



A Citizen Voice for the Aging Experience

ENGAGING NH NEWS

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GUEST OPINION:

MAKING VOTING ACCESSIBLE IN NH

by Cindy Robertson, Esquire

As we head into another round of Federal and Statewide elections, it is worth thinking about how critical the right to vote is to our freedom. Most of us take our right to vote privately and independently for granted. We assume we'll just show up at the polls on election day, show our identification, get a paper ballot, enter the booth and make our selections. Nothing to it. We won't need anyone's help to do any of this.

But what if you were unable to see the ballot or unable to hold a pencil to mark your choice? Chances are you would need to rely on someone else to assist you in the booth to vote – but then your vote wouldn't be "private and independent". As we age, the odds of needing this assistance increases, but does it have to?

Many people with disabilities have faced these challenges for years. In 2002, Congress passed the Help America Vote Act (HAVA), which, among other things, required states to update and upgrade their voting equipment so that it is "accessible". In New Hampshire, this resulted in a "phone/fax" accessible voting system which enabled a voter to "call in" his/her vote using the phone and have his/her ballot printed through a fax machine. While this machine was certainly a step towards allowing voting to be independent and private, there were many issues with it including the length of time it took to actually cast a ballot.

In February of this year, however, the State rolled out a new accessible voting

The goal is for everyone to someday use the One4All voting machines

machine called the One4All machine. New Hampshire was the first in the country to use such a machine during a federal election. The One4All accessible voting machine uses a tablet, keyboard and printer instead of a phone and fax. A voter has multiple ways to input his/her selection either by using the touch screen on the tablet, the keyboard, or simply speaking into a microphone attached to a set of headphones. The ballot is then printed using the attached printer and the voter submits his/her ballot like everyone else. The whole voting process now takes virtually no longer than using a paper ballot.

The Secretary of State's office has stated

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that its goal is for everyone to someday use the One4All machine regardless of disability thus eliminating the way most people currently vote. With everyone using the exact same machine, everyone is guaranteed the right to vote privately and independently. In order for this to happen, however, people need to use the new machine and weigh in with possible improvements.

We urge EVERYONE to use the new accessible machine and let us know what you think. There will be one machine at every voting location and, if you wish to use it, simply let the check-in person know. They should *not* give you a paper ballot when you check in because your ballot will be printed in the booth when you finish voting. (This was an issue during the last election). To see a demonstration of the new machine, you can check it out [here](#).

Seniors are a strong voice when it comes to voting and elections. It is critical that the right to vote privately and independently is never lost and is available for everyone regardless of disability. We encourage you to use the new machine when you go to vote in September and November and let us know what you think. With your input, NH can have the best voting system in the country for everyone!

Cindy Robertson is the Senior Staff Attorney at the Disability Rights Center-NH, a federally-mandated protection and advocacy organization for NH. It provides information, referral, advice, legal representation and advocacy to individ-

WHO ARE WE?

EngAGING NH is an all-volunteer not-for-profit organization registered with the State of NH. We work to support and promote activities, policies, planning and values that respect and include ALL older adults.

uals with disabilities on a wide range of disability-related problems. They are actively involved in ensuring that everyone has the right to vote privately and independently by routinely monitoring polling places across NH during elections and, through the use of surveys, collecting data on voting experiences.

The use of the One4All machine was a large part of the monitoring conducted by the DRC during the February election and it is expected that it will continue to be as well for the upcoming elections. We would love to have your feedback on the new accessible voting machine. Please check out their website at www.drcnh.org.

ical, and economic effects. The project will be led by Pulitzer Prize-winning journalist Gretchen Grosky.

Over the course of the series, Grosky's coverage will attempt to provide readers with a deeper understanding of aging issues. It will look at ways that work to address problems that an older population presents and look, too, at opportunities an older population offers.

“I am looking forward to covering the issues that face New Hampshire's aging population, but also finding solutions that will work to make all of our lives a little easier, a little healthier, and more rewarding,” Grosky said. “The media often focuses on just the problems and the issues, but stop at finding solutions. With this grant, Union Leader has proven once again that its commitment to the Granite State goes beyond just covering what others do. It's about using its role as the state's newspaper to make a difference, to help our citizens, and to make life better for all.”

At the end of the series, the public will be invited to a forum to dis-

NH Updates

GROSKY TO LEAD AGING ISSUES COVERAGE IN NH

New Hampshire has one of the oldest populations in the country. In a series of stories over the next year, the New Hampshire Union Leader and Sunday News will examine some of the implications of that fact, including its social, med-

Discuss the series with Grosky and several sources developed over the course of the year. Readers will be able to refer back to past coverage on our website, UnionLeader.com. The series was funded by a grant from the nonprofit Endowment for Health, though the New Hampshire Union Leader will maintain editorial control. Grosky can be reached at ggrosky@unionleader.com or 206-7739.

Union Leader, 7/17/16

NH ALLIANCE FOR HEALTHY AGING

A new coalition focused on the health and well-being of elders in New Hampshire was launched in March of this year. Rooted in nearly two years of work to engage stakeholders from many disciplines and from across the state, the NH Alliance for Healthy Aging (NH AHA) will advance a shared agenda in support of its vision to *create communities in New Hampshire that advance culture, policies and services which support older adults and their families, providing a wide range of choices that advance health, independence and dignity.*

This vision will be accomplished through a collective approach that:

- 1) *Changes the conversation* about aging across all sectors of the community
- 2) *Changes public policy* to promote a strong, stable infrastructure for aging and
- 3) *Changes practice* across public and private sectors to improve care and support for older adults,

7TH ANNUAL FRIENDS OF NHOLTCO MINI-GOLF TOURNAMENT

Tuesday, September 13, 2016, 10:00 am - 3:00 pm

Friends of the NH Office of the Long-Term Care Ombudsman (NHOLTCO), a non-profit organization formed in 2010, seeks to improve the quality of life for individuals living in NH's long-term care facilities through education, volunteer support, and fund-raising.

This event is an annual recognition event to say Thank You to the volunteer ombudsmen on behalf of residents, their families, and others who appreciate their dedication. It perpetuates the annual Judith D. Griffin Award for outstanding and exceptional advocacy on behalf of LTC residents, and additional resources make it possible to provide continuing education scholarships for volunteer Ombudsmen to sharpen their advocacy skills.

For the past several years, nursing home residents and others have had a wonderful time on the mini-golf courses in Chichester and Somersworth. Join the fun and organize a TEAM or become a Sponsor. If you prefer, contributions from anyone in any amount and at any time are always appreciated.

For additional information, please contact Roger Vachon at skeeter4us@aol.com or 603-223-6903 or Darlene Cray at darlene.cray@dhhs.nh.gov or 603-271-4396.

their families and their communities.

Priority area workgroups are coalescing to advance specific steps toward this shared vision. The workgroups will focus on: developing an advocacy infrastructure; convening a cross-disciplinary policy group to better coordinate care and services for older adults; improving the workforce availability for quality healthcare and social services; enhancing support for family caregivers; increasing transportation options; advancing zoning changes to promote affordable and accessible housing options; and ensuring access to information on resources and services is available for older adults and their families.

For more information or to participate in the Alliance's work groups, contact the Coordinator: Jennifer.Rabalais@unh.edu.

From Our Readers

APPRECIATION

Another great issue. Thanks

MH

HUMOR

Still laughing over 2 drops of water. Good one.

DB

Bicycle Article

Thank you Bill Weiler for the article on bikes. I never knew about the white lines being slippery when wet.

JK

(Editor's Note: We received several comments about the white lines

FYI . . .

This newsletter is intended as a forum for you to share personal experiences, information and points of view.

In our media driven world of skillful marketing and political spin, we believe that diversity is critical to discernment and therefore the EngAGING NH Board of Directors welcomes all points of view, expressed with civility!

While the opinions expressed do not necessarily reflect those of the Board members, our intent is to include material that assists you in forming your own opinions.

To send articles or to add your name to our newsletter mailing list, contact:

engagingnh@gmail.com

as well as general appreciation for the perspective on sharing the road.)

FINANCIAL ABUSE UPDATE

The House of Representatives Tuesday night unanimously approved legislation that would protect financial advisers from liability when they try to stop the financial exploitation of seniors. The measure, the Senior Safe Act, passed the House, passed the House on a voice vote.

It ensures that advisers who report elder financial abuse to federal or

state securities regulators, law enforcement, adult protective services or other appropriate agencies are not held liable for violating privacy laws. The bill also addresses training for advisers on how to spot elder financial abuse.

The vote on the House floor follows unanimous approval last month in the House Financial Services Committee. The Financial Services Institute sent more than 100 members to Capitol Hill in June to advocate for the House and Senate legislation.

“While Washington has been gridlocked for a long time, I'm very pleased that the House was able to pass this critical legislation, and I am hopeful the Senate will quickly follow suit,” FSI president and chief executive Dale Brown said in a statement. “The Senior Safe Act is a big step forward in the prevention of elder financial abuse across the country.”

Last week, laws went into effect in three states that mandate and provide safe harbor for adviser reporting of elder financial abuse. For the entire article please click [here](#):

Lynn Koontz

Focus on Community

AGE-INTEGRATED SENIOR LIVING

Some senior living communities are moving in a more age-integrated direction, and educational institutions are part of the picture. For example,

“In return for free rent, music students live in Deerfield Linespace Community, Des Moines, Iowa.”

The 10 year-old independent living residence invited a music student from nearby Drake University to live in her own apartment for free in exchange for providing residents with musical concerts. The same is happening at Judson Manor artist-in-resident program in Cleveland.

Some senior-only communities are inviting preschools into their hallways. Inter-generational changes are few and subtle today.

At Providence Mount St. Vincent in Seattle, 125 children, ages under 1 year to 5 and their teachers join with residents, average age 92. The nursing home provides the space for a licensed nonprofit child-care center and preschool established on its campus in 1991.

A report in the January issue of The Atlantic says the program was designed to offer companionship, improve loneliness and mental decline to the primarily non-ambulatory residents. Residents visit the children in their classroom and the preschoolers visit the elders in their settings.

Another story in The Atlantic brought attention to a residential and care center in Deventer, part of the Netherlands. There in exchange for 30 hours of volunteer work per month, students live rent free among 90 year old nursing home residents.

That story reports that the inter-generational model is gaining in popularity. Since it began in 2012, two more nursing facilities in the

Netherlands opened their doors to students. Another in Lyon, France did the same.”

From “Does Old Mean 'Senior' Living Only?” Look Again” at:

<https://www.myseniorportal.com/content/digest-archives/editorial-comments/does-old-mean-senior-living-only-look-again>

H.R. Moody, Editor, Teaching Gerontology, July 7, 2016

INSIDE THE NATION'S LOOMING SENIOR HOUSING CRISIS

Every day, 10,000 Americans turn 65. That will be true for the next 15 years as the Baby Boomers slide into retirement. Here's the question: where will they live?

Know that the Social Security Administration said that if you turn 65 today, you will live to 84.3 if you are a man. If you are a woman, it is 86.6. Added SSA: “And those are just averages. About one out of every four 65-year-olds today will live past age 90, and one out of ten will live past age 95.”

Our retirement savings also are paltry. A Government Accountability Office 2015 study said that average Americans between 55 and 64 had about \$104,000 in savings. Many have nothing saved.

In 2015 SSA said the average monthly check it issued was for \$1,335.

Will there be enough housing to put a roof over every gray head? How will they pay the rent?

When the Bipartisan Policy Center, a Washington, D.C. think tank,

Raise Your Voice!
Please let us know what's on your mind and what's important to you.
engagingnh@gmail.com

recently looked at senior housing, it said in a detailed report: “The current supply of housing that is affordable to the nation's lowest-income seniors is woefully inadequate. As more low-income Americans enter the senior ranks, this supply shortage — currently measured in millions of units — will become even more acute.”

The good news: many are scrambling to meet the need. There are efforts to provide low income public housing, private affordable housing, and many companies are engaged in developing senior housing for the affluent.

Public housing has been the traditional go-to for those lacking means, seniors included, and many big cities - such as New York, Philadelphia and Chicago - have extensive inventory of income tested senior housing. But there is nowhere near enough. In much of Chicago, the waiting list for senior public housing is over two years. In New York, it is over four. In Philadelphia the public housing waiting list is presently closed, and said the housing authority, it has 104,000 on the wait list. The Philadelphia Housing Authority added: “Due to low turnover, applicants may not reach the top of the waitlist for ten years.”

“Public housing continues to have extremely long waiting lists, so it is not a practical option for many seniors,” said David Reiss, a professor at Brooklyn Law and an expert on housing.

Where it works, it works. In Chicago, Charlton Hamer, vice president of public housing at the Habitat Company, said his company manages over 3,000 units for seniors. He added: “But the stock is diminishing. Units aren't being constructed to meet the demand.”

That is the story nationally, and the upshot is that it is unlikely that public housing will be the solution for that many seniors. Larry Pusateri, vice president of Evergreen Real Estate Group in Chicago, agreed. “The senior tsunami is coming but I don't see anything positive coming from Congress. Congress does not want to fund additional units.”

Private low income housing

Nancy Bastian, a partner in Cecil Baker + Partners Architects in Philadelphia, said she had just finished a 40 unit low income senior housing project named St. Francis Villa in that city's Kensington neighborhood. Her message to seniors: even when public housing lists are closed, there may be activity in the private sector. “Private developers are critical. There are private developers who are building affordable housing,” said Bastian.

The Roman Catholic Archdiocese of Philadelphia owns St. Francis Villa for the next 30 years, said Bastian.

At that project, which is just now opening its doors, every unit was claimed some time ago. “Thirty applicants did not make it,” said Bastian, underlining the need for speed in grabbing affordable housing.

Private (no income limits). The bulging senior population has attracted substantial investment, said Ben Burke, an executive with Chicago developer CA Ventures, which, said Burke, has investments from Goldman Sachs to help it build a number of senior focused projects. “We have one property open,” Burke said. “Another five are under construction. We have another 10 deals that we control.”

The CA Ventures focus is on assisted living facilities where seniors live in a place that provides some care but not at the level of a skilled nursing facility. A lot of investors are eyeing exactly that space. At many of these, the only problem will be money. “Most development is coming in at the top of the market,” said Bennett Johnson, a vice president and practice leader for senior housing at CBRE Valuation & Advisory Services.

Private, for profit development definitely will help some seniors - ones with money. As for the rest, experts mainly shrug that we will see what we see. Nobody knows exactly how this housing future will play out.

Want specific information about low income housing for seniors? A key resource is the [portal](#) maintained by HUD. It offers advice as well as links to state and local housing authorities.

News You Can Use

PROPER DRUG DISPOSAL

With our serious opiate crisis, it is important to know when and how to correctly dispose of old or unneeded pharmaceutical drugs.

DO NOT flush them down the sink or toilet. Instead, check these helpful websites to find what to do in your community:

- Disposemy meds.org
- Leardaboutxsafety.org, or
- Call the US Drug Enforcement Administration at 800-882-9539 to find an authorized collector.

STRESS MANAGEMENT IN 4 STEPS

For one of Europe’s most eminent neuroscientists has devised a simple, four-point plan for channeling stress and turning it to one’s advantage.

Professor Ian Robertson’s “four-step brain hack to harness stress” is, he insists, based on scientific research beginning with step one: tell yourself you are excited rather than stressed.

Step two is breathe in slowly through the nose for five seconds and then exhale for six; while step three involves posing like a superhero, puffing out your chest and standing up tall.

Wearing a cape is not vital. Step four requires you to squeeze your right hand shut for 45 seconds, open it for 15 and then shut it

again. Simple. Read the whole article by clicking [here](#).

HOW TO TALK TO MOM VERSUS DAD ABOUT IN-HOME CARE

Watching an older parent age and become more frail and vulnerable is hard for many of the 44 million American family caregivers of those over the age of 50. As our parent held our hands to balance our steps, made our meals, bathed us, etc. many adult children find themselves in this same position helping and caring for an aging parent. But, getting quality help with activities of daily living (called ADLs) in order to keep a parent at home as long as possible can not only be affordable but can give everyone – mom or dad and the adult child caregiver – a sense of safety, security and satisfaction.

I have found in the 12 years I have worked in caregiving and aging that having the conversation with our older loved ones about their long-term care or aging in place needs is one of the most difficult discussions we encounter in life – for both parents and adult children. Our need to deny the challenges facing a parent that comes with the bonus years we call “longevity” and their twin needs of not burdening us and not feeling a loss of control and freedom, often make this a conversation we all skip.

In my research talking to both family and professional caregivers, I have come across some insights and tips on how to have the conversation with a parent about securing in-home care. The typical

responses are that it is not affordable, the parent doesn't want a stranger coming into their home or they just won't admit they need the extra help whether it is cleaning the house, washing the dishes, preparing a meal, getting to the grocery store, taking a stroll around the block, etc.

As an advisor to [CareLinx](#), the nation's largest online caregiver marketplace, I have talked with the CareLinx professionals on how this conversation can take on a different tone and emphasis when it's dad versus mom we're with whom we're having "the talk":

The Caregiving Conversation with Dads

Although it sounds stereotypical, most of our fathers (if you are a Baby Boom or Gen X adult) were the head of the household. Many young children can repeat the refrain from our mothers when we misbehaved, "Wait until your father gets home." Fathers see their role as protecting and providing for their families. Thus, our aging fathers find themselves in new territory when it is them needing the care.

According to research professor and author Carol Gilligan who has focused her studies on gender differences (*In A Different Voice*), fathers sometimes have a harder time accepting change. Their fear of change is that it may mean they are not in control, they may not be consulted on decisions and they are not strong enough to perform daily activities without help. On the flip side, a study conducted by Northwestern Mutual found that

CAN YOU HELP?

You may make a donation to ENH through our fiscal agent, Disabilities Rights Center-NH, Inc. which is a non-profit 501 (c) (3) corporation.

Make your check out to Disabilities Rights Center-NH, Inc. and note "EngAGING NH" on the memo line. DRC's mailing address is 64 North Main Street, Suite 2, 3rd Floor, Concord, NH 03301-4913.

Donations are tax deductible to the extent allowed by law.

more fathers talk to their adult children about their long-term care plans and wishes than our mothers.

Given these two data points, a wise adult child caregiver may take this two-pronged approach in a conversation with Dad about in-home care:

Focus on not calling the in-home caregiver a "caregiver." Rather convince dad he needs a personal assistant around the house. This puts him in a supervisory, directorial role. Instead of feeling vulnerable he feels he is in charge. Also, tell him with the CareLinx service, he gets to choose who comes to the home instead of traditional agencies which just send out an available care professional. This lets him know he is in control.

In addition, show him the CareLinx web site where you can see that using the CareLinx online caregiver marketplace for in-home care saves 30-50 percent over traditional agencies. He'll feel like he's still protecting and providing for his family by making a great deal on the care help needed.

The Caregiving Conversation with Moms

For aging moms, financial security and safety while living alone become primary concerns. According to WISER (Women for a Secure Retirement), 40 percent of women over age 65 rely solely on Social Security benefits as their only source of retirement income. In addition, the U.S. Administration on Aging reports that 47 percent of women over age 75 live alone at home.

Enter CareLinx to help you assuage mom's concerns about costs of in-home care and give her the security in knowing she is protected by having an outside care professional who comes into her home. As stated above, CareLinx saves considerably on costs of traditional agencies. The average family spends \$100,000 on in-home care (over the time period care is needed) so saving 30-50 percent of this cost makes an unaffordable service suddenly affordable. And, with CareLinx's \$4 million Safeguard Policy backed by Lloyds of London, along with the thorough background checks conducted on its 150,000 network of care professionals nationwide, CareLinx offers mom a sense of security and safety that you cannot guarantee if you find a care pro-

fessional through an online forum such as Craig's List.

When it comes to having the care-giving conversation about in-home care with mom or dad, knowing what is important to them makes all the difference in the world.

Sherri Snelling is CEO of [Care-giving Club](#) and author of A Cast of Caregivers – Celebrity Stories to Help You Prepare to Care, a paid advisory board member of CareLinx, and she writes on care-giving for PBS Next Avenue, Forbes.com, USA Today and Huffington Post. She was the chairman of the National Alliance for Caregiving and has served on advisory groups for the White House Middle Class Task Force on Caregiving, CMS, AARP as well as for other companies.

CareLinx. Jun 29, 2016

THE ELDER JUSTICE COLLATION

Commends the release of a final updated rule on the Victims of Crime Act (VOCA) issued by the Department of Justice and the Office of Victims of Crime.

The EJC began its work on this back in 2014 when Congress raised the cap on funding under VOCA from roughly \$700 million to \$2.3 billion. At that time we began advocating for some of these new funds to go to victims of crime who were victims of elder abuse. This work continued in 2015 and at the White House Conference on Aging, the President called for new guidelines to be issued to have VOCA funds be directed to underserved victims, in-

WE WANT YOU TO KNOW

EngAGING NH promotes citizen leadership and the active involvement of New Hampshire's older adults in the development of communities and public policies that support all individuals as we age. We are a COMPLETELY VOLUNTEER organization with no paid staff, and a limited budget.

We actively partner and work with other NH advocates.

Formal Partnerships

- NH State Independent Living Council
- State Committee on Aging-Vaughan Awards
- Disabilities Rights Center—NH
- NH Cares
- UNH Center for Aging and Community Living
- Oral Health Care Expansion, Children's Alliance of NH
- Self Advocacy Leadership Team (SALT)
- Mid-State Regional Coordinating Council
- Southern New Hampshire Planning Commission

Active Collaborations & Groups:

- Elder Rights Coalition
- Department of Health & Human Services

Other Groups we work with:

- AARP
- NH Hospice and Palliative Care Organization
- NH State Committee on Aging
- NAMI
- NH Alliance for Retired Americans
- DD Council
- UNH Institute on Disabilities
- NASW-NH
- Area Committees on Aging
- NH Association of Senior Centers
- NH Statewide Independent Living Council
- NH Legal Assistance
- ServiceLink

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cluding victims of elder abuse. The EJC also commends the release by ACL of the [Long-Term Care Ombudsman Programs final rule](#), which became effective on July 1, 2016. This rule will guide implementation of the parts of the Older Americans Act which governs grants to states for operation of Long-Term Care Ombudsman programs.

BOOMERS TAP INTO POWER OF ARTS TO CHANGE HOW WE AGE

Philanthropists, scientists, artists and entrepreneurs who are 50+ are redefining what it means to grow old in America, and many of them see the arts as a powerful tool to accomplish that goal.

“I believe very strongly that participation in the arts is important throughout life,” says Ellen Michelson, founder and president of Aroha Philanthropies, which sponsors Next Avenue’s Artful Aging special report.

Her organization hosted a convening last fall in Minneapolis on the topic: “Artful Aging: The Transformative Power of Creativity.”

“There’s a line I’ve stolen from *Hamilton*,” Michelson says, quoting the hit Broadway musical. “This is not a moment; this is a *movement*.”

As artful aging advocates shared insights on the role of arts participation to spark joy and vitality in older adults, it truly did feel like a

How to Contact Your State Committee on Aging Representatives

County	Name	Email
Belknap		
Carroll	Kate Cauble	kemc226@aol.com
Cheshire	Bob Ritchie	fictionfitz@gmail.com
Coos	Mark M. E. Frank	maxfra@aol.com
Hillsborough	Sherri Harden	hardensherri@gmail.com
	Joan Schulze	joanschulze@myfairpoint.net
	Russ Armstrong	equizr@gmail.com
Merrimack	Herb Johnson	clairhonda@msn.com
Rockingham		
Strafford	Candace Cole-McCrea	snowyowl@metrocast.net
Sullivan	Larry Flint	wrecman@comcast.net
<i>State Reps & Senators</i>		
Cheshire	Rep. Susan Emerson	semerson435@aol.com
Website:	http://www.dhhs.nh.gov/dcbcs/beas/aging/	

revolution was underway. And the experience of participants in the event, as well as others who work with older adults, shows that both demand for, and interest in, artful aging are growing.

Programs in Demand

Janet Brown, president of Grantmakers in the Arts, a national association of funders, says her organization has seen a groundswell in interest for creative aging programs during the past five years.

“Two things that are hard to quantify are happening quietly,” she says. “Baby boomers are involving themselves in activities they did in high school, and the current generation will

not tolerate the kinds of facilities [nursing homes and senior living facilities] we have now.”

These factors, she says, are going to further drive demand for arts programs and new approaches to housing for older adults. In addition, using arts as a tool in health care is gaining momentum for patients, caregivers and doctors, Brown says.

“Science tells us that this kind of programming will keep people healthier,” she notes.

Backed by Research

Julene Johnson is spearheading what is believed to be the largest scientific study in the world on the health benefits of participation in an arts program. An expert in mu-

sic and social neuroscience and the associate director at the University of California, San Francisco's Institute for Health & Aging, Johnson says what makes the arts so powerful is that they have the ingredients for: Challenging the mind and body; Creating a deep level of engagement; Offering a way to express and share culture

Allowing for emotional expression; and Providing the opportunity to create beauty. Her Community of Voices study of more than 400 diverse adults hypothesizes what smaller studies have hinted at: that participation in community choirs reduces the risk of poor health outcomes. Results are expected in fall 2016.

The Next No-Brainer

The arts are accessible, relatively inexpensive to deliver, reach people of different socioeconomic and racial and ethnic backgrounds and can help vulnerable adults to age in a creative and graceful way, Johnson says.

"We need more creative ways to improve the quality of aging," she adds. It's not going to happen overnight, of course.

Thirty years ago, Michelson points out, exercise equipment wasn't common in residences for older adults. Now it's a no-brainer. People demanded it, and the culture changed. That's starting to happen with artful aging.

"It takes a mind change. That's all," Brown says. "It's going to happen because it's low-hanging fruit and the demo is going to insist on it."

Heidi Raschke, Next Avenue

HOUSE SUBCOMMITTEE PROPOSES TO KEEP SHIP FUNDING INTACT

The U.S. House Subcommittee on Labor, Health and Human Services, and Education recently approved a bill that would provide funding for the State Health Insurance Assistance Program (SHIP) at the current level of \$52.1 million, a measure applauded by the Medicare Rights Center. This comes after the Senate Appropriations Committee recently proposed eliminating SHIP funding altogether.

The SHIP is the only resource that provides free, personalized, unbiased counseling on the growing complexities of Medicare coverage. Eliminating the SHIP would leave millions of older Americans, people with disabilities, and families who need help comparing coverage options, appealing denials, applying for financial assistance and navigating their Medicare coverage—with nowhere to turn.

In the months ahead, it is imperative that Congress adopt or improve on the House Subcommittee proposal to provide SHIP funding at the current level. Led by the National Council on Aging, the Med-

icare Rights Center and 63 other groups sent a letter to the House Committee urging them to protect SHIP funding and provide the support and assistance needed by older adults, people with disabilities, and families by, at a minimum, retaining SHIP funding at the current level.

Raise Your Voice!

Medicare Watch, 7/7/16

FORGETTING WHO'S WORKING FOR WHOM

A nursing home I visit has a wonderful sign on the wall near the employee time clock in the front lobby.

"The residents here do not live in our workplace," it states in large lettering. "We work in their home."

How I wish that were embedded in the hearts of all of us who work in nursing homes.

That simple declaration might surely change the way we would all think.

We might have the realization that the residents were truly paying for our services - that our paycheck comes from them. We might remember they are our employers.

Chances are they worked hard all their lives and their Medicare is not a "free" insurance but one that they earned over decades of working.

- We might knock on their doors (yes, even their open doors) before we walked into their rooms.

ENH welcomes all points of view and invites your submissions.

To send articles or to add your name to our newsletter mailing list, contact:

engagingnh@gmail.com

- We might call them Mrs. Clark instead of Bessie or Evelyn.
- We might ask if there was anything extra that we could do for them to make their day more pleasant.
- We might try to give them a little more respect.

If someone is wealthy enough to hire 24-hour care in their private house, we would “get” that we worked in their home.

But I am thinking that most of us don't “get” that about that nursing homes. They are people's homes. And, yes, we are working in their homes.

The sign in that nursing home front lobby is a great reminder.

In fact 1.3 million Americans live in nursing homes across the country, and many have lived there for years.

So often, nursing home residents are not treated with the respect that they deserve, let's face the truth about ourselves in this.

We often don't treat them with respect and dignity. And many of us do behave as if they are in our workplace.

We are often inconvenienced when they need an extra glass of water or an extra trip to the bathroom when we are getting ready to go off our shift and go home to our families and our personal lives.

We are often put out when the residents want a little extra.

I am thankful for those who have families who advocate for their

loved ones in nursing homes - families who know that we are working in their parents homes - families who hold us accountable when their parents are afraid to speak up to us, or, worse yet, when they cannot speak up because they can no longer talk.

When I get a new nursing home patient on our hospice service and am told they have a “problem family,” I often look heavenward and thank God.

Because more often than not, that means they have a family who have expectations of the nursing home staff and when those expectations are not met, they stand up for their loved one, when they cannot stand up for themselves.

And while those who live in nursing homes cannot set their own schedules or choose when they will get up or go to bed or have lunch, because their homes are institutions that house many other residents - they can at least expect us to treat them with dignity and respect.

We cannot change their schedules either. But we can change our attitudes. And hopefully we can remember that sign when we work in nursing homes: “The residents here do not live in our workplace. We work in their home.”

Susan Nolan, a longtime New Hampshire journalist and a hospice chaplain specializing in eldercare. Union Leader, 6/3/16

Health & Wellness

10 THINGS YOU CAN DO RIGHT NOW TO LIVE LONGER

If you want to have the longest, healthiest life possible, you should never have lit that first cigarette. Never stepped foot inside a fast-food restaurant or driven somewhere you could have walked. Never let yourself get those nasty sunburns.

If you did, take heart. There's still plenty you can do to add years to your life.

“Most things I would say are common-sense, things you were taught in first grade,” said Dr. David Johnson, chair of internal medicine at the University of Texas Southwestern Medical Center.

So listen up. These 10 ways are easy and have more significance than most of us realize. At the very least, “they allow you to live more healthily in a much more psychologically satisfying life,” Johnson said.

1. Floss

Flossing removes plaque, the bacterial film that forms along your gum line. Get rid of bacteria, and you lessen your chances of heart disease, stroke, diabetes, Alzheimer's disease and some forms of cancer, said Dr. Larry Korenman, a Texas dentist. “Oral bacteria can create proteins that are found in artery walls and in the bloodstream,” he said, “causing blood to clot more easily.” Only 5

to 10 percent of Americans floss daily.

2. *Get a colonoscopy*

“It’s a great test,” said Dr. Radhika Vayani, an internist at the University of North Texas Health Science Center in Fort Worth. “The 24-hour prep is the worst. ... But you won’t feel the procedure. If they see a polyp, they get rid of it right then and there. That could save you from having colon cancer in five years.”

Nine of 10 people whose colon cancer is discovered early will be alive in 10 years, according to the American Cancer Society.

3. *Stop eating before you’re full*

Most Americans eat and eat “till we’re so full we’re about to be sick,” said Vayani. “But it takes the body 15 to 20 minutes to say, ‘You’re full.’ ” Being 100 pounds overweight can subtract a decade from your life, an Oxford University study found.

4. *Use sunscreen*

In a Centers for Disease Control study, only 32 percent of adults reported usually applying sunscreen. Yet this year in the U.S., 3.5 million people will get skin cancer and 76,000 more will develop melanoma, says the American Cancer Society. Every hour, someone will die.

5. *Stop smoking*

Yes, despite mounds of evidence it’s bad, “tons of people smoke. If you quit at age 30, you can increase your life by 10 years,” Vayani said. Quit at 40? Add nine years. 50? Six years. 60? Three.

6. *Sleep*

Not getting enough has been linked to memory problems, hearing problems, anger, high blood pressure, stroke, depression, vehicle accidents and obesity. A decades-long international study of 1.3 million people found “unequivocal evidence of the direct link” between lack of sleep and premature death.

7. *Move*

“Exercise has been demonstrated over and over to be useful,” Johnson said. “Walking gets you outside, and some outside is good as long as you don’t overdo it. The best way to get vitamin D is sunshine.”

8. *Eat produce*

Benefits abound. Among them: Eating five or more servings a day reduces your risk of stroke by 26 percent, according to a study reported in *Men’s Health*.

9. *Cultivate healthy relationships*

Spending time with family and friends is “psychologically help-

ful,” Johnson said, adding that it “isn’t a cure-all; it won’t counteract a McDonald’s cheeseburger.”

Vayani said, “If you have people in your life who are negative, who are pulling you down, you have to get rid of that relationship. It affects you more than you realize.”

10. *Be grateful*

“We experience great things all day long that we fail to acknowledge,” Johnson said. “Our health is more than just physical health. I see dozens of people who have illnesses that would lay you or me low, but they seem totally happy. How in the Sam Hill can that be? They’ve chosen to look at the good instead of the challenges.”

Leslie Barker, Dallas Morning News, 11/15/16

DON'T TELL THE KIDS

It was a dreary and rainy morning, and yoga seemed like the perfect cure. I drove to the class, enjoyed a peaceful hour, and felt great. Then I walked out to the parking lot and discovered that I had left my car running with the keys inside.

My first thought?

Don’t tell the kids.

Sometime in the last few years, as I have moved beyond middle age, there has been a subtle but noticeable shift in my relationship with my children. In a sense, the hunter has become the hunted. Where once the voice in their heads said, “Don’t tell Mom,” now I might not be completely clean with them about how my day has gone.

Help Spread the Word!

If you like this newsletter, please share it with your family, neighbors, friends and colleagues.

Forward it on!

New scratch on the car? Don't tell the kids.

Left the house unlocked all night? Don't tell the kids.

Drove home from the city at midnight in the rain despite only one good eye? Please do not tell the kids.

For years, much of their energy went to figuring out how not to let me find out what they were really doing, much of it involving alcohol, sex, and cars. I now find myself in the same situation (although, frankly, in my case we are mostly talking cars).

Now they are concentrating on rent and car payments and the best price on diapers. And I am no threat to their freedom — I can't ground them or take away their allowance or hide the car keys. Meanwhile, I am a free woman. There are few responsibilities to keep me from having an extra glass of wine, driving to the city on the spur of the moment, hiking in the woods alone with the dog, and generally living as dangerously as most of us do at my age.

I fear, however, that we are staring down the barrel of a time when my children might want to exert control over my life. And while we are all perfectly reasonable people, I dread the possibility that The Talk — the one about driving or keeping up with the house or dealing with my memory loss — is just around the corner.

As teenagers, we imagine we are more mature than we really are. Life is a constant battle to control our destiny, figure out our own problems. And now, in the last 30

Looking for a back issue of an ENH newsletter?

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www.engagingnh.org**

years of life, we wish for the same things, but we want those around us to imagine us as younger than we really are.

It's a two-edged sword, to be sure. I like it when my children show concern and offer to help and notice that I am no longer Mommy, indefatigable and able to do it all. But I don't want them to notice too much. I don't want them to see me as a burden or someone incapable of looking after herself.

Mostly, for now, my secrets are small — but a few weeks ago, I fell down my stairs. Not a slip, but a full-blown crash. I was in my socks and took off from the top, skating over each uncarpeted step like a skier skimming moguls.

I landed hard, up against the wall, on my hip. I sat, startled, waiting for the stars to clear, realizing that nothing was broken. But I was scared. This is how the downward spiral starts: a momentary lapse and then a loss of mobility and independence. I dusted myself off, took some ibuprofen, and proceeded with my day, albeit sorely. Five years ago, I'd have called one of my kids to get some sympathy. But the seriousness of this incident made me hesitate. That said, what did I think they might do? Not allow me upstairs? Force me to wear

shoes? Hire a sitter? What control do they really have over me now?

Clearly, age has made me insane.

Don't tell the kids.

Susan Moeller is a writer and editor who lives on Cape Cod. Boston Globe, 7/10/16

10 GOOD THINGS ABOUT GETTING OLDER

"I'm kinder and more confident, and best of all, I like myself more." At just about any age, we make up our minds just how happy we want to be. There are the days of childhood, where we whine that we just want to be all grown up, so we can do what we want. When we're in college, we want to graduate so we can work and have money already. When we're working, we dream about the day we can finally retire.

If we sit down and ponder just what it is we like about the very stage of life we're in, it's not very hard to find some jewel moments.

I say, let's forget the commercials telling us we have to fight getting older. We can like our lives as they are right now. To that end, I decided to sit down and list the things I like about getting older. With notebook in hand and my pen clicked and ready, the ideas began to flow. Even after writer's cramp set in from furiously scribbling for 15 minutes, I couldn't stop. I wrote until my thoughts were exhausted.

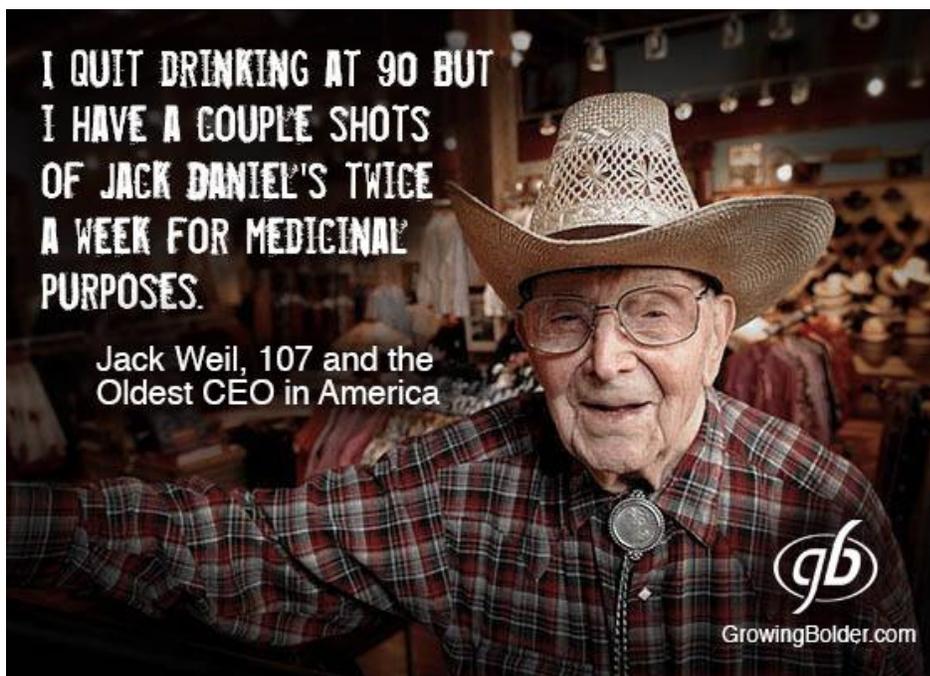
The following are my top ten things to really like about getting older. If you want to know the other 90 or so, gimme a call and we can talk.

1. I've become less emotional and more thoughtful with my decisions. There's good reason for this. Our bodies make less adrenaline, testosterone and estrogen as we age and all of this newfound level headedness feels soooo good. I do not miss the drama-queen, gnashing-teeth, decision-making days of my 20s and 30s. Or 40s. Stupid hormones!

2. I no longer sweat the small stuff. I've been around the block not just once, not just twice, but maybe three and a half times. I know by now that a lot of what I worry about just never rears its ugly head. That alone has reduced my anxiety immeasurably. I've become the "What? Me Worry?" hippie chick of the '60s. Minus all of the pot smoking.

3. I can go shopping for what I need in my favorite store: my basement. I've spent a lifetime accumulating this and that, and for whatever occasion that calls for a particular gift, chances are, I have something to throw at it, downstairs. Much of it is "vintage," which is a fancy word for "stuff laying in your basement for more than 20 years."

4. I've become kinder to myself. This may be my favorite thing of all. I've become far less judge-y, more loving, respectful and in awe of all I've endured and triumphed over. Yes, this is definitely my favorite thing. I think I'm going to give myself a very big hug now. Mmmmm, that feels so good.



5. Liking myself. I've spent a lot of time developing a personality and I like it. To my absolute surprise and delight, I like me. (Also see #4 above.)

6. I no longer drool over — or covet — fashion must-haves. I've seen style trends come and go, and I know by now that this year's peplum work suit is next year's closet embarrassment. Now I shop for the classics, spend less money, have fewer things in my closet and yet, miraculously, have more to wear than I've ever had before.

7. I have so many good stories to tell. I'll never again have to worry that I won't have anything to say at a party where I don't know anyone. I have so many stories stuck in my back pockets, my front pockets, my shirt pocket, up my sleeves ... I've never been more interesting than I am today. And I

don't mean that in any type of an arrogant way. It's just that I have lived.

8. All my years of living make me sound smart. All of those days of learning, making mistakes and getting back up again and learning some more make me sound like Madame freaking Curie. We all know that it's just the formula of life, but it's impossible to have that knowledge until you've been through the meat grinder once or twice or a million times.

9. I no longer need to keep up with the Joneses. At this late date, all of my cards are on the table and the risk of being threatened by what someone has or who they are disappeared years ago. I'm OK with what I can and can't do, what I have or don't have. There's no need for me to preen about my accomplishments or possessions.

10. It's safe (and fun) to flirt. I'm in the middle ground of being the mother of teens and old enough to where I can safely tell someone they look great and not have them worry that I'll go full-blown, crazy girl-crush on them. A simple "thank you" is the proper response to a compliment by a woman my age. Like I said, I could go on and maybe I will. I'm planning to pitch a Part II to my editor. After all, all I have to do is tell him he has a nice voice and that his profile picture looks especially rugged today.

Alexandra Rosas, Purple Clover

NEW HOPE FOR ALZHEIMER'S

There's no cure for Alzheimer's and more and more people are suffering from it. A new study shows some cause for optimism. Neuroscientists have been able to halt, and in some cases reverse, the disease in ten early-stage patients. A combination therapy, called the MEND program, shows remarkable results. The program involves a "36-point system" including a certain diet, lots of exercise, medications, vitamins, sleep optimization, and even electrical brain

stimulation. Unprecedented Recovery Documented in 10 Early-stage Alzheimer's Patients!

[READ MORE](#)

STUDY: MEDICARE 'TREATMENT GAP' FOR PAINKILLER ABUSE, MISUSE

When most people think of the victims of the nation's opioid abuse epidemic, they seldom picture members of the Medicare set.

But a research letter published Wednesday in JAMA Psychiatry found Medicare beneficiaries had the highest and most rapidly growing rate of "opioid use disorder." Six of every 1,000 recipients struggle with the condition, compared with one out of every 1,000 patients covered through commercial insurance plans.

The letter also concluded that Medicare beneficiaries may face a treatment gap. In 2013, doctors prescribed a high number of opioid prescription painkillers for this population — which put patients at risk for addiction — but far fewer prescriptions for buprenorphine-naloxone, the only effective drug therapy for opioid use disorder covered by Medicare Part D.

der covered by Medicare Part D.

"The take home message is we have very effective treatments," said Anna Lembke, one of the research letter's authors and assistant professor at the Stanford University School of Medicine. "But they're not widely accessible."

Researchers analyzed 2013 Medicare Part D claims to count the number of prescriptions for Schedule II opioids and buprenorphine-naloxone. The latter drug curbs addiction by partially stimulating the same brain receptors as a stronger opioid, but with a lower risk of overdose.

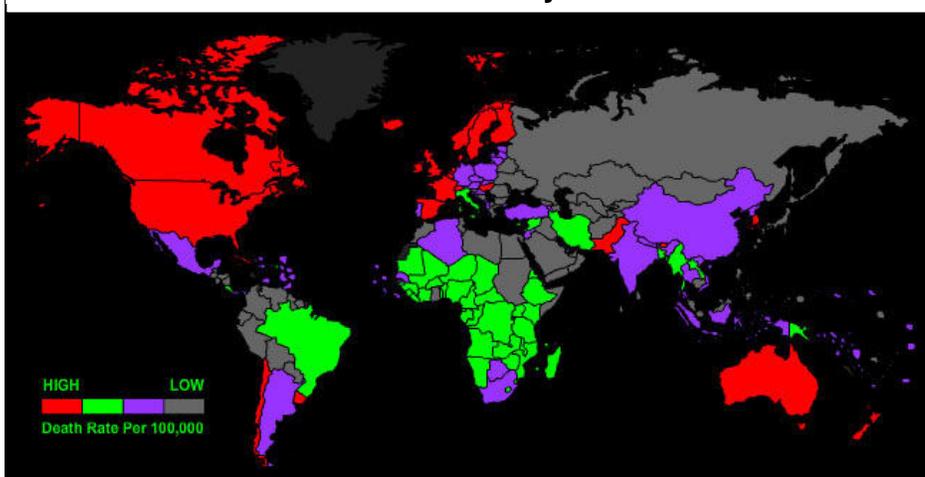
The data showed the number of doctors who prescribed buprenorphine-naloxone equaled less than 2 percent of the 381,575 prescribers responsible for 56,516,854 Schedule II opioid claims. For instance, the researchers found that for every 40 family physicians prescribing pain killers, only one family physician prescribed the addiction management drug.

The letter also found states in the northeast, including Maine, Massachusetts and Vermont, had the highest ratio of buprenorphine-naloxone claims in the country, more than 300 times the national average.

In the last decade, the incidence of opioid addiction in the United States has reached crisis levels. According to the latest data from the Centers for Disease Control and Prevention, more than 19,000 Americans died from prescription opioid overdoses in 2014.

More than 300,000 Medicare recipients battle with opioid use dis-

Alzheimer's Deaths by Countries



order, according to the study. Among beneficiaries, hospitalizations due to complications caused by opioid abuse or misuse increased 10 percent every year from 1993 to 2012.

Lembke said part of the reason doctors do not prescribe more addiction management medications is because they view the problem as one of medicine’s lost causes.

“Doctors feel helpless and hopeless when it comes to addiction,” she said. “They feel that nothing can be done for them.”

And Medicare patients face additional obstacles when it comes to addiction treatment. First, Part D, Medicare’s prescription drug program, only covers buprenorphine-naloxone. Other effective treatments such as methadone are not covered, posing a barrier to access, said Lembke.

Buprenorphine-naloxone also usually requires prior authorization before a patient can receive the treatment. In addition, in order to prescribe it, physicians must take an 8-hour class, apply for a waiver and receive a special Drug Enforcement Administration number in addition to his or her regular DEA registration number. It becomes a hassle many medical professionals do not feel is worth the time, said Dr. Jonathan Chen, co-author of the study and instructor at Stanford.

“Why is it hard to [prescribe buprenorphine-naloxone], yet so easy for me to hand out things that get people dependent in the first place?” he said.

A different JAMA study found only 2 percent of doctors nationwide had obtained the authorization needed to prescribe the medication in 2014. And over half of the nation’s counties did not have a health provider with the ability to prescribe the medication.

But the letter’s authors note that physicians who prescribe opioid painkillers have in place a relationship with their patients that makes them well-positioned — with some additional training — to take steps to intervene when opioids are being misused.

“The bottom line is it’s a heck of a lot more work to get patients off of opioids than to get them on opioids,” said Lembke.

Carmen Heredia Rodriguez, Kaiser Health News, 7/20/16

Tech Tips

Now You Know

Ever wonder about the meaning of those abbreviations your kids and grands use? Here is crib sheet:

Text	Meaning
?4U	I have a question for you
2MORO	Tomorrow
ALOL	Actually laughing out loud
BFF	Best friends forever
BIF	Before I forget
BOL	Best of luck
BTW	By the way

CRAY	Crazy
CU	See you
F2F	Face to face
FAQ	Frequently asked questions
FB	Facebook
GRATZ	Congratulations
HAK H&K	Hug(s) and kiss(es)
HRU	How are you?
LMK	Let me know
LOL	Laughing out loud
OIC	Oh, I see
OMG	Oh my God
OMW	On my way
OTFL	On the floor laughing
PLS	Please
RLY	Really
ROFL	Rolling on the floor laughing
SLAP	Sounds like a plan
SNAFU	Situation normal, all f***** up
SRSLY	Seriously
SUP	What's up?
SYL	See you later
SYS	See you soon
THX	Thanks
TMI	Too much information
TTYS	Talk to you soon

TYT	Take your time
TYSO	Thank you so much
WTG	Way to go

Dollars & Sense

PROTECTING YOUR FINANCIAL INFORMATION

Privacy Notices 101

Privacy notices explain what personal financial information a company collects; whether the company intends to share your personal financial information with other companies; what you can do to limit some of that sharing; and how the company protects your personal financial information. Companies involved in financial activities that must send their customers privacy notices include: banks, savings and loans, and credit unions; insurance companies; securities and commodities brokerage firms; retailers that issue their own credit cards (like department stores or gas stations); mortgage brokers; automobile dealerships that extend or arrange financing or leasing; check cashers and payday lenders; financial advisors and credit counseling services; and companies that sell money orders or travelers checks. Financial companies share information for many reasons: to offer you more services, to introduce new products, and to profit from the information they have about you. If you want to know about other products and services, you

may want your financial company to share your personal financial information; in this case, you don't need to respond to the privacy notice. If you prefer to limit the promotions you receive — or you don't want marketers and others to have your personal financial information — you must take some important steps. The bottom line is that it's important to read these privacy notices. They explain how a company handles and shares your personal financial information. Not all privacy notices are the same.

What You Can and Can't Stop

You have the right to opt out of some information sharing with companies that are not part of the same corporate group as your financial company (non-affiliates). If the information being shared comes from your credit report, you also have the right to opt out of such sharing with companies affiliated with your financial company. Financial companies can share certain types of information about you without giving you the right to opt out. For example, your financial company can provide to non-affiliates without providing an opt-out: information about you to firms that help promote and market the company's own products or products offered under a joint agreement between two financial companies; records of your transactions — like your loan payments, credit card or debit card purchases, and checking and savings account statements — to firms that provide data processing

and mailing services for your company; information about you in response to a court order; and your payment history on loans and credit cards to credit reporting companies.

Opting Out Means

If you opt out, you limit the extent to which the company can provide your personal financial information. If you don't opt out within a "reasonable period of time" — generally about 30 days after the company mails you the notice — then the company is free to share certain personal financial information. If you didn't opt out the first time you received a privacy notice from a financial company, it's not too late. You can always change your mind and opt out of certain information sharing. Ask your financial company for instructions on how to opt out. But remember, any personal financial information that was shared before you opted out cannot be retrieved.

Your Right to Opt Out

A privacy notice contains information about the company's data collection and information sharing policies. If a financial company doesn't plan to share your information except as allowed by law, the notice will say so. In this instance, you don't have a right to opt out.

Non-affiliates

If the company plans to share your information with a non-affiliate, you have the right to opt out in

Contact Information For NH Members of the U.S. Congress				
Name	Mailing Address	Phone	Fax	E-Mail Contact Form
U.S. Representative Frank Guinta	326 Cannon House Office Building, Washington, DC 20515	202) 225-5456	(202) 225-5822	https://guinta.house.gov/contact/email
U.S. Representative Ann Kuster	137 Cannon House Office Building, Washington, DC 20515	(202) 225-5206		https://kuster.house.gov/contact/email-me
U.S. Senator Kelly Ayotte	144 Russell Senate Office Building Washington DC, 20510	(202) 224-3324	(202) 224-4952	http://www.ayotte.senate.gov/?p=contact
U.S. Senator Jeanne Shaheen	520 Hart Senate Office Building Washington, DC 20510	(202) 224-2841	(202) 228-3194	http://shaheen.senate.gov/contact/

most circumstances. The privacy notice will include instructions on how to opt out. Unless you opt out, your financial company can share your personal financial information (for example, information on the kinds of stores you shop at, how much you borrow, your account balances, or the dollar value of your assets) to non-affiliates for marketing and other purposes. There are some types of information sharing that you cannot opt out of, however. For example, you cannot opt out if the company is sharing your information in order to market its own products or services, or if the company is reporting your information to credit reporting companies.

Affiliates

If the company plans to share information from your credit report with an affiliate, you have a right to opt out. Read your notices carefully to see if this type of opt out applies. Companies can, however, share information about you with affiliates when the information is based solely on your transactions with that company, including whether you pay your bills on time

and the type of accounts you have with the company. If you want to opt out of information sharing, you must follow the directions provided by your financial company. For example, you may have to call a toll-free number or fill out a form and return the form to the company. In some cases, your financial company may give you the choice to opt out of different types of sharing. For example, you could opt out of certain categories of information the company provides to other companies but allow the company to share other kinds of information. Credit reporting companies also may sell information about you to lenders and insurers who use the information to decide whether to send you unsolicited offers of credit or insurance. This is known as prescreening. You can opt out of receiving [prescreened offers](#) by calling [1-888-567-8688](tel:1-888-567-8688).

Types of Privacy Notices

The Initial Privacy Notice

Usually, you will get a privacy notice when you become a customer of a financial company. If you open an account by phone, how-

ever, and you agree, the company may send you a notice later.

Annual Privacy Notices

Each financial company you have an ongoing relationship with — for example, the bank where you have a checking account, your credit card company, or a company that services your mortgage loan — must give you a notice of its privacy policy annually.

Notice of Changes in Privacy Policies

If a company changes its privacy policy, it will send you a revised privacy notice or tell you about the changes in the company's next annual notice. A privacy notice may be included as an insert with your monthly statement or bill, or it may be sent to you separately. If you agree to electronic delivery from an on-line financial company, the notice may be sent to you via e-mail or made available to you on the company's website.

If you have more than one account with the same company, you may get only one privacy notice for all your accounts, or separate notices for each account. If you have a joint account, the financial com-

pany may send a notice to one of you or to each person listed on the account. If the company offers an opportunity to opt out, it must let one of the account holders opt out for all parties on the account. You may request separate notices, however.

For More Information and Complaints

If you have questions or concerns about a company's privacy policy, first contact that company directly. If you still have questions about your privacy rights in dealing with a financial company, contact the federal or state agency that oversees that type of company

<https://www.consumer.ftc.gov/articles/0222-privacy-choices-your-personal-financial-information>

Laugh & Live Longer

COMMENTS

A recent study has found that women who carry a little extra weight live longer than men who mention it.

- Kids today don't know how easy they have it. When I was young, I had to walk 9 feet through shag carpet to change the TV channel.
- Senility has been a smooth transition for me.
- Remember back when we were kids and every time it was below zero out they closed school? Me neither.

FBI AGENT

A rancher was minding his own business when an FBI agent came up to him and said, "We got a tip that you may be growing illegal drugs on the premises. Do you mind if I take a look around?"

The old rancher replied, "That's fine, you shouldn't go over there though," as he pointed at one of his fields.

The FBI agent snapped at him, "I'm am a federal agent! I can go wherever I want!" With that he pulled out his badge and shoved it into the ranchers face.

The rancher shrugged this off and continued with his daily chores. About 15 minutes later he heard a loud scream from the field he had pointed out earlier. All of a sudden he could see the FBI agent sprinting towards him with a large bull on his heels.

The rancher rushed to the fence and yelled, "Your badge! Show your badge to the bull!"

CAREFUL!

I live in a semi-rural area.

We recently had a new neighbor call the local city council office to request the removal of the DEAR CROSSING sign on our road.

The reason: "Too many dears are being hit by cars out here! I don't think this is a good place for them to be crossing anymore."

IDIOT SIGHTING IN FOOD SERVICE

My daughter went to a Mexican fast food and ordered a taco.

She asked the person behind the counter for 'minimal lettuce.'

He said he was sorry, but they only had iceberg lettuce.

FEEL SECURE?

I was at the airport, checking in at the gate when an airport employee asked,

"Has anyone put anything in your baggage without your knowledge?"

To which I replied, "If it was without my knowledge, how would I know?"

He smiled knowingly and nodded, "That's why we ask."

AND FINALLY—

When my husband and I arrived at a car dealership to pick up our car after a service, we were told the keys had been locked in it.

We went to the service department and found a mechanic working feverishly to unlock the driver's side door.

As I watched from the passenger side, I instinctively tried the door handle and discovered that it was unlocked.

"Hey," I announced to the technician, "it's open!"

His reply, "I know. I already did that side."

STAY ALERT!

They walk among us, they breed, and they vote . . .

Purposeful Living

Terry McCarthy's service to North Conway and the surrounding area are well known. She is extremely generous with her time; her main focus is on serving the elderly, but she readily serves those in need throughout the community.



Terry McCarthy

Terry McCarthy has stepped up to the plate to be the principal volunteer at the Vaughan Community Services, Inc. food

pantry which served over 1432 families last year. The food pantry also provides service for the Town of Conway needy, which has resulted in a significant increase in usage. With the huge increase in demand, Terry has been an invaluable stabilizing force, managing the massive logistics of moving large volumes of food. She has been diligent with record keeping and tirelessly stocking shelves.

The Bottom line: services to the community have been greatly improved.

Terry McCarthy as principle volunteer for the food pantry has created order out of chaos, and services to the clientele have improved dramatically. With expanded hours and increased demand she helped develop a grow-

ing team of dedicated volunteers, and fine-tuned the operation making it easier for the volunteers to serve the clients. No small task!

This past year Terry has dedicated over 780 hours to the food pantry. The food pantry is open seven hours each week, but the work doesn't stop just because the food pantry is closed. Terry drives to Tamworth every other month to pick up food from USDA program at the CAP office, a 32 mile round trip and never expects to be reimbursed for the cost. She also drives to Ossipee once a month to pick up food from the NH Food Bank, another 50 mile round trip with no fee to the agency. She shops at the local grocery stores to pick up items that are not provided through donations and she always seeks out the bargains. This results in considerable savings and extends what the food pantry can offer to the clientele.

Additionally, once a year Vaughan Community Services, Inc. in conjunction with a local radio station holds a community wide food drive which supplies not only Vaughan's food pantry but also several food pantries in the surrounding communities. Terry assisted with the food drive and once it was over she began sorting and stocking the shelves with the several tons of food were donated.

Terry's volunteer work does not stop with the food pantry. She is actively involved in the Carroll County Retired Senior Volunteer Program as a volunteer and active Advisory Council Member; Vaughan Community Services Advisory Board Member; North

Conway Rotary as a member and Board member; Town of Conway Budget Committee and Town Health Care Study Committee; President of the North Country Federated Republican Committee and Vice Chair of Carroll County Representative Committee.

Terry never asks for recognition for what she accomplishes, she just does it because it is part of her mien. There could be no more deserving person to be presented with the Joseph D. Vaughan award.

Board Notes

DON'T TRUST ANYONE OVER 30!

Maybe there was a time when you truly believed this! But, oops, many of us have seen 30, thirty plus times over!!! Boomers, as young adults, were pretty open about making this proclamation as they railed against the establishment, and were rebellious in ways that other generations would never have considered. *"All you need is love, love. Love is all you need"*, they sang as they planned to change the world. And in truth, the Boomers have... and there's still things left to do.

Check out this item: "[5/12/2016 – Baby Boomers Are Isolating Themselves as They Age](#). That's bad—for everyone" A sobering finding has emerged from the Stanford Center on Longevity's Sightlines Project. Social isolation is as strong a risk factor for early mortality as cigarette smoking. Which makes the findings about

social engagement among boomers startling. The 55-to-64-year-olds just about to join the ranks of the elderly are far less socially engaged now than their predecessors were at the same age 20 years ago. And this pattern emerged across virtually all traditional measures of social engagement. (Read the full article by Center on Longevity founding director Laura L. Carstensen at [Time](#).)

Let's forget that nasty little risk factor and ask ourselves what has become of that zest for making a better world? Could it be that subconsciously "We have presumed, even in science, that age is associated with decline," as Carstensen has said? And she adds, "But it turns out that's not true. The profile for aging is much more nuanced. There is decline, but there are also improvements – in emotional functioning, improvements in knowledge. "If you have a large population of emotionally stable, knowledgeable and relatively healthy old people, that's a good resource."

The question is, will we allow ourselves to fall into the trap of isolation or will we start to look at what we can do for those **under 30**? The Stamford report of 2012 suggests that one potential job would be to mentor younger generations. And it doesn't have to be tall order on a State or national level; the idea of older and wiser, and generally more patient, adults mentoring can be in little increments.

Sure there are wonderful programs like Foster Grandparents but why not create some less structured activities at the neighborhood level? Do you have retired friends in your neighborhood? Could you get together with some of the younger parents and ask how you might support them? Studies show that group collaboration results in the best and most creative solutions.

Regardless of whether you are a boomer or not, really, all we need aside from love, is to take a look at our own and other grandchildren and know that the most important gift we can give them is ourselves.

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ADDRESS CORRECTION
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