

States of the Union

A CERTAIN SPECIES OF HELPLESSNESS

BY RICHARD J. MARGOLIS

In 1985 I began work on a book about the elderly poor, little suspecting that the venture would bring me uncomfortably close to achieving the very condition I hoped to analyze. Because in the course of writing the book I have frequently used this space to discover what I was thinking, I wish to thank my readers for their patience. The good news is that I have finished the manuscript. The bad news is—there's an Epilogue.

“**E**VERYTHING begins in sentiment and assumption,” observed the turn-of-the-century French writer Charles Peguy, “and finds its issue in political action and institutions.” Institutions like Medicare and Social Security did not magically materialize; they were the imperfect outcomes of our sentiments and assumptions regarding old age and poverty.

It has to be acknowledged that we Americans have never been much good at endings. Looking into a national mirror, we are less likely to see the wrinkles of time than the glosses of youth. What delights and excites us is the “fresh, green breast of the new world” (evoked by F. Scott Fitzgerald in *The Great Gatsby*) “that flowered once for Dutch sailors’

eyes” when they first glimpsed the Long Island shore. We have been hooked on beginnings ever since.

Nor have we been especially diligent in counting and preserving our blessings. The preferences we often display bear the mark of eternal adolescence: to acquire, consume, discard—and then to acquire once more and begin the cycle anew. A taste for commerce may be what underlies our disposable ways, our habit of throwing out whatever seems old and unmarketable. Yet the values of commerce in the face of human frailty cannot suffice. They make life particularly difficult for the very old, each of whom represents a striking example of built-in obsolescence.

At our worst, we have let commercial principles overwhelm humanitarian ones. With Casca in *Julius Caesar* one could say that “the bird of night did sit, / Even at noonday, upon the marketplace, / Hooting and shrieking.” We turned Medicare and Medicaid into cornucopias for the health care and nursing home industries, driving the cost of decent doctoring beyond the means of just about everyone, even the government. Of the Social Security system we made a meritocracy, whereby a profitably spent youth and middle age could alone insure

an adequately supported old age. Hoping to ease the housing shortage for old and young alike, we relied for the most part on a private profit system ill-prepared to deliver affordable shelter. Then, in our confusion over what constitutes sensible public assistance and who merits it, we demanded pauperization as the price the elderly must pay in exchange for help with their escalating nursing home bills.

As if all that were not enough, we kept erecting new benefit eligibility barriers and inventing fresh indignities to impose upon the elderly welfare queue. Medicare and Social Security may have been the sole exceptions, and even Medicare, with its nondegradable explanations and its unanswered telephones, could frequently sting.

On the other hand, given our aversion to government spending and our devotion to private enterprise, we may have done better than anyone had a right to expect. There were critical moments in our social development when compassion soared unexpectedly to the top of the national agenda. In the '60s we became temporarily committed to providing decent shelter to many in need, especially the elderly; with Supplemental Security Income we created the first

guaranteed income support program in American history; and by liberalizing Social Security and inventing Medicare, we cut the elderly poverty rate to one-third of its previous level. Millions of older Americans continue to benefit from those breakthroughs. Such programs can serve to remind us that social progress, even in a deficit-ridden post-Reagan era, is not so wild a dream.

PERHAPS THE most powerful dream-tamer is the human condition. For a characteristic that distinguishes old age from every other “minority” status is its universality. There is, indeed, only one way to escape its travails—and who wants that? As taxpayers we may fret about the broad demographic consequences of an aging population—all that human depreciation and the fiscal burdens that go with it—but not, truth to tell, about our own personal prospects. Never mind the possible hardships lying in wait for us; longevity is a state to which most of us instinctively aspire. The risks of old age have thus become the risks of middle age as well. For in the fullness of time and attrition each of us may be asked to play parent to his or her parents and grandparents.

Family obligations derive from those shared sentiments and assumptions Peggy spoke of, and such feelings have already begun to find their issue in political action. Young parents are not the only ones demanding subsidized day care; that concern now cuts across the generations. It falls with particular force upon the elderly’s offspring, an invisible army of caregivers, nearly all of them women, who find themselves in desperate need of the respite that community support might bring.

All the evidence suggests that the public is more alert to, and alarmed by, the long-term care emergency than is the present Administration in Washington. A public opinion survey commissioned by the American Association of Retired Persons and the Villers Foundation tells the voters’ half of the story. “Long-term care,” the researchers concluded after polling a nationwide voter sample, “is a growing issue of nearly universal con-



cern. . . . Americans not only want a comprehensive Federal long-term care program, they are willing to pay for it with increased taxes.”

The White House’s half of the story has not yet been written. No fresh vision of social progress—of what we can achieve on behalf of our parents, our grandparents and ourselves—has yet been presented to the American people. Facing a virtually blank policy screen, Congress frets and spins dreams of its own.

In 1988 more than a dozen long-term care bills were placed in the Congressional hopper, all aimed at creating some sort of social insurance program capable of covering long-term care at home and in institutions. That none of the measures came close to getting passed only testifies to the well-known sluggishness of democracy’s gears: The procedures that carry us from debate to consensus, and then to enactment, can be exasperatingly slow.

Yet here we have one of the classic conditions preceding social reform, name-

ly a rising demand by families for assistance in taking care of their own. It was a similar demand that eventually led to passage of the Social Security Act of 1935.

There are, in fact, some striking parallels between the 1930s and the 1990s—and some striking differences. Then as now, the prime incentive for reformers was to keep the aged out of institutions. What Eleanor Roosevelt told a U.S. Chamber of Commerce audience in January 1934 applies today with equal force. “The community,” she said, “owes to its old people their own home life as long as they possibly can live at home. Old people love their own things even more than young people do. It means so much to sit in the same chair you sat in for a great many years; to see the same picture that you always looked at. . . . And that is what an old age security bill will do.”

The purpose of the Social Security Act was not to replace the family but to enhance its role as caregiver of the first resort. “By funneling money back into

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the American family," observes the historian William Graebner, "Social Security promised to restore the primacy of home and family" (*A History of Retirement*, Yale, 1980).

The differences today lie chiefly in our leaders, who seem deficient in social imagination, and in our own attitudes, which lack faith in the wonders that politics can achieve. If widespread fear was the mental plague of the Great Depression, widespread fatalism may be considered the hex of the Great Deficit. The enormous debts incurred in the Reagan years weigh down on our hopes, engendering something very close to legislative paralysis. Franklin D. Roosevelt helped us to overcome our fear. Who now will rouse us from our fatalism? In all likelihood we shall have to do it ourselves.

MORE THAN most aspects of elderly politics, the long-term care dilemma challenges our basic values and therefore invites the most imaginative social response we can summon. For if we genuinely believe in individualism, we have our work cut out for us: Here, after all, are millions of aged co-believers, the most determined individualists among us, for whom each day is a fresh contest. It is one of the many ironies of longevity that in order to sustain its independence it must sometimes depend on strangers. With one hand it clings to autonomy; with the other it beckons for assistance. What Americans have been seeking all along, albeit in piecemeal fashion, is a worthy communal response to the legitimate claims of elderly individualism.

There is, to be sure, something unsatisfactory about singling out the old for social analysis. The process tends to blur some sharp truths concerning present-day America, where the erosions of poverty can be found at every age level, including infancy. It is true that old age presents itself as a biological condition distinct from all others and replete with its own set of disabilities; but old age is also a cultural artifact that we can alter simply by changing our attitudes—or with the stroke of a pen, as Congress did when, at the late Claude Pepper's urg-

ing, it banished most forms of mandatory old-age retirement.

What we have been investigating all this time turns out not to be old age *per se* but a certain species of helplessness exacerbated by retirement or deterioration, or both. For many older Americans helplessness is not a novel condition; it has been the story of their lives. Their earlier poverty has in large measure determined their later dependency.

The lesson, then, is long-range and intergenerational: One way to reduce the future incidence of helplessness among the old is to reduce it now among the young. Nothing that has been said about the risks of old age should obscure the risks of poverty at any age; and nothing said about Federal programs for the elderly should divert us from working for a family income support program, a universal health protection plan and a humane minimum wage.

Here and there one sees signs that Congress may be coming to terms with some intergenerational truths. As I write this, both houses are considering a five-bill Medicaid package that could benefit the poor of all ages. It would bring more home care to the elderly and more medical care to pregnant women and their children. Although one bundle of bills does not make a policy, the Medicaid package gives us reason to hope that lawmakers have begun to learn how to view dependency along a lifetime continuum.

One-fifth of America's children live below the poverty line. Four of every 10 poor Americans over 14 years of age *hold jobs*. There were 6.5 million working poor in 1979; there are 9 million today. Such figures underscore the widening gap in this country between rich and poor. We shall have to work hard to close that gap, and how well we succeed will profoundly affect the elderly condition in decades to come. Without our political intervention, those underpaid workers and their families are virtually certain at some point down the road to join the ranks of the elderly poor.

We have the resources to head off the next scheduled social catastrophe. May our sentiments and assumptions be equal to the task.