Homes, Not Nursing Homes

"Replacing the Nursing Home" by Peter Uhlenberg, in *The Public Interest* (Summer 1997), 1112 16th St. N.W., Ste. 530, Washington, D.C. 20036.

Nursing homes, which now house 1.7 million elderly Americans, cost too much (more than \$45,000 a year for a middle-range one) and provide poor care in a dehumanized environment. The indictment is familiar, but Uhlenberg, a sociologist at the University of North Carolina at Chapel Hill, argues that something can be done: phase out the government's \$50 billion annual subsidy, and channel it instead to "cost-effective, noninstitutional alternatives," including home care, "assisted living," group homes, hospices, and rehabilitation programs.

The \$80-billion-a-year nursing-home industry developed after World War II largely as a result of government support, Uhlenberg points out. Fewer than 200,000 people lived in nursing homes in the mid-1940s. The Hill-Burton Act of 1946 provided money to build nonprofit nursing homes, while the Federal Housing Administration guaranteed mortgage loans to for-profit ones. After Medicaid was established in 1965, the government would pay the full cost of long-term care for poor older persons in nursing homes-but not in other settings. The "deinstitutionalization" of mental hospitals, starting in the 1960s, provided another boost to nursing homes. By the early 1970s, more than one million elderly folk were living in such institutions.

Today, Uhlenberg writes, "all but the very wealthy face the threat in old age of having to transfer their life savings to a nursing home and becoming wards of the state." In return, they usually receive "unloving care" from low-paid, unskilled aides. The quality of care could be improved by raising salaries, reducing workloads, and providing more training, he says, but that would only make care even more outrageously expensive.

Some extremely disabled individuals must be institutionalized, the author concedes. But roughly 80 percent of the older persons who are dependent on others for help in dressing, eating, and other routine daily activities live in their own home, he points out, and even more could remain at home if government policies were reoriented. Spending on home health care has been growing rapidly in recent years, in part because Medicare and Medicaid requirements have been eased. Medicare expenditures increased from \$1.9 billion in 1986 to \$9.7 billion in 1994. The regulations should be revised, Uhlenberg says, to encourage much greater use of home health care.

Studies indicate that the cost of providing shelter, food, personal assistance, and medical care at home is generally less than at a nursing facility, Uhlenberg says. And the quality of the care is superior, in part because the individuals or their family members "have greater control over who provides the care and how well [it] is provided"—not to mention the fact that family and friends can continue to help care for the person. Institutionalizing someone puts an end to all these advantages, Uhlenberg writes.

The Redskin Fallacy

"How Indians Got to Be Red" by Nancy Shoemaker, in *The American Historical Review* (June 1997), 400 A St. S.E., Washington, D.C. 20003.

Many scholars today believe that Europeans invented the idea of race and imposed their notions of racial identity on others. But in at least one case, argues Shoemaker, a historian at the University of Wisconsin, Eau Claire, a non-European group named itself.

That group is the Indians of North America. It has long been thought that they were labeled *red* by early European explorers—not because of their skin color, which the Europeans usually described as tawny or brown, but because they often daubed themselves with red paint. Swedish naturalist Carolus Linnaeus made red a racial category in his Systema Naturae (1740).

But Shoemaker says that records of early meetings between Europeans and Indians show that the Indians had already taken the name red for themselves. In 1725, for example, a French priest in Mobile, Alabama, recounted a story told by a Taensas chief involving three men, one white, one black, and one red. The priest felt compelled to explain to his readers that the latter was an Indian, "for they call themselves in their language 'Red Men.'" In a 1726 transcript of an effort by the English to