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Elders Living 'Close to the Edge'

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Social Security has dramatically reduced official poverty rates among the elderly, but many retired people still struggle to get by, living in the gap between the poverty level and what it really takes to pay daily bills.

A new statewide initiative to improve economic security for the elderly will be launched Monday, with the unveiling of an Elder Economic Security Index which measures the actual costs of basic expenses for each county in the state. Advocates hope it can be used to align eligibility for public benefits with a more realistic measure of income adequacy.

The federal poverty level, developed in the 1960s, is based on three times a moderate food budget. But other expenses have skyrocketed in intervening years -- especially housing and health care, according to Martha Holstein of the Health and Medicine Policy Research Group, who is coordinating the initiative in Illinois.

The new index, developed by Washington, D.C.-based Wider Opportunities for Women and the Gerontology Institute of the University of Massachusetts Boston, includes housing, food, transportation and health costs and measures them by local conditions, county by county.

It turns out that a retiree relying mainly on Social Security for expenses falls far short of what's needed for a barebones budget, Holstein said.

The gap is greater for women living alone, whose Social Security is less due to segregation in lower-paying jobs and time out to raise families -- and it's greater yet for women of color, she said..

According to WOW, average Social Security earnings for single elderly women were just above the poverty level of \$10,210 a year -- and for blacks and Hispanics, they're below that level.

A older woman living at the poverty level who receives all the public benefits

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for which she qualifies still falls significantly short of an adequate income, Holstein said.

For a third of the nation's elderly, Social Security accounts for 90 percent or more of their income.

"People are living very close to the edge," she said. "At the end of the month they're running out of food."

Dr. Claudia Fegan of the Woodlawn Health Center said that many of her elderly patients have trouble paying for their medications, even with the new Medicare drug plans. When they get to the plan's "donut hole," they have to pay out of pocket. "Medication for things like Alzheimer's or seizures is very expensive -- it can run \$100 a month for each medication."

Her patients end up skipping their medications -- which can have serious health consequences. "Your diabetes is not controlled; you can lose your vision because your glaucoma isn't controlled; you can have a stroke if your blood pressure isn't controlled."

"These are people who always thought of themselves as middle-class," Fegan adds.

WOW is developing similar indexes for every state -- they've already been introduced in Massachusetts, California, and Pennsylvania, and an initiative in Wisconsin will be introduced next month.

"We'd like to replace the poverty level with the Elder Index" to determine eligibility for public programs, Holstein said.

One initial goal is to reduce barriers to the state's program for community-based long-term care, Holstein said. Sliding scale fees for people above the poverty level are unaffordable for many, she said.

U.S. Representative Jan Schakowski will join Holstein, Fegan, and others at a press conference to launch the Elder Economic Security Initiative on Monday, June 23 at 10:30 a.m. at the Chicago Foundation for Women, 1 E. Wacker, 20th floor.

More Info:

- [Martha Holstein](#) at [Health and Medicine Policy Research Group](#), 312-372-4292
- Claudia Fegan, M.D. at Woodlawn Health Center, 773-753-5500
- [Joan Grangenois-Thomas](#) at [Wider Opportunities for Women](#), 212-627-2404

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