Old Age in the New Land

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Old Age Becomes a National Problem

Americans between World War I and World War II believed that new theories in the biological and social sciences as well as data gathered by economists, demographers, government officials, and social workers verified negative ideas about the elderly that had emerged during the last third of the nineteenth century. The most recent and authoritative evidence indicated that old age brought pronounced physical decay, mental decline, unpleasant and sometimes deviant psychological and behavioral traits, economic uselessness, personal isolation, and social segregation. "Resent, resist, or ignore it as well as we will, the fact is that once thought of as old, whether because of mental and physical signs or by withdrawal from our wonted sphere of activities, we enter a class more or less apart and by ourselves." By emphasizing this theme, books, magazine articles, and scientific studies, among other sources of information, generally increased the anxiety of those who viewed the aging process with dread.

In fact, Americans between 1914 and 1940 described the status of the aged more pessimistically than their predecessors. Writers between 1865 and 1914 had only claimed that contemporary societal changes were diminishing older people's roles and social worth. Americans after World War I perceived and voiced concern that current demographic and socioeconomic conditions were making old age per se a national problem as well as a personal misfortune. Conditions prevailing in the United States, they contended, rapidly were making the plight of older men and women more visible and acute.

Having redefined the elderly's position to be both unfavorable and problematic, Americans earnestly endeavored to expand existing means of assisting older people. Proposals once dismissed as too expensive, unnecessary, or impractical were seriously considered and acted upon after 1914. The unprecedented belief that the aged's plight now posed a grave societal "problem" and experiments with new "solutions" to remedy the elderly's physical, social, and financial predicaments mark important developments
in the history of old age in the United States. In many ways, the outlook and efforts arising after World War I continue to color and shape the current perceptions and treatment of older Americans.

**New Studies Reinforce Americans' Disparagement of the Aged**

By seeming to provide qualitatively and quantitatively more impressive evidence than previously existed, research in the natural and social sciences, as well as the sheer force of often repeated derogatory opinions, enhanced the plausibility, persuasiveness, and pervasiveness of the popular belief that old age brought inevitable decline. In retrospect, it appears that investigators and their contemporaries may have exaggerated the degree to which their evidence actually justified such adverse conclusions about the aged. Researchers, for instance, frequently reported innumerable exceptions to the then prevailing tenet that humans automatically deteriorated as they aged, and occasionally admitted surprise that some older men and women did not differ from younger individuals in performance or personality as much as they had anticipated. (Scholarly inquiries conducted after World War II revealed comparable variations but interpreted them in a different manner. Researchers presently cite such variance to support the evolving notion that it can be misleading to describe the aged as a homogeneous group.) Between 1914 and 1940, however, variations within the elderly population were considered far less important than differences between them and other groups. On the basis of their assumptions and evidence, and in accordance with accepted contemporary research standards, commentators before World War II stressed modal patterns in describing the elderly. In so doing they reinforced and amplified the "scientific" basis for the prevailing assumption that old age was a period of pitiful and trying desuetude.

One of the most obvious and frequently mentioned liabilities of growing old was the decline in physical vigor and health. The typical picture of old age drawn from batteries of tests and masses of evidence was "one of dependence and relative helplessness, associated with a restriction of the range of activity, a limitation of voluntary enterprise." It is worth noting, however, that studies published between 1914 and 1940 revealed that the physical conditions of the elderly varied markedly by sex, age, and socioeconomic status. That some people scored higher marks on tests measuring fitness, vigor, and dexterity than much younger subjects clearly indicated that all older Americans were not sick, slow, or clumsy. Nevertheless, researchers generally were less interested in reporting cases of extreme good and poor health than they were in establishing the physical condition con-
OLD AGE BECOMES A NATIONAL PROBLEM

sidered most prevalent among the elderly. As a result, early-twentieth-century descriptions and examinations of older people tended to confirm a conclusion reached during the last quarter of the nineteenth century: the decline in well-being and vitality that they presumed was associated with old age sharply curtailed a person’s ability to keep up with the rest of society.

Elaborate investigations conducted between World War I and World War II into people’s ability to learn as they grew older strongly intimated but did not entirely demonstrate that mental as well as physical faculties declined with the years. For instance, Edward L. Thorndike and his associates argued in *Adult Learning* (1928) that “from seventy on, many persons show a notable decline in the amount of learning per year, so that they do not learn as much as they forget and fall back in the amount of knowledge.”

Such an assertion was made with little proof. Because of the difficulty in assembling “unselected cases of middle age or senescence” and because of the structure of his research design, Thorndike never actually tested the learning capacity of subjects over forty-five. Like most of his fellow investigators, he upheld prevailing opinions about the deterioration of the elderly’s mental powers by citing experiments with animals and previously reported research. Thorndike also extrapolated from his own data: having suggested that a person’s peak learning performance occurred at twenty-two and then declined about one percent a year until the fifth decade, he considered it unlikely that one’s interest in learning could compensate for the “inner degeneration” of an aging body. Other contemporary evidence indicated that people lost their desire as well as their ability to learn. Harry L. Hollingworth, in *Mental Growth and Decline* (1927), asserted that “the learning of new things commonly implies a forward-looking interest which is less characteristic of age than of youth.”

Thus, while neither Thorndike nor Hollingworth inferred from their evidence that an adult’s learning capacity completely ceased in old age, they noted limitations to mental growth and asserted that these strictures became more pronounced with age.

Although researchers like Thorndike and Hollingworth recognized the ambiguous nature of their results, the public generally did not. Most people thought that such studies provided a scientific justification for believing that mental deficiencies no less than physical handicaps diminished the aged’s worth. Experiments suggesting that older people did not assimilate new ideas, coupled with real-life instances of “decreased mental and bodily strength and endurance,” gave popular writers and their readers reason to doubt that the aged would, or even could, contribute much to society. Such a glum judgment seemed all the more credible because it was consistent with other unfavorable notions about old age.

Commentators after World War I, for example, offered impressive documentation supported by currently avant-garde psychological insights and jargon to prove that older people had undesirable personalities in addition to
their mental and physical deficiencies. The nascent professional interest in the psychology of aging generated a novel theoretical and empirical basis for studying and explaining undesirable character traits already recognized to be common among the elderly. On the basis of clinical tests and systematic observations, psychologists by and large agreed that few elderly Americans were either well-adjusted or happy. While admitting exceptions, researchers noted that most old people displayed "unpleasant mental peculiarities" such as dissatisfaction, lack of humor, conceit, suspicion, hypercriticism, bitterness, depression, or slovenliness. Scientists investigated the extent of hypochondria, melancholia, impaired attention, disorientation, and disorders they associated with cases of senile dementia and other mental illnesses. In some cases, they found that "a pathological persecution fixation" and "morbid irritability" became manifest in the aged personality.

Researchers attributed the psychological crises of old age to a plethora of physiological, socioeconomic, and individual factors. Intrinsic changes in the sense organs and nervous system, it was said, affected the elderly's emotional state; diseases and degeneracy were thought to induce hallucinations, neuroses, and strain. Scientists thought that a limiting range of opportunities and experiences also narrowed the aged's outlook on life. In addition, difficulties in facing death and dying made older people's psychological well-being all the more precarious. By indicating that many aspects of the aged personality surfaced only in the later stages of life, scientific inquiries into the psychology of old age thus lent additional justification for believing that personal handicaps diminished the social value of the elderly.

Besides cataloging the elderly's idiosyncracies, writers itemized ways that behavior of the aged deviated from that of other people. "Old age is simply a mass of bad habits." Writers not only condemned older Americans for having disagreeable or peculiar habits but they also perpetuated earlier injunctions prohibiting senior citizens from normal adult activities. Consider, for example, attitudes toward aged sexuality. In the Psychology of Sex (1933) as well as in his previous multivolume studies, Havelock Ellis argued that by engaging in intercourse at advanced ages, men risked heart attacks, cerebral hemorrhages, and even death; an efflorescence of sexual activity past sixty often was accompanied by egotism, callousness, exhibitionism, homosexuality, or child abuse. Paradoxically, however, Ellis reported that total abstinence made older men feel like eunuchs. Because cultural pressure to disengage from sex in old age was so pervasive by the 1940s, Alfred C. Kinsey and his associates stressed that the most important generalization to be made about the sexual behavior of older males seemed "astonishing, for it is quite contrary to general conceptions of aging processes in sex." After studying the case histories of thousands of men between fifteen and sixty years old, Kinsey found that sexual activity did not decline sharply at advanced ages, but rather waned
throughout the adult stages of the life cycle. Kinsey might have "scooped" the sex experts of the 1960s by emphasizing that older men's sexual life and interest was not as dormant and futile as many supposed or hoped it would be, but because he had so few elderly subjects and was more interested in other matters anyway, he did not pursue the issue. Instead, he attributed the aged's decrease in sexual responsiveness to physiological decline and psychological fatigue. In so doing, Kinsey actually corroborated rather than undermined existing ideas about older men's sexual behavior.

Everything seemed to reaffirm and embellish the belief that one's value faded in old age. Unless a person was mounting a rising tide of success, it seemed doubtful that any conceivable benefits of growing old would outweigh its physical, mental, psychological, and behavioral liabilities. "We have become accustomed to associate old age with thoughts and visions of senility, decrepitude, uselessness and burdensomeness." In light of the overwhelming and impressive support for such an opinion, it becomes perfectly understandable why Americans after World War I resented, resisted, ignored, and dreaded the coming of age.

Observers Claim That the Aged Constitute a Societal Problem

Commentators did more, however, than investigate and elaborate upon the ways that people deteriorated as they grew older. Americans after World War I claimed for the first time that contemporary conditions were making the elderly themselves a serious social "problem." Basically, they argued that current ideas and evidence about old age interacting with demographic factors and socioeconomic developments were causing the elderly's plight to evolve into a national predicament. The situation seemed particularly grave because the continued interplay of cultural trends and structural forces was sharply reducing opportunities for older people to support themselves and to participate meaningfully in American life. As Corra Harris observed in a 1926 issue of Ladies Home Journal,

Old people are not so much prisoners of their years and their infirmities as they are of their circumstances, after they are no longer able to produce their own circumstances, but are obliged to adjust themselves to conditions made for them by people who belong to a later generation in a new world. It is worse than if they became foreigners in their old age, because they are in the midst of familiar scenes, but obsolete, like fine old words erased from the epic of living.

Because of the way they perceived the situation, Americans increasingly redefined the obsolescence of old age to embrace its broadening personal implications and societal importance.
Demographers, economists, and other writers postulated that the number of elderly persons in the United States made old age a "problem" in modern American society. In part, they predicated their argument on recent census data and other population studies indicating that the proportion of the population over sixty-five years old was growing in the twentieth century. Not only did Americans rightly recognize that the relative size of the elderly population was increasing, but they also correctly predicted that the proportion would increase. In forecasting a "nation of elders in the making," many speculated that an older population might alter national production, consumption, and inheritance patterns; some warned that the trend might even threaten America's economic prosperity and political institutions. The fears expressed in such predictions suggest that Americans were not reacting just to the absolute and relative increase of old people in their midst. They also were grounded in the belief that a person's chronological age increasingly determined his or her role in society. "In no other country does the basis of age alone furnish so definite a line of demarcation between a portion of the population recognized as economically efficient and socially attractive and that part of it which is neither useful nor particularly attractive." Commentators argued that America's age-grading system, which not only affected nearly every dimension of life after World War I but also reflected the prevailing bias against the old, compounded the predicament of the elderly.

Older people's positions were becoming more vulnerable, observers contended, as the United States continued to evolve into a predominantly urban and industrial nation. According to rural sociologists, the mass migration from the country to the city had not eroded the elderly's status until relatively recently. Prior to 1920, most aged men and women lived on farms or in a rural setting where they had jobs, participated in civic and church functions, and could rely on community support when necessary. Researchers postulated that the situation changed as more and more older Americans lived in cities: they discovered that food, housing, and recreation in an urban environment were expensive and they experienced difficulties in finding and keeping a job. Furthermore, as urban mores and modern technology transformed the countryside, it was predicted that the process would even undermine the responsibility, roles, and respect accorded aged people who stayed on the farm.

Articles in popular and scholarly journals and help-wanted newspaper advertisements appearing after 1914 clearly reveal that the elderly's presumed value and apparent status in the labor market were steadily deteriorating. Careful examination of pertinent literature suggests, moreover, that both opponents and advocates of age-discrimination practices evinced little sympathy for workers seeking employment after the age of sixty. Surveys of specific occupational groups (including professionals)
revealed that earnings declined after the age of fifty-five. Women, it was found, encountered sex as well as age discrimination: years of experience and skills guaranteed neither job security nor high wages. But unlike her male industrial, clerical, and domestic counterpart, a woman was an "older worker" at a comparatively young thirty-five. Americans often justified their disesteem for elderly workers by citing evidence that age impaired a person's productivity. New findings corroborated previous data "proving" that the elderly were less efficient than personnel in their twenties, or even late forties, and that they also caused morale problems.

And yet, social theorists who hypothesized that the continued growth of the economy adversely affected the aged's employment worth went beyond rehearsing late-nineteenth-century observations about the factory system's prematurely wearing out employees and making older workers appear inefficient. The sheer growth of big business and industry itself, economists and popular writers noted, reduced the elderly's economic prospects. Establishments once considered "cushions for the scrap heap" were declining in importance. Industries with advanced technologies and sophisticated production processes made little effort to recruit and retain older employees. In addition, more and more corporations were implementing and expanding policies—such as group insurance plans and retirement programs—and establishing personnel departments armed with batteries of psychological tests and "job analysis" profiles to standardize recruiting procedures. Though these innovations in some respects were clearly improvements over previous practices, they also tended to ease people over sixty out of the work force and they created obstacles to their reentry: cost and efficiency considerations generally made older job applicants seem less attractive and useful than younger ones. A federal study of *Recent Social Trends* (1933) noted that "there is much evidence to support the growing belief that industry is honeycombed with strict hiring limits." Accordingly, most writers projected that the percentage of elderly Americans supporting themselves through gainful employment would continue to decline.

Decreasing employment opportunities for the aged after World War I raised fundamental questions about the ability of older people to support themselves in later life, and thereby stimulated new interest in old-age dependency. Social workers, professional reformers, scholars, business groups, civic organizations, the U.S. Bureau of Labor, and more than a dozen state legislatures conducted surveys between 1914 and 1940 that focused on the causes and dimensions of financial hardships among the elderly. One common theme emerging out of the welter of statistics and rhetoric was that urbanization, industrialization, and the shortened working period of life among other things were making old-age dependency different from what it had been in former times. "Poverty in old age can no longer be made impervious by mere hard work, frugality and good habits. Our fortune
has become dependent on altogether too many forces beyond our control.” Modern conditions, Americans increasingly claimed, were creating a situation in which economic insecurity threatened a large segment of the elderly population.

In fact, many thought it impossible to discuss the problems of old age without referring to old-age dependency. Robert Kelso, a respected researcher of poverty, claimed in 1929 that “old age, merely by that name, is a synonym for poverty.” It is imperative to recognize that Kelso’s statement, because it conveys a sentiment often expressed between the world wars, reflects a fundamental shift in ideas about old-age dependency. Before World War I, most Americans did not think that industrial and urban conditions per se caused many cases of indigency among the elderly; infirmity and intemperance seemed more significant sources of hardship. Writers after 1914 acknowledged that traditional factors contributed to the problem. But they also placed unprecedented emphasis on evolving societal forces beyond people’s control that severely hampered and sometimes precluded their best efforts to maintain themselves in old age.

Furthermore, contemporary observers pointed out that recent developments in the economy and in society at large strained existing means of support. For instance, although it remained a cultural norm that the family was and should be an older person’s primary source of assistance, caring for parents seemed to be more problematic than it once had been. Writers increasingly noted that multigenerational living arrangements elicited complaints and feelings of resentment among young and old alike. Personality differences were not the sole cause of domestic travail. Economic matters fueled tensions. Surveys conducted in the 1920s suggested that legislators underestimated children’s difficulties in assisting their aged parents. Preoccupied with their own family responsibilities, many sons and daughters could not take on the additional burden of supporting dependent parents. In addition, the fact that recently constructed homes had fewer but larger rooms may have exacerbated the situation. Eliminating the spare bedroom reduced the space potentially available for grandparents without diminishing the premium Americans placed on privacy in the home. Influenced by their own reflections on such psychological, economic, and logistical considerations, commentators frequently suggested that it was better for the old to live meagerly but independently than to dwell in a child’s home.

No one seriously recommended, however, that elderly persons seek refuge in the local poorhouse unless there was no other alternative. Filth, shocking treatment, mismanagement, and especially the social stigma attached to it made the almshouse an undesirable option for the aged poor. “The word ‘poorhouse,’ ” concluded a 1926 survey funded by the Fraternal Congress and Loyal Order of the Moose, “has become the threatening symbol of one of humanity’s great degradations.” Yet despite the growing
conviction that healthy and self-respecting older men and women did not belong there, the absolute and proportional size of the aged population in almshouses continued to rise. The situation was clearly tragic.

In short, Americans after World War I increasingly concluded that contemporary demographic trends and socioeconomic developments were making old age per se a problem fraught with alarming national significance. In some instances observers may even have overstated the degree and extent to which recent structural forces adversely affected older people. The rising number of persons over sixty-five in society was, after all, a long-term phenomenon just beginning to accelerate. Industrialization’s impact on elderly workers was neither entirely negative nor wholly irreversible: wartime exigencies, for instance, had required recruiting presumably superannuated veterans back to production lines. Intergenerational tensions and the elderly’s preference for maintaining independent households, moreover, were not new; such feelings existed before the twentieth century. Nor was this the first time that the plight of older people in the poorhouse had been deplored. Nevertheless, what really matters at this point in the narrative is that after 1914 more and more essayists, social and natural scientists, and other writers perceived and interpreted the aged’s social position in an unprecedented manner. Having determined that “modern” conditions made the personal hardships as well as the societal implications of growing old a matter of grave concern, Americans then proceeded to act on the basis of their ideas.

Salvaging Old Age

Keenly aware of the pervasive animus against old age, different groups after World War I attempted to mitigate or even eliminate the liabilities of being old and to reaffirm its advantages in order to improve the status of the elderly in the United States. Advice columns, poems, and essays often repeated hoary maxims reminding readers over sixty to exercise moderately, remain cheerful, maintain relationships with younger people, keep abreast of new developments, and seek the comfort of religion, among other things. Some writers, moreover, updated the perennial suggestion that people should stay useful and busy as long as possible in order to make it reflect modern circumstances more closely. Recognizing that “as the world is organized now, there seems to be no niche” for older people, writers tried to help the aged find satisfying alternatives to gainful employment. They advised men to prepare for their retirement years early in life by acquiring hobbies and interests that would remain stimulating and they recommended that women take up quilting and other crafts that the world still valued but no longer spent the time or effort to create by hand. Indeed, a
spate of books attempted to mold more favorable identities and constructive lifestyles for older Americans. Works such as Walter Pitkin’s *Life Begins at Forty* (1932), Elmer E. Ferris’s *Who Says Old* (1933), and Lyman Pierson Powell’s *The Second Seventy* (1937) were immensely popular.

At first glance, the self-help books and literature published between 1914 and 1940 might seem unduly optimistic or unrealistic. Yet, in retrospect, they clearly are just as much a product of the era as the grim images of old age they sought to counterbalance. They expressed a theme found frequently in government reports, scholarly studies, and a variety of popular writings: people could protect themselves against premature decay and possibly make valuable contributions if they continued to grow mentally and psychologically beyond middle age. The eminent psychologist G. Stanley Hall, for example, speculated that “intelligent and well-conserved senectitude has very important social and anthropological functions in the world, not hitherto utilized or even recognized, the chief of which is most comprehensively designated by the general term synthesis, something never so needed as in our very complex age of distracting specialization.” Hall, of course, grossly inflated the originality of his proposal: one of the major roles of older people before the Civil War had been to offer the wisdom garnered over many years. The significance of Hall’s proposition lies not in what he said, but rather in its underlying assumption that older Americans could improve their situations by mobilizing their own resources and potential.

In this context, it is worth noting that fresh ideas and new methods of coping with the difficulties of aging were often the inspirations of elderly men and women joining forces to deal with the fact that they were “old.” Dr. Lillian J. Martin, a retired head of Stanford University’s psychology department, opened an Old Age Center in San Francisco and wrote numerous articles and books to help older people who had lost their desire to live life fully. Building on her professional opinion and personal belief that most humans could learn at any stage of life, Martin urged her fellow older Americans to reform their thinking and acting. “What the old must do to salvage themselves, to prevent themselves from being pushed into the background,” she conceded, “is no easy task, but one that is rich in returns.” Another retired educator, Dr. William McKeever, operated a “school for maturates” in Oklahoma City in the 1930s to teach those over seventy years old to enrich their lives and outlooks. Local clubs founded by and for older persons sprung up throughout the nation during the period and served as informal organizations for educational and social activities. Somewhat later in the century, the elderly began to form “gray lobbies” to press for special old-age legislation. Hence, older Americans themselves after 1914 took an originally small but ultimately significant step in “salvaging old age.” While aged men and women have always had to deal with their individual difficulties in some manner, these first old-age centers, clubs, and schools consti-
tute the elderly’s initial organizational efforts to deal with their situation collectively.

Medical researchers also made important headway in their attempts to alleviate, and even save, people from the physical deterioration of advancing years. Sometimes scientists derived their inspiration from late nineteenth-century pioneers. Serge Voronoff and Eugene Steinach, for example, based their research on Brown-Séquard’s hypothesis that the degeneration of reproductive and other ductless glands caused old age: independently they tried grafting glands of young animals to older ones as a means of restoring youthfulness.34 Others tested different methods. Pierre Delbet in the 1930s pursued Elie Metchnikoff’s notion that one could ward off old age through antidotes, but he prescribed an intake of magnesium chloride instead of lactic acid. Still others believed recent inventions could restore vigor in old age. Dr. William Bailey proposed (but did not prove) that ionizing an elderly person’s endocrine cells with radioactive elements of the thorium family would make the patient feel younger.35 Even though all these attempts proved to be dismal failures, it is important to recognize that between the world wars there remained considerable evidence and professional support for claiming that the last stage of life was characterized by pathological degeneration and hence could be “cured.” Those who considered old age a disease, or thought that senile deterioration could be arrested or reversed, strongly defended such experiments and occasionally lauded the effort to apply new discoveries in radiology and endocrinology to an age-old malady.

At the same time researchers were working on the assumption that old age was a curable pathological disorder, other scientists were investigating the possibility that old age resulted from natural developmental processes. Two early-twentieth-century spokesmen of this emerging school of thought, Charles Sedgwick Minot (an embryologist) and Charles Manning Child (a cytologist), believed that old age resulted from cumulative changes in the properties of cells and tissues as an organism matured.36 Proceeding along similar lines, Dr. I. L. Nascher sharply contrasted “senility” and “senile pathology,” a distinction he felt too many researchers blurred. He contended that old age was not a pathological state of maturity but a distinct physiological stage of life, because “the aged individual is in fact an entirely different individual from the one who was formed from the ancestors of the late cells.”37 Accordingly, Nascher recommended that doctors treating senile disease try to restore a patient’s body to a state of health normally found in later life, and not to one associated with middle age. He also pointed out that doctors should consider the effects of an elderly patient’s mental outlook and attitudes about his physical and social condition.

Besides insisting that scientific researchers view old age from a broader perspective than they were accustomed, Nascher also urged his colleagues to consider the study of senility and senile pathology a legitimate medical
specialty, complete with its own theories, areas of research, and professional standards. Nascher gave the discipline its name, “geriatrics.” He also published the most important study on old age since Charcot’s landmark—a book not surprisingly called *Geriatrics* (1914)—and served as the first president of the New York Geriatrics Society, founded in 1915.

Yet recounting red-letter dates in the fledgling field’s early history tells only part of the story. Actually, Nascher and his theories met with considerable resistance during most of the period. Finding a firm willing to publish his work proved very difficult. As late as 1926, Nascher admitted that he knew no other scientist who described himself or herself as a full-time specialist in geriatrics. Until his ideas gained credibility, the nation’s only practicing geriatrician was able to contribute little more than a name, a book, and enthusiasm to his cause. Developments in medicine after 1914 eventually did lend Nascher’s views an aura of respectability that they initially lacked. Cytologists amassed impressive evidence indicating that old age was a discrete and inevitable stage in the life cycle of cells and tissues. Endocrinologists began to define “senility” as the last major “endocrine epoch” before natural death. Even some pathologists rejected older hypotheses and described old age as a stage of physiological retrogression inherent in an organism. In so doing, experts in a variety of scientific areas corroborated the plausibility of Nascher’s theories.

Despite the fact that the study of old age was gradually acquiring the characteristics distinctive of every legitimate medical specialty and despite all the technological and conceptual advances in medicine itself, scientists did not discover a remedy for the biological aspects of growing old. Indeed, between the world wars, two radically different conceptions of old age vied for acceptance in the medical profession. One school considered “senility” a pathological disorder; the other described it as a normal physiological state. In 1941, it remained “a major problem for science to determine which is correct.” Paradoxically, the future course of action for researchers was less certain than it had been in former times because they perceived the baffling complexities of senescence more sharply.

### Coping with the Aged’s Economic Insecurity before 1929

As popular and academic writers advocated ways to salvage older people’s self-esteem and social worth, and as scientists sought methods to arrest or even vanquish the deterioration associated with growing old, still others grappled with financial aspects of the old-age problem. Americans after World War I attacked the problem of economic insecurity from two
complementary directions: on the one hand, they tried to provide a means of income for elderly workers once they retired; on the other hand, they attempted to relieve those aged men and women who currently were in straitened circumstances.

Probably the most important new retirement plan inaugurated during the period was the compulsory old-age and disability insurance program enacted by the federal government in 1920 for its half-million civil-service employees. Workers contributed part of their salaries to a general fund; the government assumed all other expenses. Connecticut, Maine, Massachusetts, New Jersey, New York, and Pennsylvania also enacted retirement systems for civil servants before 1929. In addition, retirement policies were extended at the municipal level: nearly every city provided pensions for retired police and firemen, and most gave benefits to teachers.

Retirement plans were expanded in the private as well as the public sector. In 1929, for instance, 140 industrial plans, covering nearly a million workers, paid out $6.67 million to 10,644 beneficiaries; labor organizations disbursed $3.35 million to 11,306 recipients. A few corporations—such as Westinghouse, General Electric, and Eastman Kodak—provided their pensioners facilities and equipment so that they could spend their leisure time creatively and possibly make discoveries or inventions valuable to their former employers. Yet without belittling either the concern or generosity reflected in these retirement provisions, it is important to recognize that most new retirement programs did not really guarantee workers any greater measure of security than earlier plans had provided. Like their predecessors, corporations established and expanded pension policies because they hoped to increase efficiency, promote worker morale, and combat labor turnover. Furthermore, most employers still did not provide universal coverage for their workers; they maintained strict eligibility requirements and reserved the company’s right to discontinue paying benefits at any time. The actual benefits superannuated employees might have derived continued to be of secondary importance to those who designed and implemented retirement programs.

Just as private pension schemes after World War I essentially built upon existing practices and ideas, so too Americans prior to the Depression tended to deal with indigency in old age by applying traditional methods and concepts. The family’s responsibility to aged relatives, for instance, was reaffirmed in new legislation: five more states enacted statutes enforcing the moral duty of children to support their elders; eleven other jurisdictions made failure to care for destitute parents a criminal offense. In addition, more and more private organizations built facilities to care for older people. The Bureau of Labor Statistics reported that there were 1,270 old-age homes in 1929. In explaining why they preferred relying on old-age homes rather than the almshouse in helping needy people, Americans reiterated
earlier judgments that the private institutions tended to be cleaner, more comfortable, and did not rob residents of their dignity.\textsuperscript{45}

Efforts after World War I to cope with poverty among the aged were not simply elaborations of previously established norms and precedents, however, for it was during this period that legislators first began to consider publicly funded cash assistance for the aged needy as a realistic and legitimate alternative to the almshouse. In so doing, government officials clearly were responding to mounting evidence that the elderly’s overall financial situation had become a serious “problem.” Commissions appointed by state legislatures to investigate the extent of old-age dependency in a given jurisdiction typically found “‘a state of need . . . far beyond what had been anticipated or is realized by the general public.’”\textsuperscript{46} Old-age pensions, moreover, became the leading issue of social insurance lobbyists after World War I. The movement’s most articulate and prolific spokesmen offered somewhat different assessments of the problem, but estimated that at least 40% and possibly as many as 67% of all older Americans in the 1920s could not support themselves.\textsuperscript{47} Diverse groups—such as the Fraternal Order of Eagles, the United Mine Workers of America, and the American Association for Labor Legislation—also attempted to make the public aware of the inadequacy of current means of caring for the elderly in general and of the horrors of the almshouse in particular. Abraham Epstein, who had served as research director of the Pennsylvania Commission on Old Age Pensions and had been associated with the Fraternal Order of Eagles, established the American Association for Old Age Security in 1927. Governors, including Pennsylvania’s Gifford Pinchot, added their political clout. Opposition to public old-age assistance, therefore, was increasingly eroded by the growing opinion “that the state should make it possible for those reduced to poverty by age to spend their remaining years in self-respected privacy, free from anxiety and the stigma of pauperism, living independently in their own surroundings instead of being massed in institutions.”\textsuperscript{48}

As a result of public clamor and organized pressure after 1914, old-age assistance programs operating at the state level became a new means of relieving needy older people. Initial legislative victories, it is worth mentioning, proved somewhat illusory. Measures passed by Nevada, Montana, Colorado, and Wisconsin in 1923 and 1924 generally remained inoperative: none of these laws \textit{required} county officials to establish old-age pensions, and few chose to implement the option. The Pennsylvania Supreme Court in 1925 nullified the commonwealth’s two-year-old law on technical grounds, but noted that it was not ruling on the principle of giving old-age assistance to the needy.\textsuperscript{49} This unfavorable decision, however, proved to be the last major setback. Six states had old-age pension laws in effect by the end of 1928. That twelve more states passed legislation
between 1929 and 1931 alone suggests that the first phase of the Depression did not inaugurate but clearly accelerated the trend toward publicly funded financial assistance for elderly citizens in difficult circumstances.\(^5\)

Examining the specific measures enacted reveals considerable differences among various states’ old-age assistance programs. The minimum age of eligibility in nine jurisdictions was sixty-five and seventy in the other nine. New York required that recipients be wholly incapable of supporting themselves. Most states set income and/or property limits, but three established no means tests (or eligibility criteria based on demonstrable economic need). Pensions could not exceed $250 per year in Kentucky; Massachusetts set no limit; the typical old-age pension was worth $365 annually. Procedures for processing claims and administering benefits varied from place to place. Thus there was no uniform approach to the problem of old-age dependency in the 1920s, even among states that passed public assistance laws to relieve needy older persons.

Indeed, although the legislation initiated and implemented in the 1920s established crucial precedents for more ambitious governmental old-age relief programs in the 1930s, the fact that most states did not yet pass any measures underscores the lack of unity in efforts after World War I to improve the elderly’s situation. While most Americans were willing to believe that economic insecurity in old age was a “problem,” they disagreed profoundly on the precise number of older persons in need and even on their degree of deprivation. For instance, the respected actuary Louis I. Dublin, in sharp contrast to some of his contemporaries’ far more grim estimates, suggested that only one-sixth of all elderly Americans were in difficult circumstances. A 1928 National Civic Federation survey of 13,785 people over sixty-five years old living in eleven northern cities and two villages also minimized the extent of old-age dependency, claiming that only 20–25% of the sample, which included professionals as well as blue-collar workers, depended on others for support. The study also predicted that the proportion would decline as a result of recent immigration restrictions.\(^5\) These findings clearly challenged more dire assessments of the elderly’s needs set forth at the time by Epstein, Rubinow, and others pressing for new old-age measures. In the absence of “definitive” data, Americans could select from a wide range of estimates in order to bolster their particular case for or against new efforts to assist older citizens.

Radically divergent perceptions and definitions of the aged’s socio-economic plight, however, were not the only obstacles confounding large-scale efforts to address the financial problems of being old. In the midst of the dazzling prosperity of the 1920s, it was hard to convince a majority or even an influential minority of Americans that a fundamentally different approach was necessary. In fact, many feared that any significant departure from the status quo designed to relieve the elderly’s hardships might
threaten or even destroy the social framework, processes, and values that provided financial security to most members of society. Conflicting political and economic interests in society at large no less than organizational and personal rivalries within reform circles further complicated the situation.\(^\text{52}\)

In the face of such formidable opposition, Americans after 1914 tended to supplement and expand rather than rethink and replace traditional methods of dealing with economic insecurity among the elderly. Indeed, it is telling that the federal military pension program—which clearly was designed to provide gratuities for military services to veterans and some of their dependents, but not to operate as a universal public old-age subsistence plan—remained the primary source of relief to older men and women who were poor or disabled. In 1929, 82.3% of all beneficiaries of any public or private pension plan were recipients of war-related survivor and disability pensions; 80% of all money distributed through pensions came from this source.\(^\text{53}\) Like their predecessors, therefore, Americans before the Depression continued to cope with the aged’s financial difficulties in an indirect and piecemeal manner.

One can draw two lessons from the preceding analysis. First, the degree to which old age became a national problem after World War I was as much a function of cultural assumptions as of statistical realities. Sociologists, demographers, and other commentators did not need the perspective gained from hindsight to recognize that the proportion of people over sixty-five years old was increasing at the very time that older workers’ employment opportunities were diminishing and that circumstances beyond an individual’s control were altering the dimensions of old-age dependency. They were quite alert to the actual changes in older people’s status occurring in front of their eyes. Yet the ways that Americans perceived “reality” depended on the manner in which they interpreted such trends and weighed the liabilities and assets of old age itself. These judgments, in turn, hinged not simply on empirical observations but on a host of factors, including the dynamic interaction of cultural norms and values, scientific ideas, and conventions, as well as personal biases and attitudes prevailing at the same time.

Furthermore, the extent to which Americans believed that old age had evolved into a serious problem with ominous implications in large part determined how willing they were to move beyond the ideas and practices of their predecessors. Public officials, business and labor leaders, scholars and researchers, and the public at large considered broader alternatives and implemented new ways of dealing with the personal and societal dimensions of being old only when and insofar as they considered existing methods insufficient and decided that conditions warranted a different approach.
"Solutions" to the "problems" of old age, therefore, took place at the interface of cultural assumptions and statistical realities. Precisely because the parameters of that interface were shaped simultaneously by a particular societal environment and distinctive social milieu, actual American achievements in "salvaging" the social, biomedical, and economic woes of growing old—the ultimate significance of their innovations notwithstanding—were modest in comparison to the changes that took place in the following decades.