, for young marrieds in the family, for part or full time labor, and for temporary living.

Housing patterns have been changing nationally as well. In 1959, 81% of the housing starts were single family homes. Only 19% were structures with two or more units. The proportion of multi-family structures reached 45% in 1969 and is at about that level today. Another change has been the increased use of mobile homes. Mobile home shipments are expected to be around 400,000 for 1971 or about the same as the past two years. It is reported that 85% of these are used as permanent residences and 60% are never moved from an original site.

The rate of turnover is not reported but is felt by many to be quite high. Graphically the changes in types of housing can be seen here. (See illustration on next page)

Figure 2

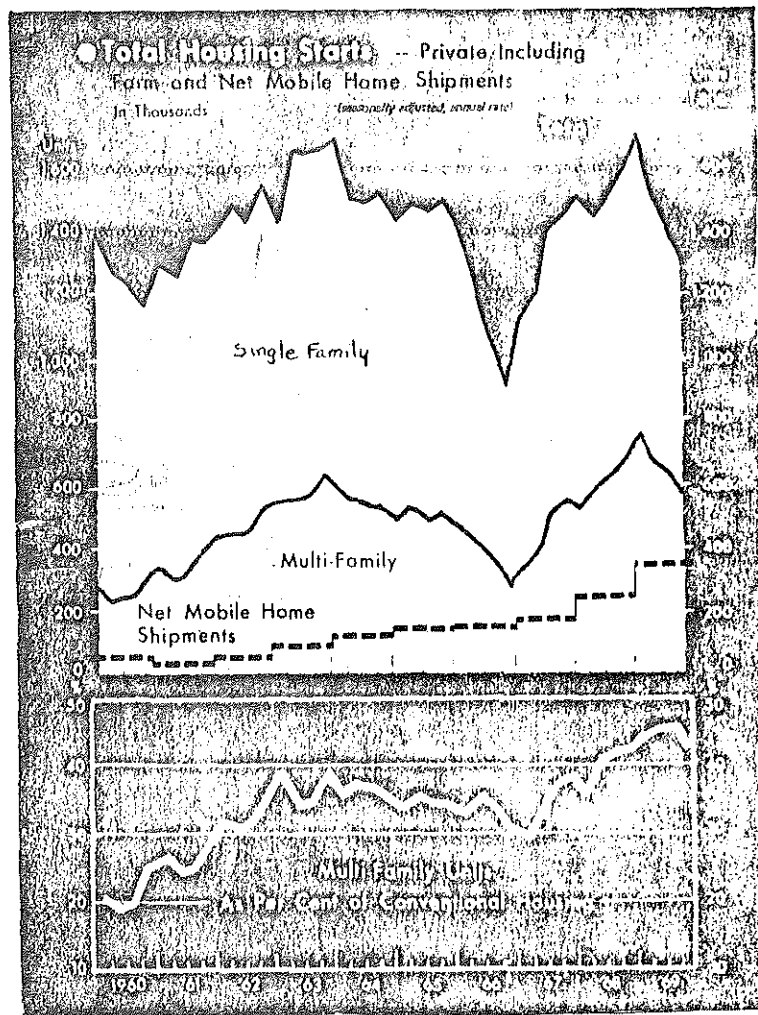
A mobile home is one of the choices families have from the industrialized housing system. It is especially adaptable for instant and short term housing - especially for young marrieds, migrants and retirees. Since 1962 the 12 foot wide are produced with more house-type features such as bedrooms, bathrooms, modern family-size kitchens, thermostatically controlled heating and cooling systems, insulation and complete plumbing. Considerable effort is being made to increase the house width to 14 feet.

Those who qualify can now purchase a mobile home through a government program or a lending agency. In 1969, 48% of all new single family home sales were mobile homes; 94% of all single family homes under \$15,000 were mobile homes.

"Road Maps of Industry"
No. 1639



Residential Construction in the 1960's



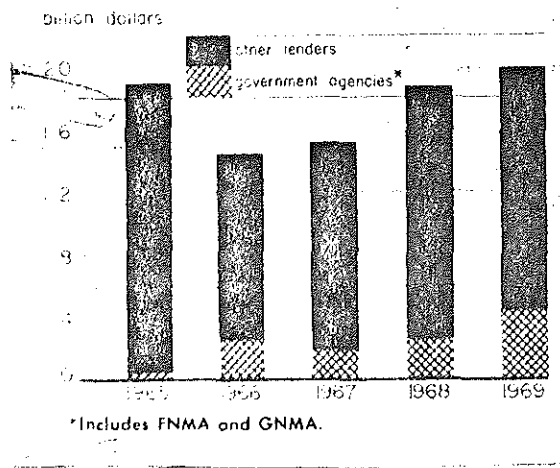
The Iowa Department of Public Safety records show that between 1962 and 1970 registered mobile homes in Iowa almost doubled, from about 23,000 to 48,720. Federal Housing Authority and Veterans Administration require that all mobile homes financed with guaranteed loans meet the Mobile Home Manufacturers Association's voluntary standard A119.1. This code covers body, plumbing, heating and electrical systems. By early 1971, 2.8 states had laws which permit only homes which meet the MHMA standard A119.1, to be sold or shipped into their states. Iowa is not one of these states. Unlike the on-site construction of homes, mobile homes manufacturing is not regulated by either state or local governments in Iowa.

Conventional methods for on-site building will be continued with available local craftsmen who will more and more utilize fabricated components. Some builders suggest that with the use of new methods and materials, in many Iowa communities on-site stick building will continue to produce the least expensive and most flexible houses on a limited scale.

Site planning and development has always been an important step in home building. Too few new builders and developers recognize this or if there is a plan, fail to budget enough for the completion of the plan. Much can be done towards public acceptance of the varied housing choices, if more emphasis is given to site planning and development.

Figure 3

Federal agency share in residential financing much larger in 1969 than in 1966



← "Business Conditions," March 1970

The federal governments role in housing has continued to increase each year.

Government and private industry have developed many arrangements by which the below-middle income town or farm families may upgrade their housing through renting, owning or improving what they own. They also offer reduced interest rates and other subsidies for construction of rental units for low income families. It has been estimated that 43% of new housing started in 1970 to 1971 will be built under one of the government programs.

Not all community leaders, public officials and consumers in need are aware of the vast array of opportunities to be considered, especially through the Federal Housing Administration, HUD, and Farmers Home Administration. Some of the most publicized programs in the early 70's are HUD's Operation Break Through and Sections 235 and 236 of the Housing and Urban Development Act of 1970.

Most applications for assistance under the government programs are made by individuals wishing to rent, buy or build. However, non-profit organizations or local government units also may apply for assistance in providing housing to low or medium income groups.

These government loans have become increasingly important in securing housing for low income groups in both rural and urban areas. However, as reports become more numerous on the high property damage in low income subsidized

housing, whether owned or rented, the results endanger consumer public support. The majority of low income families who become home owners or renters, need help in preparing for the responsibilities of caring for the home unit. Lack of extra money after the initial move, to an unstable work record, lack of education and training, as well as previous substandard and sparsely furnished dwellings, make it necessary to provide new owners and renters with learning opportunities that will help them to live successfully in their new dwellings.

What about the cost of housing? According to the National Industrial Conference Board, the median sales price of housing has increased at a rate of 6.1% annually since 1963. HUD reported an increase in media sales value from \$11,900 to \$17,000 from April, 1960 - April, 1970 which was a 43% increase. Four times as many houses valued at \$35,000 or more were reported in 1970 than 10 years before. The number under \$15,000 declined by 4.2 million. Increases in labor, materials and land costs have produced this result. High cost of credit money for building housing units is expected to continue.

Not all of the increase in median sales value can be attributed to rise in prices. Usable floor space in residences has increased over 21% in the last decade. This gradual rise in size went along with the trend in upgrading of consumer purchase. The Federal Reserve Land Bank of Chicago reported a reverse of this trend in 1970 and predicted buyers would be more willing to accept smaller, less elaborate units.

While the costs of home ownership rose in the 1960 to 1970 period, rental rates also increased. HUD reported a rise in monthly median rent from \$58 to \$90 which represented a 55% increase. Rental rates were highest for the under \$125 range (91%) and lowest for the over \$200 (53%). The rise of rents, 4% in 1970 - 1% in early 1971, is due largely to the higher cost for maintenance, repairs, services, property taxes and property insurance.

Families pay varying proportions of their income toward housing and household operations. Three hundred and seventeen Iowa farm families who are participants with an Iowa State University record keeping program reported 20% of their living expenditures went toward house operations, both repairs and new.

A 1966 study of OAA and ADC grant recipients in Des Moines indicated that more than 60% paid in excess of 20% of their income for housing. It is generally recognized that the lower the income of a family the greater percentage of that income goes for housing.

When one reviews the increase in the Consumer Price Index related to housing as reported in the Family Economics Review, it is easy to see why housing expenditures have become so important, especially to those on low and fixed incomes.

Consumer Price Index (1967 = 100)

	All Items	Property Taxes	Property Ownership	Total Maintenance and Repairs	Rent
1965	94.5	91.5	89.8	91.3	96.9
1970	116.3	121.0	113.4	124.0	110.1
Jan. 1971	119.2	126.9	114.5	128.8	112.9

Areas of taxes, insurance, maintenance and repairs have risen steadily and command a greater share of the household dollar. This is one contributing factor to the need for help in maintenance and upkeep as well as rehabilitation.

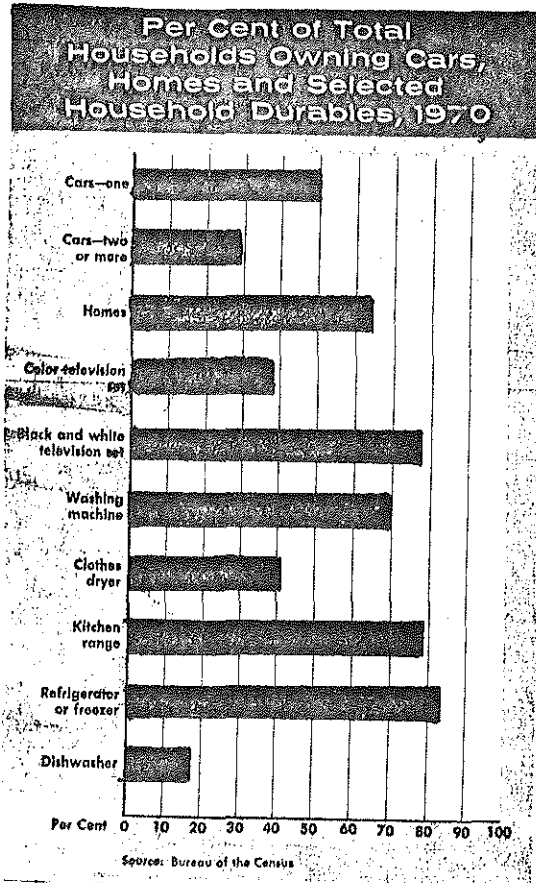
Due to the higher cost of home ownership, both rural and urban home owners with good old or too small houses, will be considering instead an addition, remodeling or both to gain space and conveniences in the old house instead of the new home they had hoped to obtain. Thus maintenance, repair, services and remodeling of houses are major concerns of home owners of all ages and at all income levels. A recent study shows that these, along with taxes and insurance costs are top priority problems especially among the retired or those on fixed incomes, who want to live independently.

Iowa rural families are looking critically at their housing to see what can be done to improve the house and working conditions, so as to better control the use of family resources. Since most own their homes now, they must seek ways to improve the living and working conditions in their present location. Special problems are created because many drive long distances to their work which is often on an irregular schedule. Few of these families have had experience in home planning, building or buying a house. The increased cost of building or remodeling appears to be sparking an interest of these and others to do more careful and detailed advance planning and do much of the work on their own.

While planning help is needed for all groups, special attention should be given to people with physical disabilities both within their individual homes and within the community. The physically limited and elderly encounter too many architectural barriers in both public and private housing to permit them to be self-sufficient. The kind and quality of life a person can enjoy is many times determined by the individual's housing accommodations. Public awareness of the problem can help to alleviate some of the barriers which exist.

The area of interior aesthetics, household furnishing and equipment is also an important part of housing. An increasing number of households own a variety of durable goods.

Figure 4



Husbands as well as wives are seeking more automation in the home to help the homemaker reduce her work load - also to replace worn-out, broken down or obsolescent equipment. New attitudes towards women working outside the home and husbands sharing in domestic affairs and care of children have changed "housing luxuries" of the 1950's into necessities for the 1970's.

Some of this increased interest in household goods can be seen to the left. The Census Bureau's Consumer Buying Survey indicated ownership of color television sets, clothes dryers, and dishwashers increased sharply in the 1960's. From 1960-70 a 20.4% increase for color televisions, a 23.4% increase of clothes dryers and a 13.3% increase in dishwashers was noted. The lower ownership rate for clothes washers and refrigerators was attributed to the fact that renters are less likely to own these items themselves.

"Finance Facts"
December, 1970

Although some economists have predicted a decrease in the demand for major purchases of these types in the current economy, it should be noted that manufacturers continue to expand their lines with new and different models.

Incomes are higher. New technical developments are occurring. Advertising is often misleading. Guides for making decisions based on well known brands, tradition or past experience are inadequate. All of these factors make choosing goods and services for satisfaction of the family while using their furnishing resources wisely, a much more difficult task. In addition, new materials and techniques will require the adoption of new use and care practices.

With the formation of new families and the increased home building, purchases of household furnishings and equipment will continue to be a major concern. At the same time, the pressures of inflation, rapidly rising operational and fixed costs are making it difficult for household utilities to hold the line on prices to the consumer.

With the increased building of dwellings, introduction of housing other than single family units, and shifting of population as well as other things, Iowa communities are faced with new challenges. Community, county, state and national governing bodies will continue to be a major force in shaping our housing environment. Changes are needed and anticipated in zoning laws and building codes. In March 1970, 59 Iowa counties had zoning commissions and other counties are in the process of organizing. This is especially important for counties surrounding urban areas and the newly developing recreational areas.

Seven states have passed industrialized housing laws - others are considering them, which stipulate that housing produced and inspected in a factory shall be accepted everywhere in the state; some states reciprocate. By mid-year 1971, Iowa had 12 manufacturers whose homes are acceptable to the Federal Housing Administration for qualified buyers. Agreements are now being signed by major labor unions, such as Carpenters, Plumbers, Electricians, and Laborers to produce housing in factories and assemble housing on building sites.

Major legislation related to a state building code for Iowa was introduced during the 1971 legislative session. Although passage was not completed, it is expected to be reintroduced in the next session. Such legislation would help to make building codes more uniform which in turn would have an impact on the manufactured home market.

To meet the housing demand in the 70's, production must be improved, total labor used more effectively, weather delays overcome in construction, and those restrictions overcome caused by code variations and local land use controls.

Safe and comfortable living for the young and old needs to be part of the design for all housing units and the surrounding environment. With the lengthened work day, irregular hours of family members and increased emphasis on leisure time opportunities, it is important that individuals and families be alerted to their safety responsibilities.

Rural Iowa families are being awakened too rudely to the fact that they can no longer follow the traditional neighborly "unlocked" doors policy in their homes. Rural men and women of all ages must be alerted to security needs and procedures for their own and family members' safety; this is true whether they are at home or away from home.

Human factors play a critical role in home and yard accidents; these factors reflect the individual's life situation, his problems, personal limitations, emotions and the way he reacts to his environment. Most personal accidents for all age groups occur in the home area.

The use of chemicals in the home and yard has expanded at a fast pace to maintain modern living standards, beauty, sanitation, comfort and released time from housekeeping tasks. Too few families have kept up in terms of studying how to use and store these chemicals wisely and safely. All age groups are vulnerable to the effects of chemical misuses. The average home has at least 40 containers of toxic compounds. Of the approximately 500,000 children who poison themselves each year, 95% of them consume a poison while under the supervision of an adult. Ninety percent of the poisonings occur in the "under five" age bracket.

One of the most lethal pieces of home equipment is the power lawn mower. About 70% of the injuries to operators and innocent by-standers are lacerations, amputations and fractures that result from the cutting action of the whirling blade. The remaining injuries are credited to the missile ejections of wire, glass, stones and debris that can puncture vital parts of the body.

In 1969, during the first two weeks of the open period on "grass grooming" - 418 injuries were credited to power mowers - topping the list of products causing injury.

The removal of all types of wet and dry trash from the homes in rural and non-incorporated areas contribute heavily to the general pollution. This becomes an important factor in planning the total home environment.

PERSONAL AND INTERPERSONAL DEVELOPMENT

In this time of unprecedented change, meeting and dealing with the stress and strains on individuals, families, and institutions is the challenge every person faces. To meet the challenge, the individual, family, or institution develops a collection of abilities and means to cope with the present and future. These abilities grow and develop through cultivation of perception, empathy, autonomy, and creativity within the individual person.

Through development of perception, a person struggles to attain conscious insight, awareness, and understanding of himself and others so that he can interact meaningfully. Through cultivation of empathy, a person develops the capacity to appropriately interpret another's feelings and ideas. To be autonomous, an individual exists independently of others as he is governed by his own needs, wants, and desires rather than depending on others for control, values, and standards. Through creativity, a person introduces innovative behavior and new perspectives in his life.

Therefore, the primary goal of personal and interpersonal development is to bring about in individuals, families, and institutions competencies that will enable them to function in the existing and evolving society in effective and satisfying ways.

Forces that challenge the early '70's:

- | | |
|-----------------|------------------------------|
| - Communication | - Aging |
| - Child Care | - Cultural Arts, Aesthetics, |
| - Youth Culture | and Self-Expression |

I Communication

The seventies will see individuals, families, and institutions seeking to improve communication. People will struggle to listen sensitively as they seek meaning in husband-wife, mother-father, parent-child, and person-person relationships.

Communication breaks down because at least one person:

1. is insensitive to the other's emotional needs
2. judges without listening
3. does not listen to what he personally, is saying to another either verbally or non-verbally

Prepared by the Personal and Interpersonal Committee: Carol Anderson, Chairman, Max Exner, Gordon Geddes, Elinore Klotz, Nancy Meredith, Kay Munsen.

4. "turns off" the receiving mechanism
5. does not trust the other
6. fails to communicate genuine attitudes and meaning.

What clues in society indicate communication breakdown?

1. Suicide rates in Iowa have fluctuated since 1945, but have increased since 1968. The suicide rate for college students is about 15 per 100,000 each year, compared with 11 per 100,000 for the population at large. (Figure 1)
2. Age at first marriage has declined so that in 1969 for first marriage, the median age of the bride was 20.5 years and for the groom 22.3 years. (Table 1)
3. The Iowa divorce rate reflects an increase moving from 2.3 divorces per 1,000 population in 1968 to 2.5 in 1969. The 1969 rate was the highest recorded in Iowa since 1947. (Table 2, 3 and 4)
4. Of all Iowa divorces in 1969, 29.3 percent terminated marriages of less than seven years. (Table 5)
5. During 1969, 9,614 children were affected by divorce, for an average of 1.3 children per divorce. The number of children involved in divorce has increased more rapidly than the number of divorces granted. (Table 6)
6. Median ages of parents at birth of child for Iowa residents were 24.4 years for mothers and 27.0 years for fathers. Of the total births, 14.6 percent were to mothers under 20 years of age and 54.2 percent were to mothers under the age of 25. (Tables 7 and 8)
7. Illegitimate births for mothers under 15 declined slightly in 1969. Approximately one out of five births to mothers under 20 were classified as illegitimate. (Table 9)
8. The majority of Iowa juvenile training school residents are 16 years of age, have completed the 9th or 10th grade in school, have normal intelligence, are white, and come from homes where both parents are present. (Tables 10-18)
9. The biggest single cause of death among children in the United States is an insidious disease called child abuse.

This situation indicates the need to:

1. Improve interpersonal communications between husband-wife, mother-father, parent-child, and person-person.
2. Prepare for and experience meaningful interpersonal communications from birth to death.

Figure 1

Suicide Death Rate Iowa Residents 1945-1969

Rates Per 100,000 Population

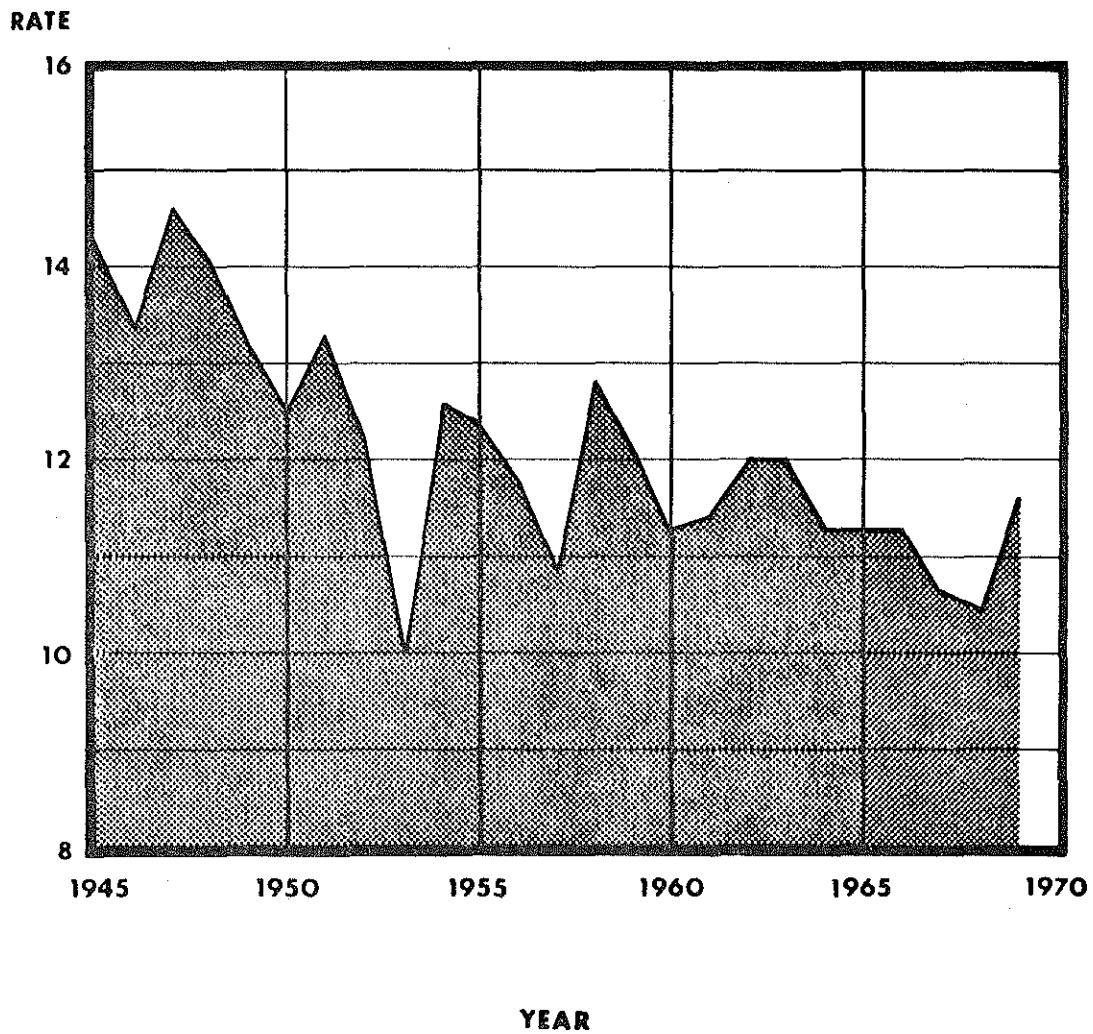


TABLE 1

IOWA	AGE AT MARRIAGE				1969
AGE	BRIDE		GROOM		
	NUMBER	PERCENT	NUMBER	PERCENT	
TOTAL MARRIAGES					
Total	24,686	100.0	24,686	100.0	
Under 15	19	0.1	0	0.0	
15	131	0.5	5	0.0	
16	664	2.7	54	0.2	
17	1,427	5.8	368	1.5	
18	3,600	14.6	1,498	6.1	
19	3,752	15.2	2,532	10.3	
15-19	9,574	38.8	4,457	18.1	
20-24	10,703	43.4	13,045	52.8	
25-29	1,643	6.7	3,419	13.8	
30-34	647	2.6	1,034	4.2	
35-39	421	1.7	615	2.5	
40-44	399	1.6	508	2.1	
45-49	352	1.4	396	1.6	
50 & over	922	3.7	1,209	4.9	
Not stated	6	0.0	3	0.0	
Legal	0	0.0	0	0.0	
FIRST MARRIAGES					
Total	20,554	100.0	20,365	100.0	
Under 20	9,371	45.6	4,379	21.5	
20-24	9,891	48.1	12,403	60.9	
25-29	937	4.6	2,646	13.0	
30-34	185	0.9	487	2.4	
35-39	56	0.3	192	0.9	
40-44	35	0.2	106	0.5	
45-49	25	0.1	51	0.3	
50 & over	51	0.2	99	0.5	
Not stated	3	0.0	2	0.0	
Legal	0	0.0	0	0.0	
PREVIOUS MARRIAGES*					
Total	4,132	100.0	4,321	100.0	
Under 20	222	5.4	78	1.8	
20-24	812	19.7	642	14.9	
25-29	706	17.1	773	17.9	
30-34	462	11.2	547	12.7	
35-39	365	8.8	423	9.8	
40-44	364	8.8	402	9.3	
45-49	327	7.9	345	8.0	
50 & over	871	21.1	1,110	25.7	
Not stated	3	0.1	1	0.0	
Legal	0	0.0	0	0.0	

* Includes not stated marriage order.

TABLE 2

Marriage and Divorce Rates

Iowa 1930-1969

Year	Marriages		Divorces	
	Number	Rate*	Number	Rate*
1930	20,642	8.3	4,319	1.8
1931	14,190	5.7	4,117	1.7
1932	8,014	3.2	3,354	1.4
1933	16,018	6.4	3,656	1.5
1934	20,240	8.1	4,344	1.7
1935	20,968	8.4	4,392	1.8
1936	21,780	8.7	4,679	1.9
1937	25,993	10.3	4,728	1.9
1938	31,964	12.7	4,471	1.8
1939	36,862	14.6	4,645	1.8
1940	48,352	19.0	4,739	1.9
1941	25,936	10.2	5,098	2.0
1942	13,085	5.1	4,708	1.8
1943	13,531	5.3	5,220	2.0
1944	17,121	6.7	6,089	2.4
1945	21,264	8.2	7,617	3.0
1946	32,434	12.5	9,800	3.8
1947	30,002	11.5	6,682	2.6
1948	28,585	11.0	5,567	2.1
1949	25,515	9.8	5,442	2.1
1950	27,603**	10.5	5,367**	2.0
1951	24,301	9.2	5,193	2.0
1952	22,600	8.5	5,553	2.1
1953	23,180	8.7	5,191	1.9
1954	23,228	8.7	5,173	1.9
1955	24,493	9.1	5,138	1.9
1956	25,270	9.3	4,811	1.8
1957	23,840	8.8	4,091	1.5
1958	23,958	8.8	4,241	1.6
1959	25,116	9.1	4,549	1.7
1960	24,774	9.0	4,518	1.6
1961	21,962	7.9	4,731	1.7
1962	18,981	6.8	4,697	1.7
1963	19,487	7.0	4,943	1.8
1964	20,232	7.3	5,037	1.8
1965	20,247	7.3	5,208	1.9
1966	21,130	7.7	5,532	2.0
1967	22,396	8.1	6,018	2.2
1968	24,697	8.9	6,464	2.3
1969	24,686	9.0	6,923	2.5

* Rate per 1,000 population.

** Annual determinations of U.S. Census Bureau prior to 1950.

TABLE 3
AGE AT DIVORCE
TOTAL DIVORCE

136

IOWA 1969				
	HUSBAND		WIFE	
	NUMBER	PERCENT	NUMBER	PERCENT
Total	6,923		6,923	
Not stated	16		18	
	6,907	100.0	6,905	100.0
Under 15	---	0.0	---	0.0
15	---	0.0	2	0.0
16	1	0.0	17	0.2
17	7	0.1	51	0.7
18	28	0.4	134	1.9
19	93	1.3	258	3.7
20	148	2.1	348	5.0
21	288	4.2	441	6.4
22	385	5.6	483	7.0
23	315	4.6	388	5.6
24	331	4.8	357	5.2
25	345	5.0	331	4.8
26	359	5.2	323	4.7
27	277	4.0	251	3.6
28	304	4.4	254	3.7
29	279	4.0	245	3.5
30	273	4.0	219	3.2
31	208	3.0	184	2.7
32	216	3.1	191	2.8
33	191	2.8	160	2.3
34	184	2.7	161	2.3
35	176	2.5	156	2.3
36	149	2.2	140	2.0
37	165	2.4	129	1.9
38	156	2.3	147	2.1
39	131	1.9	114	1.7
40	153	2.2	139	2.0
41	162	2.3	122	1.8
42	124	1.8	102	1.5
43	111	1.6	87	1.3
44	124	1.8	101	1.5
45	115	1.7	94	1.4
46	116	1.7	90	1.3
47	103	1.5	76	1.1
48	85	1.2	76	1.1
49	71	1.0	57	0.8
50 and over	734	10.6	477	6.9

TABLE 4
AGE AT DIVORCE
IOWA 1969

137

AGE	FIRST MARRIAGE				REMAINDER			
	HUSBAND		WIFE		HUSBAND		WIFE	
	NUMBER	PERCENT	NUMBER	PERCENT	NUMBER	PERCENT	NUMBER	PERCENT
Total	4,960		5,060		1,936		1,828	
Not stated	7		11		6		5	
	4,953	100.0	5,049	100.0	1,930	100.0	1,823	100.0
15	---	0.0	2	0.0	---	0.0	---	0.0
16	1	0.0	16	0.3	---	0.0	1	0.1
17	7	0.1	50	1.0	---	0.0	1	0.1
18	28	0.6	131	2.6	---	0.0	3	0.2
19	91	1.8	249	4.9	2	0.1	7	0.4
20	147	3.0	329	6.5	1	0.1	19	1.0
21	275	5.6	396	7.8	13	0.7	42	2.3
22	360	7.3	424	8.4	24	1.2	55	3.0
23	282	5.7	330	6.5	32	1.7	57	3.1
24	291	5.9	298	5.9	39	2.0	58	3.2
25	307	6.2	278	5.5	38	2.0	51	2.8
26	305	6.2	256	5.1	53	2.7	67	3.7
27	223	4.5	192	3.8	54	2.8	59	3.2
28	224	4.5	185	3.7	80	4.1	69	3.8
29	205	4.1	183	3.6	70	3.6	60	3.3
30	200	4.0	155	3.1	71	3.7	64	3.5
31	157	3.2	127	2.5	51	2.6	57	3.1
32	143	2.9	122	2.4	72	3.7	68	3.7
33	130	2.6	104	2.1	60	3.1	53	2.9
34	116	2.3	105	2.1	67	3.5	56	3.1
35	116	2.3	99	2.0	59	3.1	57	3.1
36	94	1.9	87	1.7	55	2.8	53	2.9
37	105	2.1	79	1.6	59	3.1	50	2.7
38	96	1.9	95	1.9	60	3.1	51	2.8
39	76	1.5	68	1.3	55	2.8	46	2.5
40	96	1.9	72	1.4	57	3.0	66	3.6
41	102	2.1	70	1.4	60	3.1	52	2.9
42	60	1.2	56	1.1	62	3.2	44	2.4
43	66	1.3	49	1.0	43	2.2	36	2.0
44	71	1.4	51	1.0	53	2.7	49	2.7
45	67	1.4	59	1.2	47	2.4	33	1.8
46	65	1.3	55	1.1	50	2.6	35	1.9
47	63	1.3	38	0.8	40	2.1	38	2.1
48	40	0.8	34	0.7	43	2.2	41	2.2
49	35	0.7	26	0.5	36	1.9	31	1.7
50 and over	309	6.2	179	3.5	424	22.0	294	16.1

TABLE 5
DIVORCE, ANNULMENT AND SEPARATE MAINTENANCE
DURATION OF MARRIAGE
IOWA 1969

138

DURATION IN YEARS*	DIVORCES	ANNULMENTS	SEPARATE MAINTENANCE
Total	6,923	72	35
Not stated	26	--	1
	6,897	72	34
Under 1	486	42	--
1	809	10	2
2	734	8	3
3	627	5	2
4	511	--	--
5	402	1	3
6	353	2	--
7	280	1	2
8	286	--	2
9	249	1	3
10	220	--	--
11	181	--	--
12	155	--	1
13	138	--	2
14	145	--	1
15	124	--	1
16	103	1	--
17	106	--	--
18	112	--	1
19	95	--	1
20	86	1	1
21	104	--	--
22	109	--	2
23	88	--	--
24	52	--	--
25	33	--	1
26	43	--	1
27	50	--	1
28	52	--	--
29	29	--	1
30	29	--	--
31	17	--	1
32	26	--	1
33	13	--	--
34	8	--	--
35	8	--	--
36	7	--	--
37	3	--	--
38	3	--	--
39	6	--	--
40 and over	15	--	1

Duration of one year includes 12 through 23 months, etc.

TABLE 6
NUMBER OF CHILDREN UNDER EIGHTEEN AFFECTED BY DIVORCE
IOWA 1969

NUMBER OF CHILDREN	TOTAL DIVORCES		PRIMARY MARRIAGES		REMAINDER	
	NUMBER	PERCENT	NUMBER	PERCENT	NUMBER	PERCENT
Total	6,923		4,396		2,527	
Not stated	184		56		128	
	6,739	100.0	4,340	100.0	2,399	100.0
None	2,345	34.8	1,128	26.0	1,217	50.7
1	1,705	25.3	1,176	27.1	529	22.1
2	1,284	19.1	942	21.7	342	14.3
3	764	11.3	590	13.6	174	7.3
4	333	4.9	251	5.8	82	3.4
5 or more	308	4.6	253	5.8	55	2.3
Total children affected	9,614		7,242		2,372	

Summary of Vital Statistics, Iowa Residence*, 1969

EVENT	TOTAL
Live Births	47,235
Sex	
Male	24,303
Female	22,931
Undetermined	1
Color	
White	45,976
Negro	816
Indian	134
Yellow	55
Mexican	162
Other & NS	92
Illegitimate Live Births	3,065
Fetal Deaths	482
Deaths	29,345
Sex	
Male	16,395
Female	12,949
Undetermined	1
Color	
White	28,973
Negro	330
Indian	12
Yellow	0
Mexican	23
Other & NS	7
Nativity	
Native	27,481
Foreign	1,795
Unknown	69
Marital Status	
Single	4,443
Married	13,700
Widowed	10,138
Divorced	1,008
Unknown	56
Marriages*	24,686
Divorces*	6,923
Annulments*	72
Separate Maintenance*	35

* Social Categories from Occurrence Data.

TABLE 8
AGE OF PARENTS
RESIDENT LIVE BIRTHS
IOWA 1969

A G E	F A T H E R		M O T H E R	
	NUMBER	PERCENT	NUMBER	PERCENT
TOTAL	47,235		47,235	
NOT STATED	2,973		2	
	44,262	100.0	47,233	100.0
11	—	0.0	—	0.0
12	—	0.0	1	0.0
13	—	0.0	6	0.0
14	1	0.0	30	0.1
15	—	0.0	184	0.4
16	27	0.1	509	1.1
17	177	0.4	1,198	2.5
18	688	1.6	2,000	4.2
19	1,396	3.2	2,951	6.2
20	1,840	4.2	3,586	7.6
21	2,275	5.1	3,866	8.2
22	3,069	6.9	4,387	9.3
23	2,821	6.4	3,498	7.4
24	3,070	6.9	3,368	7.1
25	3,353	7.6	3,257	6.9
26	3,274	7.4	3,076	6.5
27	2,944	6.7	2,505	5.3
28	2,631	5.9	2,208	4.7
29	2,259	5.1	1,752	3.7
30	2,072	4.7	1,523	3.2
31	1,800	4.1	1,292	2.7
32	1,550	3.5	1,099	2.3
33	1,358	3.1	922	2.0
34	1,095	2.5	707	1.5
35	1,022	2.3	694	1.5
36	862	1.9	580	1.2
37	768	1.7	473	1.0
38	628	1.4	437	0.9
39	606	1.4	339	0.7
40	521	1.2	230	0.5
41	427	1.0	198	0.4
42	351	0.8	138	0.3
43	300	0.7	107	0.2
44	232	0.5	61	0.1
45	193	0.4	21	0.0
46	146	0.3	19	0.0
47	104	0.2	9	0.0
48	93	0.2	2	0.0
49	72	0.2	—	0.0
50 AND OVER	237	0.5	—	0.0

TABLE 9

LEGITIMATE AND ILLEGITIMATE LIVE BIRTHS

AGE OF MOTHER

IOWA RESIDENTS 1969

A G E	TOTAL	LEGITIMATE BIRTHS		ILLEGITIMATE BIRTHS	
		NUMBER	PERCENT	NUMBER	PERCENT
TOTAL	47,235	44,136		3,065	
N.S.	2	1		0	
	47,233	44,135	100.0	3,065	100.0
UNDER 15	37	8	0.0	29	0.1
15	184	87	0.2	97	3.2
16	509	329	0.7	180	5.9
17	1,198	884	2.0	314	10.2
18	2,000	1,623	3.7	375	12.2
19	2,951	2,508	5.7	437	14.3
15 - 19	6,842	5,431	12.3	1,403	45.8
20	3,586	3,169	7.2	413	13.5
21	3,866	3,606	8.2	255	8.3
22	4,387	4,140	9.4	246	8.0
23	3,498	3,353	7.6	145	4.7
24	3,368	3,276	7.4	90	2.9
20 - 24	18,705	17,544	39.8	1,149	37.5
25	3,257	3,171	7.2	83	2.7
26	3,076	2,992	6.8	83	2.7
27	2,505	2,445	5.5	60	2.0
28	2,208	2,162	4.9	44	1.4
29	1,752	1,715	3.9	37	1.2
25 - 29	12,798	12,485	28.3	307	10.0
30	1,523	1,492	3.4	29	0.9
31	1,292	1,274	2.9	18	0.6
32	1,099	1,078	2.4	21	0.7
33	922	904	2.0	18	0.6
34	707	694	1.6	12	0.4
30 - 34	5,543	5,442	12.3	98	3.2
35	694	678	1.5	13	0.4
36	580	567	1.3	13	0.4
37	473	465	1.1	8	0.3
38	437	418	0.9	18	0.6
39	339	335	0.8	4	0.1
35 - 39	2,523	2,463	5.6	56	1.8
40 AND OVER	785	762	1.7	23	0.8

TABLE 10
POPULATION MOVEMENT IN JUVENILE TRAINING SCHOOLS
for the year ending June 30, 1969

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	Boys Eldora	Girls Mitchellville	Total
Beginning population 7-1-68	268	74	342
Received this year			
Court commitments	242	102	344
Placement violators	153	27	180
Return for replacement	42	10	52
Transfer-in	24	17	41
Total Admitted	461	156	617
Return from escape	145	7	152
Return from home visit	1,419	35	1,454
Furlough or special leave	388	9	397
Return from hospital	26	15	41
Other returns	154	10	164
Released this year			
Discharged directly	36	6	42
Placement	471	128	599
Transfer-out	13	3	16
Death	2	-	2
Total Separated	522	137	659
Escapes	142	7	149
Home visits	1,419	34	1,453
Furlough or special leave	374	9	383
Sent to hospitals	31	16	47
Other releases	157	13	170
Ending resident population	216	90	306
Average daily population	254	76	330

TABLE 11
AGE OF JUVENILES COMMITTED AND THOSE PLACED OR DISCHARGED
during the year ending June 30, 1969

AGE IN YEARS	Boys		Girls		Total	
	Commit	Release	Commit	Release	Commit	Release
11	1	-	-	-	1	-
12	2	-	2	-	4	-
13	15	9	8	4	23	13
14	28	30	15	13	43	43
15	64	76	24	20	88	96
16	85	131	33	37	118	168
17	46	160	20	46	66	206
18	1	87	-	13	1	100
19 and over	-	14	-	1	-	15
Total	242	507	102	134	344	641
Average-Median	16	17	16	16	16	17

TABLE 12
EDUCATION-GRADE COMPLETED OF JUVENILES COMMITTED

GRADE COMPLETED	Boys Eldora	Girls Mitchellville	Total
Fourth or Below	1	-	1
Fifth or Sixth	15	5	20
Seventh or Eighth	107	40	147
Ninth or Tenth	108	48	156
Eleventh or Twelfth	8	7	15
Special Education	5	2	7
Total	242	102	344

TABLE 13
INTELLIGENCE LEVEL OF JUVENILES COMMITTED

	Boys	Girls	Total
Mentally Deficient	1	4	5
Inferior	14	6	20
Dull Normal	34	12	46
Normal	156	63	219
Bright Normal	31	10	41
Superior	6	2	8
No Test	-	5	5
Total	242	102	344

TABLE 14
RACE OF JUVENILES COMMITTED

	Boys	Girls	Total
White	213	92	305
Negro	23	7	30
Other	6	3	9
Total	242	102	344

TABLE 15
OFFENSE COMMITTED FOR JUVENILE COMMITMENTS

	Boys	Girls	Total
Truancy or running away	27	49	76
Incorrigible or ungovernable	18	36	54
Auto theft	61	-	61
Breaking and entering	58	-	58
Robbery or petty larceny	10	5	15
Forgery or false checks	5	-	5
Malicious destruction or assault	4	-	4
Sex offenses	4	7	11
Other offenses	55	5	60
Total	242	102	344

TABLE 16
MARITAL STATUS OF PARENTS OF JUVENILES COMMITTED

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	Boys Eldora	Girls Mitchellville	Total
Never married	6	3	9
Married	120	48	168
Common law	1	-	1
Separated	12	7	19
Divorced	79	30	109
Widowed	24	14	38
Total	242	102	344

TABLE 17
HOME SETTING OF JUVENILES COMMITTED AND THOSE PLACED

	Boys		Girls		Total	
	Commit	Placed	Commit	Placed	Commit	Placed
Parents	134	165	57	38	191	203
Mother alone	39	80	17	27	56	107
Father alone	5	13	1	4	6	17
Mother and stepfather	36	57	15	11	51	68
Father and stepmother	8	9	2	5	10	14
Grandparents	2	9	2	2	4	11
Other relatives	1	34	-	12	1	46
Non-relatives	-	5	-	-	-	5
Foster parents	9	27	4	16	13	43
Group home	-	25	-	1	-	26
Institution	7	5	3	1	10	6
Alone	1	42	1	11	2	53
Total	242	471	102	128	344	599

TABLE 18
TIME IN RESIDENCE FOR JUVENILES RELEASED

TIME IN MONTHS	Boys	Girls	Total
Four or less	126	17	143
Five or Six	172	40	212
Seven or Eight	83	40	123
Nine or Ten	36	26	62
Eleven or Twelve	32	5	37
Thirteen and Over	58	6	64
Total	507	134	641
Average-Median	6	7	6

3. Develop the desire to communicate effectively and seek opportunities to develop the necessary skills.
4. Realize the important role the family has in providing a setting for meaningful communication.
5. Improve parent's listening process to communication children glean about violence from mass media, peers, and personal actions.
6. Examine values, attitudes, and feelings underlying communication to reduce conflict situations.
7. Concentrate efforts on developing improved ways of reaching agreements on selected goals to be accomplished.

II Child Care

(Note: Child care includes parental, extended family, and community participation in the development of a child.)

The first five years of a child's life is the period of most rapid development of physical, social, emotional, and mental growth. Human development begins at conception and must be nurtured and cultivated throughout life. The earliest environment, which usually includes the family, determines developmental patterns. The nature of this environmental influence greatly affects the individual's personal opportunity, contribution, sense of worth and identity, and personal fulfillment. Many communities throughout Iowa lack adequate mental stimulation to prepare children to live in the rapidly changing world.

The 1970 census indicated 8.2 percent of the Iowa population or 234,478 children make up the birth - 5-year-old age range. This represents a 24.1 percent decrease compared to the 1960 census when 11.1 percent of the total Iowa population consisted of the birth - 5-year-old child.

Major influences on the development of the individual include:

1. the immediate family - through the family, values, attitudes, and feelings are influenced and continue to be so in varying degrees to maturity.
2. the extended family - relatives influence the child's behavior and learning in varying degrees depending on distances and individual situations.
3. the peer group - the child's contacts beyond the family become an increasing influence with age change. Peers aid in the formation of the self-concept.

4. the educational institutions - preschools; including nurseries, Head Start, and other programs aimed at teaching the child more about the existing world and himself help the child to experience the present and future.
5. Care facilities - by 1980, it is predicted that 5.3 million women aged 20 to 44 with children under 5 will be in the labor force. As mothers continue to enter the labor force, families will seek care for their children in day care centers, home situations, and other suitable arrangements. The personnel and peers within the facility will influence the child's growth and development.

This points up the need for:

1. Parents to further their understanding and appreciation of how children grow, develop and learn.
2. Extended family members to increase their knowledge of child development so meaningful experiences can be planned.
3. Extension to cooperate with personnel in educational and care facilities in providing in-service training and technical assistance.

III Youth Culture

The 1970 census revealed that 41 percent of our population is under 21 years of age and 20 percent is between the years of 14 to 24. The latter group represents 40 million people which accounts for a 47 percent increase during the sixties. The entire age span of 14 - 24 could be explored for programming, but the committee recommends a more intense study of the situation for the 18 - 24 year old youth, including non-college individuals and college students.

The impact of this segment of our society is felt in two major ways: (1) the marketplace reflects and magnifies difference in youthful life styles of dress, literature, music, and recreation; and (2) the process of self-identity where there is considerable grappling with their own value orientation. The right to vote at an earlier age will give younger citizens an active voice in decisions affecting their welfare.

Characteristics of this transition stage include:

1. Loyalty to the ideas and values of one's age group.
2. An uncompromising stance on one's prejudices.

3. Parents scoffing at the romantic idealism of the age.
4. Dissatisfaction with the existing social and economic system.
5. A gap existing because of generational differences, values, time, motivation, and education.
6. Increased experimentation in varying relationships and experiences.

Social conditions complicating the transitional stage:

1. Mass media creating instant awareness of the events happening throughout the world.
2. Many needs being immediately satisfied, creating a generation of impatience.
3. Population explosion leading to an expansion of congestion.
4. Increased stress on competition between individuals whether in school, in the job, or during play.

An extensive survey examining college and non-college youth found the following characteristics associated with non-college youth: more conservative, prone to traditional values, religious, respectful, work-oriented, concerned about moral living, conforming and accepting of the draft and war.

Within the college culture, a variety of values exist with college seniors, those married, and those paying their own expenses having more traditional value orientations than other segments of the college population.

This means:

1. Identity formation in youth will be more difficult to resolve in our complex and changing society.
2. Increased frustrations, forces of alienation, and demands will probably precipitate growth in drug use and abuse.
3. Increased number of "pairing relationships" will have an effect on the emotional stability of the individual and the children which result from these relations.
4. Increased complexities in the formation of a traditional family unit.
5. Increased frustration in occupational decisions.

Note for the future: birth control and family planning will lessen the present emphasis on the youth culture. As the proportion of youth decreases, its influence on the rest of society will be less.

IV Aging

Aging is as distinct an age in personal and interpersonal development as childhood, youth, or even middle-age. Life for those 65 years or older can be longer, more challenging and vigorous than ever before if adequate preparation has occurred.

The aging population faces:

1. an adjustment from a work-oriented situation to more available leisure time
2. an adjustment to a society that emphasizes the ideal age as the youthful state of approximately 20 years when a person is bursting with energy, vitality, and natural beauty at a time when these are becoming less for the aged
3. decrease in income to meet immediate needs
4. little or no improvement in faulty social skills that were poorly developed in earlier years
5. a search for meaningful ways to continue to contribute to society
6. an examination of sense of identity, self-worth, and respect
7. an adjustment to the death of spouse and friends.

This means:

1. planning for retirement throughout life, especially during the middle-years.
2. assisting the individual in finding pleasure and satisfaction in meaningful endeavors throughout life.
3. helping families at younger ages to increase their understanding of the functioning of the family system and recognize the psychological and sociological changes that occur from birth to death.
4. accepting the aging process gracefully and taking advantage of existing opportunities.
5. preparing for the inevitable of life - death and loss of the spouse or friends.
6. developing an attitude of flexibility throughout life so changes related to later age stages can be made easily with resulting satisfaction.

V Cultural Arts, Aesthetics, and Self-Expression

The groping for personal identity manifested by the youth of our society, sometimes even into adulthood, has its basis in real need. It is not to be dismissed by adult advice to "find yourself in devotion to suitable work," for many factors in our

The groping for personal identity manifested by the youth of our society, sometimes even into adulthood, has its basis in real need. It is not to be dismissed by adult advice to "find yourself in devotion to suitable work," for many factors in our society contribute to the problem:

Children have not been raised to respect work as a virtue in its own right.

Parents have abandoned the authoritarian role with their children but, through self-doubt, ignorance, pressure of time, or absence from the home, many have not substituted other forms of guidance.

When secondary and higher education was geared to vocational preparation, "finding one's niche" in society was a simpler matter. The broader scope of modern education gives wider choices but fewer answers.

With institutions assuming responsibilities toward children previously held by the family, there is a fragmentation, or compartmentalization in children's daily lives that makes more difficult the development of self-identity and of stable and integrated individuals. A child's day of Math, History, Gym, Music, television and 4-H may all sound constructive but the relating of these disjointed experiences into what we like to think of as education is not necessarily automatic.

The individual needs some point of reference for all these facets of the world, and that point of reference must be himself. He needs a sense of self and a means of expressing that self to himself and to others. This means of self-expression must grow as he grows, and if it does, it will find ways of relating to the real world without losing the sense of self that makes all these relatings meaningful.

The most obvious means of self-expression is language, spoken and written. But necessary as language is, we have turned it into a one-way street by the traditional kind of schooling that uses it to channel information about the real world to the individual rather than as a means for the individual to relate his growing self to the world.

Other means of communicating and relating are needed - non-verbal means. Many aspects of the youth culture, such as experiments in Yoga, "sensitivity sessions," drugs and communal living, have overtones of the search for new means of communication and relating to the world. Yet the richest source of non-verbal communication and self-expression has always been available to us in the creative arts, the "languages" of the visual arts, music, dance, drama, poetry and literature.

The youth culture has exploited all of these in a spirit of revolt or at least independence from society's uses of them. But this only emphasizes their importance. Families need to concern themselves with these means of relating and communicating, no less than do the institutions involved with developing individuals.

There is much in common between the rebellion of youth, the discontent of minorities and the sense of isolation and discrimination that many people of low-income feel. Although each has its own angle of attack, all three are critical of certain aspects of established society and of its entrenched power - economic, political and police. Many middle class and affluent young people have espoused the causes of the minorities and many have discarded the dress, manners and advantages of their middle class background if not to identify with those they consider underprivileged, oppressed and discriminated against, then at least to demonstrate their small regard for the trappings of affluence.

The popular youth music reflects this merging and kinship of interests. Negro and Spanish-American elements run very strongly in the music of the youth culture. And the rebellion against the values, the rigidity and the power of established society rings clear in many of its songs. They offer us an opportunity to see through the eyes of these young people and in many cases to enrich ourselves through their new styles, if not through their new points of view.

Children of minority groups in secondary schools often are discouraged by the highly organized and disciplined music activities (band, orchestra, chorus) which, furthermore, emphasize music not of their families' background and often require private outlay of money.

We derive these basic conclusions:

1. Families need to substitute for the old authoritarian relation toward children an approach of stimulating curiosity, joining in search and sharing discovery with them. If rules are necessary, the reasons for them are equally important. Merely relaxing the rules is not contributive to the child's development.
2. This same approach applied to teaching, which is seen in many innovative schools, should become universal. The search for information must be made as important as the information, itself. This creative approach should be continued through secondary schools despite pressure to qualify every student for college entrance.
3. The family is important as never before in its role of providing a stable, integrative environment (as opposed to the disjunction of the institutional environment) and a place where the individual can achieve self-identity, self-expression and the relating of self to his environment with ever-growing competence.

taste in the arts have deepened. While serious theater and symphony orchestras are struggling to survive, the baldest trivia in television, movies and music programs command the box office. Pop records far outsell serious music. While composers, writers and graphic artists are pushing forward the frontiers of art, the general populace is looking the other way. In fact, the most creative of our artists are leaving us farthest behind.

Paradoxically our confusion about contemporary advances in the arts stems from our poor grounding in the traditional, in the best of our rich cultural heritage. Church music illustrates this very well. Many churches whose music has been restricted to the most sentimental of the Romantic and Neo-romantic composers have gone overboard in embracing folk-music services and guitar masses. Churches whose music has ranged from the earliest of the great church literature to the best of the Romantic and Contemporary music have taken the pop-religious movement with more judgement and selectivity. In short, people with knowledge of the best of the traditional arts are in a better position to recognize the worthy in modern developments and less likely to be carried away by fads.

Impact on Iowa

In Iowa's families we find three forces at work: a determined clinging to old values, old disciplines and old traditions; a willingness to examine old values, retaining what seems valid but staying alert to new approaches; and a tendency to relinquish old values and old approaches to child-rearing without finding effective new approaches to take their place.

In Iowa's young people we find all gradations between the products of traditional family life, with stable personalities, general acceptance of established cultural values, orientation toward career-preparation and an optimistic outlook toward their future in a stable society and, at the other end, dislocated youth, disenchanted with established values, rebellious to any authority that would force them to conform with those values, pessimistic about improving society in their terms and searching desperately for a personal and social identity that seems valid and meaningful to them.

It is in the latter part of this spectrum of youth that we find the arts (music, drama, poetry, dance and the visual arts) put to a very extensive use as a vehicle of communication between themselves, an expression of self-identity and group unity and a means of proclaiming to the world their rebellions and beliefs. In this they have illustrated the great potential of the arts for "self-finding" and self-expression.

In Iowa's arts, we have found the same doubts and questions that have beset other Americans. Of the four "camps" described earlier, the traditionalists and the pop-art devotees (in music, at least) are by far the largest. But even among these there is much curiosity about new developments in serious arts and a desire to find some paths that might lead from the old to the new with some understandable logic. There is increasing interest in the music of youth and desire to know more about it.

Many young families and families of rising income are able to acquire excellent sound equipment for the first time, and many lack the background to make a satisfying selection or to employ it to full advantage.

Low-income families and families of minority groups have backgrounds in the arts that emphasize folk, ethnic and popular art (in music, ethnic, folk, jazz and other pop-music). Yet they have the means of broadening their tastes through radio, TV, public concerts and participating groups.