



A Citizen Voice for the Aging Experience

ENGAGING NH NEWS

March 2016
Volume 10, Issue 3

BOARD OF DIRECTORS

**Richard Crocker
Meredith, NH**

**Carol Currier
Concord, NH**

**Carol Dustin
Lebanon, NH**

**Stephen Gorin,
PhD, MSW
Canterbury, NH**

**Marge McClellan
Berlin, NH**

**Barbara Salvatore
Bedford, NH**

**Maida Sengupta
Nashua, NH**

**Roger Vachon
Concord, NH**

**Donna Woodfin
Concord, NH**

EngAGING NH
9 Gleneagle Drive
Bedford, NH
engagingnh@gmail.com
www.engagingnh.org

GUEST OPINION:

Transitioning from Grief to Relief

by Owen Houghton

I have been living in “no-man’s land” these past few weeks of the new year relative to my care giver role. Incidents of potential danger convinced me that this is the right time for full-time placement for my wife at a local memory unit.

Although I was supported in this decision by my three kids, Drs. and other caregivers, it has been a struggle with the thought of letting go from what has been a good at-home care situation since the dementia diagnosis and downsizing.

We all recognize the ever-downward cycle of Alzheimer’s and sooner or later have to face the necessity for a more controlled environment. My readers who have followed this journey with the “long goodbye” will understand, given my passion for at-home care, how difficult it is to make the move...

But, initial reluctance was trumped (dare I use that word!) by considerations of safety and the potential for greater quality of life for her. If I practice what I preach, I am called to heed the change imperative which is the essence of life. I do, however, continue to vacillate between grief and relief in this transition time.

So many of my male friends are either widowers or divorced – I know I am not alone with the feelings which pay me a visit in my new daily routine - an empty bed or chair at the breakfast table trigger memories of days never to come again.

I am called to heed the change imperative which is the essence of life.

Visits to my wife and her new friends bring joy to see her happiness – she is at peace, safe and secure, and receives accolades from the caring staff for her cheerfulness. I am often invited to join the latest activity, such as Bingo or singing.

While I understand that music resides in a separate part of the brain from the Alzheimer’s memory lobes, it constantly amazes me to witness the residents’ enthusiastic recall of music and lyrics. I join their sing-a-longs with staff and volunteer pianists with equal joy.

In this Issue

NH Updates	page 2
From Our Readers	5
Good Reads	6
Community Living	6
News You Can Use	8
Health & Wellness	11
Dollars & Sense	12
Tech Tips	14
Laugh & Live Longer	18
Purposeful Living	19
Board Notes	19
NH Legislative Contacts	16

However, some of the songs they sing stir my emotions in this time

country on the radio) take on new meaning in this context, made even more poignant by the approach of Valentine's Day.

Can you feel my grief if we are singing Perry Como's rendition referencing the end of time? I bet song writers Buddy Kaye and Ted Mossman never envisioned the impact their creation could have on a home care giver transferring his wife over to facility care givers!

Other songs we sing there remind me of missing her "in the wee small hours of the morning", facing the years together, and promises to "never stop loving" her, and "keeping the love light glowing"...

So was this a mistake? No way - if anything, I feel guilty about waiting this long, or not accepting more help from friends. While I am my toughest critic, the support I have been receiving from family and friends is aimed at convincing me any guilt is unearned.

Since an *Age-Wise* article entitled "For Better or Worse – Taking the Vow" last summer about the marital commitment of "I do", there has been some hesitancy to "give up" my caregiver role, but I take comfort in the insight of a professional friend who stated "you are still a caretaker – just in a different way. You've done a wonderful job and it is time for you to let others help you."

I know not to push the grieving process, although I have to live my own life now. Others may

of transition. The words to many oldies (and also

judge a decision to head to Florida for a golfing trip, but my wife did say "You make good decisions for me, and you deserve it!" Her blessing brings me a sense of peace and permission to find new life style default settings.

Living apart after nearly fifty-six years and leaving over seven years of daily care giving behind is sobering, but I am still her advocate, committed to being more refreshed and upbeat as I visit my life partner and interact with the memory unit staff. A win-win for both of us!

Happy Valentine's Day to all.

Owen R. Houghton of Jaffrey is an aging wellness educator, Past Chair, State Committee on Aging, 2015 Vaughn Award recipient and Monadnock at Home member. no-houghton@myfairpoint.net.

NH Updates

REGISTER FOR THE TRI-STATE SUMMIT ON AGING TODAY!

Join hundreds of Maine, New Hampshire and Vermont policy, business, research, advocacy and community leaders at the Tri-State Summit on Aging on April 1, 2016 at the Grappone Conference Center in Concord, NH.

Communities all across our region are collaborating with an array of partners to help older adults live well in their homes and communities. The Tri-State Summit on Aging will bring leaders from these community initiatives together to

Nomination Call!

Do you know an individual or couple, over the age of 60, who have shown outstanding leadership or demonstrated meritorious achievement as a volunteer on behalf of New Hampshire's older citizens?

Consider submitting a nomination for the 2016 Joseph D Vaughan Award for their county.

For more information and a nomination form:

engagingnh@gmail.com.

share successes, ask questions and learn from each other and from experts working on issues like housing, transportation, technology and health care. Learn about share cutting-edge national research on reframing the conversation about aging.

There is truly something for everyone at this amazing learning event, and our goal is to ensure participants leave with the tools they need to take their work to the next level. To learn more and register, click [here](#).

JUST RELEASED: 2015 NH DISABILITY STATISTICS

Information drives change. Statistics are a powerful form of information used in policymaking, program evaluation, research, and advocacy. They frame issues, monitor current circumstances and progress, judge the effectiveness of policies and programs, make projections about the future, and pre-

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.

dict the costs of potential policy changes.

However, statistics are often difficult to find and leverage. The new Institute on Disability publication provides greater accessibility to this important data with a particular focus on the population with disabilities in New Hampshire.

Facts & Figures is designed to serve as a reference guide to government publications. These referenced sources contain additional statistics, as well as information about the way the data were collected and generated. Assistance in interpreting and locating additional statistics is available via a toll-free number, 866.538.6521. To download a copy of the report, go to:

http://iod.unh.edu/pdf/FactsandFigures_2015_final.pdf

NH TAX HELP

Assistance in filing your income taxes is available at no cost through the office of 211 New Hampshire. Appointments are available by dialing 2-1-1 or by going to

<http://eznetscheduler.com/calendar/nhtaxhelp>.

Households with income over \$60,000 can only be served by sites with a '+' after the location.

When you come for your appointment, you must bring:

- If married, it is preferable for both spouses be present
- Original or photocopy of social security cards for taxpayer, spouse, if married, and any dependents being claimed
- Picture ID for taxpayer and spouse (must be a Driver's License, or state issued ID Card, or other official document)
- All W-2's for all places worked in previous year
- Prior year tax return if applicable
- Routing number and bank account number for direct deposit

If applicable, bring:

- Copies of any 1099's issued to you or your spouse (including social security!)
- Form 1095A if you received purchased insurance via healthcare.gov

- Bank account interest year-end statement
- Student loan interest statement
- Proof of paid child care expenses (statement from provider with EIN # or Social Security #)
- Statement of post-secondary education tuition expenses paid
- Any other documents related to your previous year taxes.
- Copies of last year's mortgage interest statements (including any points paid)
- Real estate taxes paid statement
- Proof of charitable donations
- Statement of work-related expenses
- Auto registration
- Receipt of tax preparation fees paid last year
- Statement of safe deposit box fees
- Statement of union dues paid
- Any other statements of allowable itemized deductions

If you're not sure, bring it! We'll be happy to review it.

If you are small business owner:

- Proof of income and expenses (in writing). Self-employed with more than \$25,000 in expenses cannot be served.
- Returns cannot be filed with rental income, self-employed individuals with employees

Other limitations of scope may apply to your circumstances, an appointment is not a guarantee we can prepare your return.

COMBATING ELDER FINANCIAL EXPLOITATION IN NH: A MULTI- DISCIPLINARY LEADERSHIP SUMMIT

Wednesday, April 20, 2016 Grap-
pone Conference Center Concord,
NH.

The Summit will bring together
multi-disciplinary professionals
from all sectors to learn, share ex-
periences and perspectives, and to
create a blueprint for responding
to the growing problem of finan-
cial exploitation of New Hamp-
shire's older citizens.

Elder financial exploitation is an
ever-growing and devastating
problem that not only hurts the
victim, but also negatively impacts
their families and the community
at large. Unfortunately New
Hampshire is not immune from
this problem. Like the rest of the
nation, New Hampshire is experi-
encing a continuing rise in elder
financial exploitation. At the same
time, we are experiencing a rapid
increase in the number residents
who are 60 years of age or older.

The combination of these factors
creates a perfect storm and the
need for a comprehensive plan for
responding to the financial abuse
of older adults.

Initial findings and recommenda-
tions from the Summit will pro-
vide the framework for continued
exploration and discussion at fol-
low-up meetings in five areas of
the state: Northern, Central,
Southern, Seacoast and Western.
Information generated from the

Summit and the regional meetings
will be compiled and shared in a
report outlining needs, resources
and collaborative potentials for
addressing elder financial exploi-
tation. For more information and
to register contact: [efesum-
mit@gmail.com](mailto:efesummit@gmail.com)

RAISE

*(Recognize, Assist, Include, Sup-
port, and Engage) Family Care-
givers Act (Senate Bill 1719,
House Bill 3099)*

The RAISE Family Caregivers
Act has passed the Senate but still
needs to pass the House. This bi-

FYI . . .

This newsletter is intended
as a forum for you to
share personal experienc-
es, 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 ex-
pressed do not necessarily
reflect those of the Board
members, our intent is to
include material that as-
sists you in forming your
own opinions.

To send articles or to add
your name to our newslet-
ter mailing list, contact:

engagingnh@gmail.com

partisan legislation is led by Sena-
tors Collins of Maine with original
cosponsors Sens. Baldwin (WI),
Ayotte (NH), Bennet (CO) and
Mikulski (MD) and calls for the
Secretary of the U.S. Department
of Health and Human Services to
develop, maintain and update an
integrated strategy to recognize
and support family caregivers.

Over 50 organizations support
the RAISE Family Caregivers Act.
We urge you to take a few minutes
to contact your Congress-
man/woman and urge him/her to
support this legislation. It's the
first step in better recognition and
help for family caregivers.

We know how important family
caregivers can be. It's estimated
that about forty-three million
family caregivers help loved ones
to function, work, and avoid nurs-
ing home. AARP estimates that
family caregivers provide \$470
billion dollars in uncompensated
care each year. For more about the
RAISE Family Caregivers Act go
to AARP:

[http://www.aarp.org/politics-
society/advocacy/caregiving-
advocacy/info-2015/raise-family-
caregivers-act.html](http://www.aarp.org/politics-society/advocacy/caregiving-advocacy/info-2015/raise-family-caregivers-act.html) You can see
legislative summary information
at Congress.gov: [https://www.con-
gress.gov/bill/114th-
congress/senate-bill/1719/all-info](https://www.congress.gov/bill/114th-congress/senate-bill/1719/all-info)

Your NH representatives' contact
information is on page 15 of this
newsletter.

NEW NH INSURANCE CODE TO HELP ELDERS STAY IN OWN HOME

Elderly and ailing New Hampshire
residents might be more likely to

live in their homes longer, thanks to a recent change to the state’s workers’ compensation class code designed to make workers’ compensation coverage of the caregivers tending to them more affordable, according to the New Hampshire Association of Insurance Agents.

The change, which will mean an estimated 35 percent drop in the minimum premium under the current class code, will go into effect on April 1 and came about through a collaboration of the New Hampshire Insurance Department, the New Hampshire Association of Insurance Agents, the National Association of Elder Law Attorneys, the National Council on Compensation Insurance (NCCI) and the state Legislature’s House Labor Committee.

The House committee is chaired by Will Infantine, president of Aspen Insurance Agency in Manchester and the chairman of the New Hampshire Association of Insurance Agents. When Infantine learned of a proposed Senate bill that would have amended the standard homeowners’ policy to achieve a similar result, he considered a different tact. “Now you’d be affecting every homeowner’s policy in the whole state just for a few issues,” Infantine said in a news release. “We thought it would be a better idea to create a class code set up for just these specific sets of circumstances.

“The Insurance Department, which agreed with Infantine, testified against the bill. Instead came the new NCCI class code (8872),

which mirrors a code already used in Massachusetts.

“Our association is constantly looking for non-legislative ways to solve problems,” said New Hampshire Association of Insurance Agents President and CEO Chris Nicolopoulos, in the release.

Code 8872 is assigned exclusively to individuals who provide home-maker and companion services while physically assisting convalescent, aged, acutely or chronically ill or otherwise physically or mentally infirm persons in daily living activities, principally inside the employer’s residence, the release said.

It applies only to workers who are employed and paid directly by the person they are assisting or by the person’s family or representative, whereas if the worker is employed by a health care agency or if the worker has his or her own business, the previous code still applies.

Also represented during the process was the New Hampshire chapter of the National Academy of Elder Law Attorneys.

“It will help make workers’ compensation coverage more affordable for individuals and families who directly hire in-home care workers to assist with daily living activities of a loved one,” said Heidi Kross, a lobbyist for the organization.

Employers in such situations are required by law to have workers’ compensation coverage.

“There may be situations where folks go without coverage because

they cannot afford it,” said Christian Citarella, an assistant property/casualty actuary with the New Hampshire Insurance Department.

“Often, that puts the elderly person at risk,” he said, “and it also puts families in the awkward position of considering some sort of nursing home situation rather than staying at home. This way, it’s a little easier to help folks stay in their homes a little longer.”

Union Leader, 2/4/16

From Our Readers

T-SHIRT

On an old man’s shirt was written a sentence

‘I am not 86 years old . . . I am sweet 16 with 70 years’ experience.’

That’s ATTITUDE!

Barb

ARTICLE BY MATILDA CHARLES IN THE KEENE SENTINEL

A 10-year British study out of Kings College found an interesting correlation between leg strength and brainpower. In the first-of-its-kind study, strong legs equated to cognitive strength down the road.

Female twins between the ages of 43 and 73 (average age 55) were recruited for baseline testing, with adjustments made for various parameters such as socioeconomic status, alcohol drinking, blood pressure, level of exercise and more. Memory and learning were measured at the start of the study, as were the strength of leg muscles

of both twins. Brain scans also were taken.

Ten years later the tests were repeated. Those who'd started and ended with more muscular legs showed the best results in memory and cognitive tests and more brain volume. The researchers still don't know for certain why they saw these results. More studies need to be done, they said, to understand how aerobics, brain function and leg muscle power all come together, and whether muscle-building chemicals somehow make their way to the brain.

While scientists didn't predict the outcome, it was not surprising because they've long known that general exercise can help with cognitive function. Until they figure out the specifics, one thing is clear: adding more walking or doing exercises designed to increase leg strength can help with memory and thinking. We can run, take dance classes, lengthen our daily walk and spend time on a treadmill or rowing machine at the gym. Even yoga can help strengthen leg muscles.

For those who aren't mobile, seated rowing exercises with a resistance band can help, as can a recumbent bicycle. Consider asking your doctor for an exercise plan that concentrates on the leg muscles.

Barbara Richardson

Good Reads

A POKE AT NH

Now that Primary Season is over, you're sure to enjoy an out-

geously funny satire based on NH politics.

Hampton native Gary Patton's new book called "Selling Mt. Washington revolves around an attempt to pass a bill that would sell Mt. Washington State Park and allow wind turbines to be installed on it. Governor Lawless supports the bill as does an incumbent Senator, Bornfree. The only hope of defeating the plan is finding someone willing to run against all odds.

To say that such an individual might be an unusual candidate is an understatement. From the banter with a waitress at the local coffee shop, to the introduction of a bill proposed by a group of fourth graders, Patton has New Hampshire pegged.

Focus on Community

TACKLING THE SOCIAL DETERMINANTS OF HEALTH: SMALL STEPS ON A LONG JOURNEY

In 1848, German physician Rudolf Virchow, the father of modern pathology, wrote: "Do we not always find the diseases of the populace traceable to defects in society?" And for the last 2 centuries, we have been struggling with these "social determinants of health," from housing quality to education to availability of healthful foods. Although we have known for generations that social factors affect health, the issue of uncontrolled health care costs has refocused attention on how social factors

harm health and lead to preventable spending.

This interest has become widespread. Medical schools are adding courses in social medicine and health care organizations are hiring social workers and care managers to address patients' nonmedical problems.

Longevity

The idea that social factors influence health is both obvious and evidence-based. It is intuitive that patients with diabetes who are homeless will have a harder time managing their disease, and the evidence bears this out. As the United States marches towards spending 20% of our economic output on health care, and as the government takes on an increasing share of that spending, policy makers are realizing that we need a new approach to tackling health care expenses.

Our current approach, in which the public finances most health care expenses but looks skeptically at covering nonmedical spending, appears unsustainable. Homeless persons struggling to manage their diabetes can expect taxpayers to pay thousands of dollars for their hospitalizations but not necessarily the housing and food that would help them manage the disease and avoid hospitalization.

Complex Issues

The current approach might appear to be "penny-wise but pound-foolish," but the issues are far more complex. Paying for the use of health care services is easy; these are discreet events and there is the moral argument that when

people are sick, society should help them get better. But paying for social determinants is much more complex. Should the government provide housing, food and clothing for everyone who might benefit from it? What about for those with chronic illnesses?

Unfortunately, there is little evidence that these “upstream” interventions save money. Yes, providing housing to a homeless person can improve health and reduce the use of health care services, but the aggregate cost of the housing generally swamps any money saved in the health care system. Investing in social determinants can be a good thing because it improves health, but it rarely saves money.

The Center for Medicare & Medicaid Innovation (CMMI) recently announced its latest demonstration project, “Accountable Health Communities (AHCs).” The AHCs will “assess whether systematically identifying and addressing health-related social needs can reduce health care costs and utilization among community-dwelling Medicare and Medicaid beneficiaries.” The AHC model is based on “universal, comprehensive screening for health-related social needs,” and will be implemented in 44 communities across the United States, each of which must include a state Medicaid agency, health care provider organizations, and community-based organizations that provide social services. The government has allocated \$157 million over 5 years to implement and evaluate the program.

An Important Step

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 Voices for Health Care
- 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)

Active Collaborations & Groups:

- Older American's Action Partnership
- Elder Rights Coalition
- Aging and Mental Health
- 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

© 2016 EngAGING NH, All Rights Reserved

www.engagingnh.org

EngAGING NH Newsletter articles may be copied for personal use, but proper notice of copyright and credit to EngAGING NH must appear on all copies made. This permission does not apply to reproduction for advertising, promotion, sale or other commercial purposes.

The launch of the AHC program, an acknowledgement of the significance of social determinants of health, is an important step. A key strength of the program is its focus on empowering local, geographically defined communities. This approach is used successfully in countries such as Sweden and Switzerland, and enables communities to capture the returns on their investment in social services. The AHC program's goal is to encourage communities to systematically measure the social needs of their Medicare and Medicaid populations, and eventually realign their payment systems to address these needs.

We should laud efforts to integrate the health care system with the communities it serves, and the AHC has potential to move that agenda forward.

But several things in the AHC program should give us pause. The first is the notion of accountability. Who is accountable for the health of a community? Individual health care provider organizations such as hospitals might care deeply about the health of their communities, but ultimately they must tend to their own financial health. Governments can be accountable, but most states are too large to understand local needs. Models like AHCs work well in Sweden because local governments there control health care and social spending budgets, and therefore have both power and accountability for the health of their citizens, a difficult model to replicate in the United States. Prior policy efforts to create and/or support local entities that can act on behalf of the

community have not been able to sustain themselves when federal funds run out.

There also are the issues of funding levels. The amount budgeted for this experimental program is small; CMMI has allocated \$157 million over 5 years, during which time the United States will likely spend approximately \$15 trillion on health care. Given that CMMI is primarily trying to create awareness and knowledge of the issues of social determinants, it might be enough, but we should keep our expectations low. The current budget, which works out to approximately \$700 000 per community per year, may not be enough to make an observable difference.

Learning What Works—and What Doesn't

Finally, there are issues around our ability to learn from the AHC program. Demonstration programs are most effective when they generate knowledge about what does and doesn't work. Failures are a necessary part of experimentation. But failing to learn when projects don't go well is a problem we can avoid. The agency promises a "robust evaluation," and let's hope it delivers on its promise. There is no single right approach, but having strong control groups and using validated metrics will help ensure that we learn which programs actually made a difference, which ones did not, and why. And it's fine to focus on whether AHCs saved money, but we should pay attention to whether they improved outcomes. After all, what

we care about most is better outcomes for people.

In wading into the complex set of issues that are "social determinants of health," the US administration deserves praise for taking on one of the most difficult problems facing us: how do we reduce the effect of social ills on the health of our population? But we should be clear-eyed about the difficulty of the work ahead and ensure that we learn as much as possible with each step and iterate to improve. For more than 150 years, health care leaders have wondered how to address the "defects in society" that both cause illness and hamper our efforts to treat it. Although social ills will always be with us, we can surely do better at mitigating their harmful effects on health.

Ashish K. Jha, MD, MPH, JAMA, 1/27/16

News You Can Use

CAN WE BELIEVE WHAT'S ON WIKIPEDIA?

Many people use Wikipedia without giving a second thought that virtually anyone can update the pages at any time of day. If you're not careful, you could be unfortunate enough to read and trust faulty information about a topic in those few minutes that it's up before being corrected.

Wikipedia has tried to stay on top of the issue, employing algorithms to help identify and correct blatantly malicious edits, such as profanity. But it's more difficult for algorithms to detect the dynamism

How to Contact Your State Committee on Aging Representatives

County	Name	Email
Belknap	Rich Crocker	richcrocker@metrocast.net
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	Sheila King	bbwic@metrocast.net
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
Cheshire	Sen. Molly Kelly	molly.kelly@leg.state.nh.us

People who need or who are receiving home health care can now look up star ratings for home health care agencies using the new Home Health Compare tool from the Centers for Medicare & Medicaid Services (CMS). The new tool is part of a suite of tools to compare other aspects of health care, including hospitals, physicians, nursing homes, Medicare plans, and suppliers.

Just like other compare tools, Home Health Compare rates agencies using the standard scale of one star to five stars, with five being the best rating. Agencies are rated on a variety of areas, including care of patients, communication between providers and patients, specific care issues, and the overall rating of the care provided.

cally changing content that defines many peoples’ views on politically-charged science topics.

[A recent study of Wikipedia science articles concluded] ‘As society turns to Wikipedia for answers, students, educators, and citizens should understand its limitations when researching scientific topics that are politically charged. On entries subject to edit-wars, like acid rain, evolution, and global change, one can obtain — within seconds — diametrically different information on the same topic.’

Wikipedia can be a fantastic source for quick, accessible information on almost anything one might wonder about, and it’s generally pretty reliable. A study pub-

lished in Nature even showed that Wikipedia comes close to Britannica in the accuracy of its science entries. But it’s important to keep in mind that it might not provide the best way to shape your opinions about highly controversial topics. You know what they say — don’t believe everything you read on the internet.”

“Wikipedia Trolls Are Spreading False Information on Controversial Science Topics” by Kelly Tatera, The Science Explorer, 11/10/15

STAR RATINGS FOR HOME HEALTH CARE AGENCIES

From CMS [Center for Medicare and Medicaid Services

The tool contains over 11,000 agencies. To date, about 6,000 agencies have ratings. CMS is still collecting data on the other agencies and will continue to update the tool with new ratings.

According to CMS, “[The] announcement on Home Health Compare is the latest example of how CMS is committed to transparency and helping patients and their family members make informed health care decisions through an initiative to simplify the quality of care information across all CMS Compare websites. It also supports the larger effort across the Department of Health and Human Services (HHS) to build a health care system that de-

livers better care, spends health care dollars more wisely, and results in healthier people.”

For more information, go to

<https://www.cms.gov/Newsroom/MediaReleaseDatabase/Press-releases/2016-Press-releases-items/2016-01-28.html>

104-YEAR-OLD WOMAN’S SECRET

104-Year-Old Elizabeth Sullivan from Fort Worth, Texas shares with us her secret to a long and healthy life that might surprise some of you.

She’s lived in the same house since 1942 and against two of her doctor’s wishes she drinks 3 Dr. Pepper’s a day. She has outlived both those doctor’s and continues to enjoy a Lone Star State favorite drink several times a day when she drinks her Dr. Pepper. To see her video, go to:

<http://biggeekdad.com/2016/01/10/4-year-old-womans-secret/>

7 QUESTIONS TO HELP YOU DECIDE IF SENIOR HOUSING IS RIGHT FOR YOU

Questions to ask if you’re considering independent or assisted living, or a continuing care retirement community.

How do you feel about communal living?

Baby boomers, says Joseph Coughlin of [MIT’s AgeLab](#), are “the generation who stopped joining bowling leagues, PTA, Rotary, and all of a sudden, at 83, we’re going to join a community?” Visit the property you’re most interest-

ed in several times before committing to it.

Can you picture all your stuff in the unit?

We talk to people about their expectations for size and space,” says Chris Golen of the Commons in Lincoln.

“We ask them to visualize downsizing and the things that would be important for them to bring. We want it to be like home. “You may have to decide which is more important to you: a large apartment or high-end amenities.

What kind of contract is best?

Though you’ll need an attorney before signing, a geriatric care manager can help you sort out various contract types and even smooth the entire transition, from choosing a place to moving in. The Aging Life Care Association of New England (617-277-4669; gcmnewengland.org) can get you started.

Does the community have higher levels of care?

Only 24 percent of those aged 40 and older believed they would need long-term care someday, according to a 2013 survey by the Associated Press-NORC Center for Public Affairs Research. The actual number is about 70 percent. CCRCs with assisted living, memory care, and skilled nursing on-site or nearby are more practical than strictly independent living communities.

What are the options for food and dining?

Restaurant-style dining distinguishes independent and some-

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.

times assisted living from the more institutional offerings in memory care and skilled nursing. Ask how many restaurants and cafe are on-site, whether you can eat when you choose, whether friends and family can join you, and how many menu choices are found on a given night.

Which activities are important to you?

This can be a tiebreaker between very similar places. If you’re not outdoorsy but love to read, you might want to find a place with a read-aloud book club and discussion group; if hiking’s your thing, a resident-run walking group would be a huge perk. Having common interests will help you bond with other residents.

And don’t forget: Location, Location, Location.

You'll want to be near family and friends, but you should also consider how close you are to a city or town. Can you walk to get an ice cream or to visit museums, sporting events, shopping?

"You may no longer be in the market of gathering things," says Coughlin, "but you're still buying experiences."

Even if you drive, ask about transportation services you may need in the future.

Elizabeth Gehrman, Boston Globe Magazine, 1/28/16

MEDICARE REMINDER

Medicare may help pay for your certain types of home care if you are considered homebound, meaning that all the following apply:

- You need the help of another person or special equipment to leave your home or your doctor believes that leaving your home would be harmful to your health; and
- It is difficult for you to leave your home and you typically cannot do so.
- You need skilled care. This includes skilled nursing care on an intermittent basis.
- Your doctor signs a home health certification stating that you qualify for Medicare home care because you are homebound and need intermittent skilled care. The certification must also say that a plan of care has been made for you, and that a doctor regularly reviews it.

- You receive your care from a Medicare-certified home health agency (HHA).

See [Medicare Interactive](#) for more information and additional details and limitations on when a person qualifies for Medicare-covered home health care, and what types of home health care Medicare may cover.

Health & Wellness

NEW RECOMMENDATIONS ON BLOOD PRESSURE SCREENING

The U.S. Preventive Services Task Force (USPSTF) suggest that prior to starting any treatment, elevated blood pressure readings taken in the doctor's office should be confirmed by a number of similar readings from outside the clinic.

The [recommendations](#) appeared online in the *Annals of Internal Medicine* in late 2015.

High blood pressure is a major risk factor for heart attacks, strokes and chronic kidney disease, but it's a symptomless disease, so the cuff is the only way to see it coming. Combine the diagnostic shortcomings of office-based blood pressure measurements with the fact that about a third of American adults have hypertension and these new recommendations could alter the care of millions. Click [here](#) to read more.

[Foods that may contribute to higher blood pressure: sea salt, pizza and processed foods; foods and drinks eaten out; dairy products, sandwiches; alcohol, energy

drinks; added sugar; frozen fish and sea foods.
http://www.nextavenue.org/9-surprising-foods-that-raise-blood-pressure/?hide_newsletter=true&utm_source=Next+Avenue+Email+Newsletter&utm_campaign=2e4174194f-01.27.2016_NextAvenue_Newsletter&utm_medium=email&utm_term=0_056a405b5a-2e4174194f-165157349&mc_cid=2e4174194f&mc_eid=9a0a0d63b

ALZHEIMER'S UPDATE

This dreaded disease could be prevented and even cured by boosting the brain's own immune response, new research suggests.

Researchers at Stanford University discovered that nerve cells die because cells which are supposed to clear the brain of bacteria, viruses and dangerous deposits, stop working. These cells, called 'microglia' function well when people are young, but when they age, a single protein called EP2 stops them operating efficiently.

Now scientists have shown that blocking the protein allows the microglia to function normally again so they can Hoover up the dangerous sticky amyloid-beta plaques which damage nerve cells in Alzheimer's disease. The researchers found that, in mice, blocking EP2 with a drug reversed memory loss and myriad other Alzheimer's-like features in the animals.

"Microglia are the brain's beat cops," said Dr. Katrin Andreasson, Professor of neurology and neurological sciences at Stanford Uni-

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

versity School of Medicine. “Our experiments show that keeping them on the right track counters memory loss and preserves healthy brain physiology.”

By 2015 there will be 850,000 people with dementia in the UK, with Alzheimer’s disease being the most common type. The disease kills at least 60,000 people each year. Microglial cells make up around 10 to 15 per cent of cells in the brain. They act as a frontline defense, looking for suspicious activities and materials. When they spot trouble, they release substances that recruit other microglia to the scene which then destroy and get rid of any foreign invaders.

They also work as garbage collectors, chewing up dead cells and molecular debris strewn among living cells including clusters of amyloid-beta which aggregate as gummy deposits and break the connections between neurons, causing loss of memory and spatial awareness. These clusters are believed to play a substantial role in causing Alzheimer’s.

“The microglia are supposed to be, from the get-go, constantly clearing amyloid-beta, as well as keeping a lid on inflammation,” added

Dr. Andreasson. “If they lose their ability to function, things get out of control. A-beta builds up in the brain, inducing toxic inflammation.”

The scientists discovered that in young mice, the microglia kept the sticky plaques under control. But when experiments were done on older mice, the protein EP2 swung into action and stopped the microglia producing enzymes which digested the plaques. Similarly mice which were genetically engineered not to have EP2 did not develop Alzheimer’s disease, even when injected with a solution of amyloid-beta, suggesting that their cells were getting rid of the protein naturally. And for those mice who developed Alzheimer’s, blocking EP2 reversed memory decline.

Now Stanford is hoping to produce a compound which only blocks EP2 to prevent unnecessary side effects. The study was published in the Journal of Clinical Investigation.

<http://www.telegraph.co.uk/news/science/science-news/11280504/Has-Stanford-University-found-a-cure-for-Alzheimers-disease.html>

Sarah Knapton, Science Editor

Dollars & Sense

DON’T FORGET PROPERTY TAX CREDITS

While this is the time of year for income taxes, don’t forget most towns have a provision for property tax reductions/credits for those

with limited incomes. Most of these towns have a deadline of April 1 to file. So, we’re reminding you to check with your town offices to see if you qualify. One city, Nashua, has changed the qualifying limits for this year. They have gone up to \$50,000 income a year with \$150,000 total asset limit [excluding the house value]. Check it out in your town. You may be missing out on a valuable resource if you don’t.

7 WAYS TO INCREASE RETIREMENT INCOME

Bonus: You can do most of them from home:

The traditional retirement of a generation ago looks very different today. Many retirees do not have a company pension and health care, sufficient savings or adequate Social Security. According to the [2015 Retirement Confidence Survey](#) from the Employee Benefit Research Institute, only 22 percent of workers are very confident they have enough money for a comfortable retirement.

The future of retirement may look bleak, but just because you’re jumping out of the workforce (or already have) doesn’t mean you can’t still earn an income. With a little creativity and a lot of drive, there are plenty of ways to bring home a little bacon. Here are seven ideas to boost your retirement income:

1. Get a Flexible or Home-Based Job

Many retirees can find work through sites that specialize in [part-time, home-based employment](#).

Working from home is quickly becoming a solid option for retirees because it eliminates the things we all dislike most about work.

— Sara Sutton Fell, FlexJobs

“Working from home is quickly becoming a solid option for retirees because it eliminates the things we all dislike most about work — commuting and office politics,” said Sara Sutton Fell, CEO and founder of FlexJobs. “There are also onsite projects, so if someone wants to get out of the house for work, this is a great option, too. [Remote or telecommuting jobs](#) can be found in almost every career field. Some telecommuting jobs recently listed include at-home [English as a second language] teacher and virtual assistant and some of the more interesting freelance projects we’ve seen listed include photo researcher, content editor and medical interpreter.”

2. Become a Consultant

Many entrepreneurs and small business owners need advice from [consultants](#) who work on an hourly basis. If you’re an expert in your field, a consulting business can bring in extra income and still give you the flexibility you crave during retirement.

“Consultants and the expertise they bring are in demand,” said Tim Hird, executive director of Robert Half Management Resources. Businesses are working with these professionals to access specialized expertise, support key projects and help their full-time employees.”

To start a consulting business, “tap your network for their thoughts and referrals,” he said. “Also consider working with a staffing firm specializing in placing experienced professionals. The firm can handle the marketing and administrative aspects of consulting for you and allow you to do what you enjoy most: the work.”

3. Pursue a Passion

Plenty of people turn their passions into careers, and retirees are no exception. Ed Snyder of Oaktree Financial Advisors said he has several clients who have turned their interests into [side jobs](#) during retirement.

“I have a client who was a decorator, and in her retirement she works for a local retailer helping them to design and layout their store displays. She loves the work,” said Snyder.

Retirees don’t need to limit themselves to what they did in their previous careers, either.

“I have a client who retired in his 50s who loves golf,” Snyder said. “He picked up a part-time job at a golf course helping around the pro shop. He gets to pick up some extra cash and do what he loves. Tell me he doesn’t look forward to going into work every day.”

4. Help and Serve Others

Some of your fellow retirees and other people need help with basic services.

“The very oldest among us will need increasing help and support,” said Roy Cohen, career coach and author of *The Wall Street Professional’s Survival Guide*. “For those who want to remain independent, having a person to help with errands, driving, personal hygiene and other activities will become essential.”

Other service jobs include dog walking, house sitting and tutoring.

“The prospect of working beyond the age of 62 or 65 is fast becoming a reality,” Cohen added.

“People are living longer, healthier lives and realizing that work is central to maintaining a sense of purpose and joy.”

5. Participate in Market Research

Yes, you can get paid for having an opinion. Many companies hire market research firms to poll consumers about their products and services. These research firms often offer cash or gift cards in exchange for your time.

David Bakke, finance expert at MoneyCrashers, recommends Delve or Focus Pointe Global. “Sign up for an account and from time to time you’ll get email questionnaires to complete, or some-

Looking for a back issue of an ENH newsletter?

**Check our website:
www.engagingnh.org**

times you'll be called on the telephone. If your answers qualify, you'll be asked to participate in a test group or panel discussion, and you can make as much as \$100 for just several hours of your time."

6. Cash in on the Sharing Economy

In the [sharing economy](#), owners can rent out something they are not using. For example, if you don't drive very often or own more than one vehicle, you can rent your car out through a website like RelayRides.

Alternatively, you can list your home for rent on a website like VRBO (Vacation Rentals by Owner) or Airbnb. On sites like JustPark and StowThat, homeowners rent out parking spots or attic and garage spaces, which can be especially lucrative if you live in a city where storage is hard to come by. And speaking of renting out extra space...

7. Build a Small Rental Unit

This kind of project doesn't have to be as complicated or as expensive as it sounds.

"Many houses are well-suited to be modified without too much expense to include an autonomous rental apartment," said Joanne Cleaver, author of *The Career Lattice*. "The rent is great extra income, and the homeowners will save on taxes through pro rata write-offs of certain expenses. Just be sure to check with your home insurer first about maintaining coverage or find a new insurer that will meet your new needs."

Also remember to follow zoning and other laws. If you aren't crazy about dealing with the hassle of managing a rental unit, you might want to consider hiring a property management company. You'll sacrifice some of your profit, but it could eliminate a lot of headaches.

Morgan Quinn, *GoBankingRates.com*

Tech Tips

THE ONLINE CLASSES THAT HELP THE HOMEBOUND CONNECT

Friendships form easily over video chat at the Virtual Senior Center

Rose Binder, 93, of Queens, N.Y., is homebound. She has no stores in her neighborhood, and taking an accessible taxi service makes her "very nervous," she says. "Sometimes they come late or they don't show up and I have to keep calling." Even speaking on the telephone is difficult for her.

For many people in her position, life would be lonely and isolating. But thanks to something called a Virtual Senior Center, operated by the nonprofit Selfhelp Community Services, Binder's time is filled with intellectual and cultural riches. Moreover, she has the chance to make friends and to regularly chat with them face-to-face — all from the comfort of her home.

Each week, the Virtual Senior Center offers some 30 online classes to homebound clients, from tai chi and exercise to contemporary history discussions and gallery talks with museum curators, as

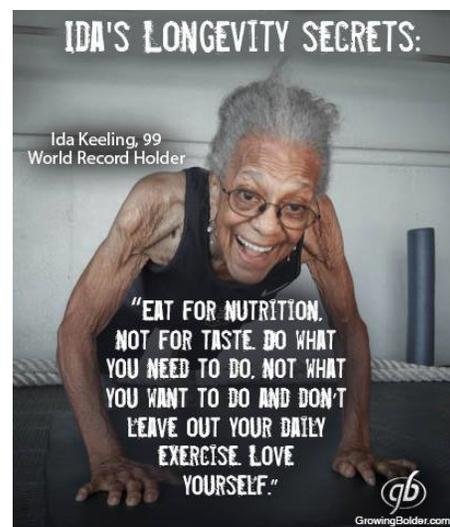
well as music appreciation and singing — even Mandarin. Participants use a simple touch-screen computer to join in, as well as to Skype, play games or use the Internet.

Technology to Alleviate Loneliness and Depression

Selfhelp partnered with Microsoft and the City of New York to develop the center. "The whole point is to marry technology with homebound seniors, to alleviate loneliness and depression," explains Carmella Chessen, Selfhelp's outreach/volunteer coordinator. "We want them to join four classes a week as a minimum. They have to want to be social and to learn the computer." They also cannot have cognitive issues, she adds.

The program serves more than 200 people, with an average age of mid-80s, although one participant is 100. More than half are in New York, with others connected through partner organizations in Chicago and Baltimore.

"I especially like any classes that give you information like history, art or museums, so I try to do as



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/

many as I can,” says Binder. “But unfortunately I have to eat lunch and I skip something. Where else can you get such a wonderful array of classes without going to class?”

Another participant, Amanda Fajardo, 83, especially enjoys the music classes and the opera. “We always learn something new,” she says.

Fajardo became involved with the Virtual Senior Center after her husband died two years ago. “I was alone and they offered me the program and they helped me a lot,” she says. “You have company and you don’t feel like you are isolated. I have my family, but still I have to spend a lot of time by myself.”

Research has found that loneliness contributes to many physical ills, among them heart disease, poor immunity and Alzheimer’s. To help counter loneliness, the Virtual Senior Center is all about participation and relationships. Unlike other distance learning where people often sit anonymously at their computer screens, participants engage here not only with the in-

structor but with each other, and friendships form.

Like a Gallery Talk From Home

“I was interested in duplicating the experience you have when you attend a gallery talk,” says instructor Nelly Silagy Benedek, director of education at The Jewish Museum. “It’s interactive, you make eye contact — with most online learning classes, you lose that.

With this, it’s a limited number of students, you can talk with them, you can really get to know them.”

Using a video chat system, each participant appears on the screen and conversations are in real time. Participants may choose to mute themselves, be invisible, or click on a big yellow hand icon to be called upon — although people often jump in with comments.

In a recent class, Benedek engaged participants by asking them to compare and contrast pieces of art now showing in an eclectic exhibit at her museum, called Unorthodox. She drew their attention to aspects of light, color and composition, soliciting their thoughts.

“I was definitely not sure what to expect at the beginning because I wasn’t sure if I could create that one-on-one connection in a virtual space and I was a little bit concerned I’d just be lecturing,” Benedek says. “But they’re very comfortable with each other and with expressing their opinions.”

Making a Personal Connection

In one class, Benedek was showing a work of art that depicted a Hasidic Jewish man wearing a traditional fur hat called a shtreimel. “One gentleman said, ‘just a minute,’ and he came back with an old faded picture of himself as a young man wearing a shtreimel — it was pretty incredible,” she says. “He was able to make that personal connection and share his experience with everybody. The participants often talk about their own personal experiences, which is often touching.”

In addition to The Jewish Museum, Chessen has formed partnerships with The Museum of Modern Art, The New York Historical Society and others to offer high-quality classes.

Joe Margolin, who teaches a lively contemporary history class, says “this is one of the most intellectually challenging activities that I’ve ever done in my life,” because he’s hit with so many interesting viewpoints. “It’s probably one of the things that’s keeping my cerebellum and cerebrum going.”

A recent discussion he led on the history and arcane rules of the political party nominating process was punctuated with laughter. “I’m not exaggerating when I say most of us have become friends,” Margolin said, and then added jokingly: “Janice and I are considering getting engaged.”

“You’re making me jealous,” piped up another woman.

Eyewitness Schmooze

At the end of the class, participants reflected on why they appreciate the Virtual Senior Center. “I’ve never been to college,” Patti, one of the younger students, said. “For me, it’s a great opportunity to learn because many of our participants were there during the Roosevelt years and World War II, so I’ve learned a tremendous amount from people who were eyewitnesses.”

“We all respect each other’s views and opinions,” added James, another participant. “And we care about each other. If someone is absent, we want to know why.”

For these participants, the Virtual Senior Center, supported by grant money, is free. To move toward a more sustainable financial footing and to make the center more widely available, Selfhelp now offers it to others who are homebound, for

a fee. Tuition for an unlimited number of classes is \$60 a month, in addition to the computer (\$575), set-up and training and high-speed Internet charges; participants may use their own computer if it has a web cam and meets other specifications. (I was able to sit in on a class using my five-year-old MacBook laptop.)

Technology That Empowers

The Virtual Senior Center is one of many innovative ways that Selfhelp supports the well-being of its clients. The organization was established some 80 years ago to assist Nazi holocaust survivors who came to the United States. Thirty years ago, the group expanded its services to low- and moderate-income older adults in New York City and Long Island.

“We believe in independent living with services, if and when [people] need them,” says CEO Stuart C. Kaplan, “so it creates dignity and independence for the individual and keeps the cost of care at a minimal level.” Selfhelp operates six senior centers (in addition to the virtual one), six housing complexes, four naturally occurring retirement communities (NORCs), an Alzheimer’s support program, home care, case management and other services.

In apartment complexes with Selfhelp, health kiosks in the lobbies let residents monitor their vital signs, which helps them better manage chronic conditions, such as high blood pressure.

Residents also use Skype to connect virtually with social workers, who stay on top of their emerging

problems. “That contact is much better than a phone call — seeing somebody, how they’re dressed, what their demeanor is,” says Kaplan. Through this technology, residents may be visited weekly, rather than every two or three months.

Fundamental to Selfhelp’s philosophy is that older people need to stay connected to the wider world. “To that end, utilizing our technologies, we work with schools, museums, churches and synagogues and bring all those activities and age groups, to our seniors, if they cannot get there any other way.”

As for the Virtual Senior Center, Kaplan says, “The response has been absolutely remarkable.”

Beth Baker, Nextavenue, 1/26/16

THE MOST PHOTOGRAPHED GENERATION WILL HAVE NO PICTURES IN 10 YEARS!

They’re everywhere. In your phone, on your tablet, you have your point-n-shoot, and maybe even a DSLR. A few might even own a film camera. You can’t escape the selfies, Instagram, Pinterest, and Facebook. People are deluged with photographs. And today, people are taking more pictures than ever before. It’s been

Raise Your Voice!

Please let us know what’s on your mind and what’s important to you.

engagingnh@gmail.com

estimated that in the past 5 years, more photos have been taken than all the prior years combined.

The sad part is that few of these photographs will survive beyond a year. To many people, a “picture” is only good for the moment. Moms and Dads want to snap every little movement of that new baby. Grandma wants to see everyone one of those too. When you want to show off the new puppy, you pull out the phone. And in a week, none of them have any real meaning and might even get “deleted” just to make room for more pictures that have little meaning as well inside of a couple of weeks.

So what will become of all the pictures that are being taken today? Here is the reason that 99% of the photographs being taken today are soon going to be totally gone – digital images are no longer important enough to most people to actually keep them in printed form!

Yes, I started in a film only world. We bought a roll of film and took our vacation photographs. We had them developed and printed. They were put in photo albums or photo boxes. We looked at them and cherished those memories with great care. They were a slice of our life and for many, if disaster struck, those photographs were the one thing we would try to find first. Wedding albums and photographs represented our LIFE and we salvaged all we could.

It is estimated and less that 1 out of 100,000 photographs taken today actually ends up being a printed photograph. The digital world means you can look at those on

Help Spread the Word!

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

Forward it on!

some computer screen and without one, you have nothing. You probably have countless pictures that are just randomly stored and has no organization or way to locate them. Perhaps you have made some effort, but even that can seem overwhelming a task when you decide to tackle the task.

Add to this, over the years, the technology has changed so fast, that many photographs taken 6-7 years ago are stored on a type of media that is no longer supported. I have boxes of floppy discs and not even a computer that works to view them. In 5 years or less, your DVD is going to be obsolete as will your USB drives. File types are going to change as well. And the technology of tomorrow may not support these “older” file types.

Many today have older cell phones with countless pictures on them. Maybe you “shared” some on Facebook or Instagram or uploaded to your photo storage website. But none of these are “permanent” solutions to viewing your

photos and sadly, many of your memories you captured today, aren’t going to be around tomorrow. So where is that old cell phone today? In a drawer someplace, you’re not sure where, but you know it’s around here somewhere!

There are also countless memory cards filled with photographs. Each of those represent a small slice of you or something that was a part of your life. Some are older and you have fewer options to view them as technology simply outpaces their usefulness. Does anyone remember the 256mb SD cards when today, a 4gb is considered tiny?

Perhaps you go to a Professional Photographer and all you want is someone to “take some pictures and give us the disc”. After all, it IS a “digital world” and it shouldn’t cost you very much. You can “take them down to the 1 hr. place” and get prints really cheap. No film. No prints from the lab needed to “see” them. So where are your discs today? Probably in that same drawer you haven’t found yet where that old cell phone is “lost” in. I doubt you have your DVD’s or old floppies on your wall! And when Mom asks if you have that adorable photo of your now 16 year old son or daughter- you know the one when they were 2- and you have to answer, I do, but I have to find it. “It’s on a disk...someplace...I think...maybe we still do...honey, where did we put that disk again?”.

In my home, you will find photographs. Real, honest to goodness

prints. Nothing fancy in most cases and most are just plain snapshots of family at holidays, on vacation, or doing something silly or even important. These are the slices of our lives where we can open the old “self-sticking” album and find out it no longer sticks. Where memories of our life unfolds before our eyes. We laugh. We cry. We tease each other. Our life is right there. It’s in that printed image that anyone can see. There is no wondering “if this file type is still supported” or does my “machine still have a DVD drive”. None of that is needed. Even the older, not quite as sharp as they used to be eyes can see them and feel the emotions of that instant in time as if it happened yesterday.

These are the things we protect with everything we have should some disaster strike and the ones we start looking for first if it does. All of a sudden that \$250 DeLonghi Coffee maker isn’t all that important. Nor is the fishing boat. Or the 72” big screen TV with all the bells and whistles. It’s always the memories of our lives that become the thing we search for first.

So if you are part of this “digital revolution”, let me ask you- where are YOUR photographs? Stuck on some disc or stored out there in cyberspace someplace, hopefully, perhaps? Why didn’t you actually purchase that \$500 canvas to display in your home that your Professional photographer worked so hard to produce for you? That was a “one of a kind” work of ART and an heirloom piece for your family to have and remember that little slice of their life. It is something that will be passed from

generation to generation and the only visual way your heirs will see what you looked like and the love and emotions you expressed the instant that image was captured.

2025. You just found that DVD you had in that drawer you couldn’t remember which one it was. Along with 9 old cell phones that no longer will work with today’s new technology. Your 3 inch by 3 inch cube computer no longer has a DVD drive since in 2015 they were totally phased out. Your 3rd grandchild is sitting on your knee and asks to see pictures of their Mom- and all you have to show them is this piece of round plastic that is pretty much worthless. Not to mention dusty and scratched from all those old cell-phones moving around every time you opened that drawer. And since Instagram had been merged with another company, and they started charging, you let that go 8 years ago.

I guess that makes you one of the “most photographed generation that doesn’t have a photograph in 10 years”. I guess it wasn’t that important then. Digital was cheap. Cameras were everywhere. It just didn’t seem that important.

Lost memories are expensive.

Mike Yost Photography, 1/31/15

Laugh & Live Longer

THE RULES

Hospital regulations require a wheel chair for patients being discharged. However, while working as a student nurse, I found one elderly gentleman already dressed

and sitting on the bed with a suitcase at his feet, who insisted he didn’t need my help to leave the hospital.

After a chat about rules being rules, he reluctantly let me wheel him to the elevator.

On the way down I asked him if his wife was meeting him.

“I don’t know,” he said. “She’s still upstairs in the bathroom changing out of her hospital gown.”

GETTING AROUND

A senior citizen said to his older buddy:

‘So I hear you’re getting married?’

‘Yep!’

‘Do I know her?’

‘Nope!’

‘This woman, is she good looking?’

‘Not really.’

‘Is she a good cook?’

‘Naw, she can’t cook too well.’

‘Does she have lots of money?’

‘Nope! Poor as a church mouse.’

‘Well, then, is she good in bed?’

‘I don’t know.’

‘Why in the world do you want to marry her then?’

‘Because she can still drive!’

MEALS ON WHEELS

While working for an organization that delivers lunches to elderly shut-ins, I used to take my four-year-old daughter on my afternoon rounds. She was unfailingly intrigued by the various appliances of old age, particularly the canes, walkers and wheelchairs.

One day I found her staring at a pair of false teeth soaking in a glass. As I braced myself for the

inevitable barrage of questions, she merely turned and whispered, "The tooth fairy will never believe this!"

Purposeful Living

Charlene Mitchell, volunteer extraordinaire. has been a volunteer for six years at the Sunrise Sunset Activity Center and Rockingham Nutrition & Meals on Wheels in Newmarket. She has been tireless and she has accumulated over 2,000 hours of service during her time there. She is one of those rare volunteers who comes into the center five days a week and spends an average of three hours a day to be on hand if needed. Her support of the center didn't miss a beat while she continued to be a caregiver for her own aging mother who passed a year ago at age 97.

There is very little that Charlene *hasn't* done at the center. She makes it a point to know all and see all so that she can be helpful in any way possible. She oversees the twice-weekly Bingo games and also the Wii bowling league



Charlene Mitchell

practice time and tournaments. She is always accountable for set-up and tear down leaving nothing undone.

For six years, she has documented through the lens of her camera all the happenings at the center from luncheons, to guest speakers and other special events and she puts together collages and bulletin boards of these memorable photographs for all to enjoy.

An avid gardener Charlene designs stunning window and she maintains them throughout the summer months. She also helps to sustain the center's vegetable garden by watering, weeding and harvesting so that all may enjoy fresh vegetables throughout the summer. She assists in daily maintenance of the dining areas by cleaning, sweeping, wiping tables, dusting and regularly organizing to keep everything neat and in place. She has also been a kitchen helper for the Meals on Wheels Newmarket site for several years. She can be found helping in all aspects of the program from receiving food deliveries, packaging desserts & breads and hot meals, packing delivery bags, serving lunches, cleaning up the kitchen including washing pots & pans and helping at the monthly special luncheons. As if that isn't enough, she is also a constant contributor to the weekly craft club by providing supplies, finding fun projects to work on and teaching others her crafting knowledge.

This past year, for several months, Charlene stepped into the role of Site Coordinator (without compensation) to make sure that the center continued to run without interruption or cancellation of any events and activities. Very rarely does one have the honor and privi-

lege to work with someone who is so selfless.

Charlene is truly a "volunteer extraordinaire".

Board Notes

LUCKY TO BE OLD

At the last Board meeting, members joked about feeling abandoned now that the phones have quieted and the door knocking has ceased since Primary Season is over. And who could resist a comment about the unusual campaigns this season. You may have noticed a few!

Let's put politics aside for a moment, and accept that certain events are part of a campaign and let's instead examine an interesting phenomenon we noted. Isn't it interesting that one of the oldest candidate running, Bernie Sanders, attracts large crowds of young voters? He's even willing to poke fun at himself as an icon for the grumpy old man.

Where's the Ageism?

Could it possibly be that we older adults are unknowingly and unintentionally contributing to ageism with our own assumptions? Of course, we recognize that age discrimination exists and ageism can be a serious issue. No denial there. But, should we accept a negative view of aging as the new normal as we grow older? Are we missing or overlooking examples of age appreciation?

If you look, you will find them, so let's explore a few:

Looking at Mandatory Retirement Age:

Speakers at the Age Boom Academy 2016/The Future of Work and Retirement, included Dr. Ruth Finkelstein who addressed the need for flexible work schedules and the idea that the retirement age is not one size fits all. *"We need to rethink how we understand work, making the concept of retirement age obsolete," she says. "It should be possible for people to dial up and dial down work across their life course. People shouldn't turn a switch when they're old and change everything."*

The Value of Older Adults as Mentors:

Paul H. Irving, chairman of the Milken Institute Center for the Future of Aging and distinguished scholar in residence at the University of Southern California, Davis School of Gerontology, is hopeful that change is coming. "Leaders in business are beginning to appreciate that older workers retain unique values, skills, wisdom and judgment and are recog-

nizing, frankly, that the intergenerational teams and workforces may be the most powerful workforces of the future," he said.

The Power of Oldness: An Australian video has a mission to defeat age discrimination with a simple message: "Oldness, it's everywhere. And if you're lucky, it can happen to you." This powerful video is part of the Australian Human Rights Commission's *The power of Oldness* campaign, aiming to bring attention to ageism in the workplace and to bring positivity to growing old.

(<https://www.youtube.com/watch?v=ks8P9ZTdmhY#t=10>. Be sure to watch it all the way to the end.)

Opinion Polls: Older adult opinions are becoming the focus of surveys, not just on politics but on issues such as housing, health care, driver distraction, falls prevention, suicide prevention, and downtown revitalization projects.

Volunteerism, Advisory Boards, and Civil Servant roles: This

category almost needs no explanation. Think back to the Primary and the age of the people managing your voting polls. Or, how many people there are volunteering in nursing homes, senior centers, libraries, municipal boards and for not-for profit organizations.

Test Trials for Products or Services: You might even get paid! Check your local newspapers for ads. (But also, be wary of potential scams.) There are legitimate businesses and organizations that care about what you think and will pay you to participate in focus groups and interviews.

Ageism comes in many forms and can be both hurtful and harmful. We must address it whenever and wherever it occurs. But we also need balance. Let's be part of the movement that recognizes the contributions and significance of people who, as the Australian video claims, are lucky enough to be "Old".

EngAGING NH

9 Gleneagle Drive
Bedford, NH 03110

ADDRESS CORRECTION
REQUESTED