



A Citizen Voice for the Aging Experience

# ENGAGING NH NEWS

GUEST OPINION:

## Common Myths of Hospice Care Debunked.

by Jacob Edward

In the past 40 years, attitudes towards death and dying in America and much of the rest of the world have slowly changed. The hospice movement has grown considerably and now constitutes its own segment of the health care system. Prior to hospice, people often died alone, in institutional settings like hospitals.

While some people still pass away without their loved ones around them, many are choosing to receive palliative care at home as a way to make the end of their lives as comfortable and rewarding as possible. But there are still many common misconceptions about hospice. Nobody likes to dwell on the subject of death, so people are naturally reluctant to study what hospice care is until they are in need of hospice services. I hope this article will dispel five of the common myths

*Myth No. 1:* Hospice places a time limit on patient stays and hastens death.

Many people mistakenly believe that to receive hospice care, the patient must be expected to live less than six months. But there is no rule determined by life expectancy.

This misconception can be traced back to Medicare, which gives assistance in the form of benefit periods. Each initial benefit period lasts 90 days and Medicare estimates people in hospice usually only need two periods. If after six months, however, you are still in need of

*There is nothing wrong with anticipating and preparing for death*

hospice services, you can receive an unlimited amount of 60-day benefit periods if a hospice director or doctor recertifies that you're terminally ill. Also, if you outlive the six-month Medicare estimation, you can go off hospice care and come back when you need it.

People sometimes live longer because the reduction of stress and increase of comfort can benefit health in a very positive way. The reason many patients only receive hospice care for short periods of time is because many people who could benefit are not referred. When people are referred, it is usually well past the time they could have originally been admitted into a hospice program.

Although many professionals are beginning to understand hospice care to a

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higher degree, they still often refer patients only when they are unmistakably near death. Palliative care is not designed to shorten or lengthen life, but rather to relieve emotional and physical pain while managing symptoms

*Myth No. 2:* People have to go to hospice centers in order to receive hospice care.

First and foremost, hospice care is a philosophy on death and dying rather than a physical place. People are able to receive hospice care wherever they feel most comfortable, whether that is in their home or in a licensed facility.

The philosophy of palliative care is to allow the patient the right to die wherever they desire. If patients choose to remain in their homes, hospice services are still available 24/7.

Also, hospice meets the needs of patients whether or not the patients' funds have been depleted. Care is not denied or reduced.

*Myth No. 3:* Hospice care requires you to stop taking medications.

This isn't always true. Many people fear hospice because they know that stopping medications can mean accelerated death. While it is true that hospice focuses on a relief-based, rather than a curative approach, the decision to halt medication is usually left up to the patient. Depending on where people are in their diseases, it may be best to stop taking a medication that's a source of discomfort. But this is determined case by case.

For example, if someone has cancer and has made the decision to

receive palliative care, he or she usually stops treatments such as chemotherapy and moves towards ones to be more comfortable.

*Myth No. 4:* Hospice depends on sedation as a major way to manage patients' pain.

For most people facing a terminal illness, it's not death they fear most, but the processes and pains of dying. With pain comes pain management, and many people fear that hospice workers intentionally sedate patients as the go-to method for dealing with pain.

While there have been abuses claimed, this is not the norm for hospice care. If patients have chronic pain, they are started at low doses and if the low dose works, they remain at that dosage. Pain management is only increased if the patient is still suffering from pain.

Hospice and palliative care has tried to show people that dying does not need to be painful and undignified. Dying can be comfortable and on individual terms. In addition to physical pain, there is emotional and psychological pain that hospice helps patients

and their families manage. Patients can take advantage of spiritual counseling. And hospice provides bereavement assistance for at least a year following a patient's death, with counseling beginning before the patient has passed on.

*Myth No. 5:* Once you're enrolled in a hospice program, there's no turning back.

This is absolutely untrue. Patients can stop hospice treatment at any time they wish and return to a curative-based approach if they feel that will benefit them more. Maybe a new treatment has been discovered and the patient wants to give it a try, or maybe he or she has begun to show signs of improvement, rather than decline.

Either way, a patient can opt out of hospice for any reason. Hospice professionals may even be the ones to discharge a patient if they see viable signs of recovery. If after a period of recovery the patient wants to return to hospice, Medicare generally pays for the extended coverage.

We're lucky we live in an age where death is beginning to be viewed as a natural process of life

## 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.*

that can be managed. With medical advances and accurate technology, life-threatening medical conditions can be monitored. Monitoring diseases allows doctors to make estimates about how long patients are expected to live.

In the past, patients were often intentionally left out of the loop when it came to their remaining life. Doctors and nurses mistakenly believed informing patients about their impending death would hasten the process. Health care workers were not trained to deal with the dying in a spiritual and psychologically productive way.

There is nothing wrong, however, with anticipating and preparing for death. This gives people closure not only in their own lives, but in the lives of those around them. When a loved one does make the transition into hospice, it is not about giving up or hastening death. Rather, it is about making passing as comfortable and painless as possible.

*Jacob Edward is the founder and manager of Senior Planning in Phoenix, Ariz., which has helped many Arizona seniors and their families navigate the process of long-term care*

## NH Updates

### STATE BUDGET UPDATES

Groups opposing business tax cuts, one of the Senate's top priorities, say the rate reductions will mean the state will be ill-equipped to meet the needs of citizens, transportation infrastructure and workforce development.

At a news conference April 14, representatives of small business, nonprofits, educators and religious organizations said the cuts will benefit large, multi-national corporations but hurt the state's economy because needed investments will not be made.

About 40 members of the group, including 18 small businesses, sent Gov. Maggie Hassan a letter expressing concern about the business tax cuts and asking her to veto the budget or any other bills that would reduce the tax rates.

But Senate Republicans say the state has some of the highest business tax rates in the country, making it uncompetitive not only in New England but across the country. They claim the cuts—phased in over three-bienniums—will make New Hampshire more attractive to businesses seeking to expand or move here.

*Garry Rayno, Union Leader*

(Editor's note: EngAGING NH supported the letter to the governor)

### HEALTH AND HUMAN SERVICES SEEKS ADDITIONAL MANAGED CARE ORGANIZATIONS

DHHS has issued a request for application (RFA) which seeks to add at least one Medicaid managed care organization (MCO) to the state's two existing plans in the Medicaid Care Management (MCM) program.

The MCM went live in December 2013 with three MCOs, but one has since withdrawn from the program. The MCM program current-

### 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](mailto:engagingnh@gmail.com)**

ly serves more than 152,000 members as it prepares to add as many as 20,000 new members under Step 2 (Long Term Care) in MCM implementation later this year.

### GOODBYE TO ANOTHER NH ELDER ADVOCATE

Long time elder activist, Ken Brooks passed away on April 19, 2015. He was a devoted caregiver to his wife who lived with dementia until her death.

Ken provided a voice that made a difference on the State and local

level. He served on the State Committee on Aging from 2001-7 and was active with the Manchester Region Area Committee on Aging and Liberty House for homeless veterans.

A remarkable man who remained mentally sharp though his last day, Ken was a passionate “people person” who connected with others in all walks of life—all ages and stages—advocating for the youth, the aged, the disabled, the homeless and diverse groups including native Americans.

## DO UPDATE

If you’ve tried to call a NH District Office (DO) and receive a busy signal, it might be that there has been a change in phone number. The Manchester DO recently switched to a VoIP (Voice over Internet Protocol) system and new phone numbers have been assigned to all staff.

It is our understanding that all DOs will soon be on this internet based phone system.

## From Our Readers

### A THOUGHT

If you're someone with a bit of age and experience, I would ask: to whom are you passing your knowledge, your tools, your documents, your perceptions? And while you've still got them, what are you doing with them?

*author unknown*

### KUDOS

Thanks [EngAGING NH] this (April) is an especially good

newsletter this month! Jam-packed with great info. May I use some of the contents – with attributions of course? Jeff Dickinson, Advocacy Director, Granite State Independent Living (GSIL)

*(Editor's note: we encourage sharing which includes any source notes)*

### REVERSE MORTGAGES INFO

To get a reverse mortgage you must be at least 62 and if married both parties must have reached at least 62. There are no credit checks for this.

It can be used for existing homeowners that have equity in their home to get money to pay for expenses in order to keep their home. (Must be careful to make the money last your lifetime as when you cannot pay the taxes and other expenses you could lose your home.

You can also use the reverse mortgage to purchase a home, same regulations apply as to both parties must be at least 62 year old. To get more information contact a mortgage broker that does reverse mortgages.

I purchased a 55 and over condo. Selling price was \$165,000 and I only had to pay \$60,000 the rest was paid by the reverse mortgage, and as long as my wife and I live here and pay the taxes, condo fee, and insurance we do not have to pay the mortgage.

There is insurance on the mortgage so if we live too long and there is a deficit, the insurance protects the financial institution that holds the mortgage.

I personally could not have afforded to live here if I had to make mortgage payments.

*Herb Johnson, Merrimack County SCOA Representative.*

## News You Can Use

### MEDICARE REMINDERS

Durable medical equipment (DME) is equipment that helps you complete your daily activities. It includes a variety of items, such as walkers, wheelchairs, and oxygen tanks. Medicare usually covers DME if the equipment is:

- Durable, meaning you can use it again;
- Designed to help a medical condition or injury;
- Suitable to use in the home, although you can also use it outside the home; and
- Likely to last for three years or more.

Medicare will only cover the cost of your DME if your doctor prescribes it and certifies that you need it to get around your home, not just to get around outside of your home.

The cost of your DME and the rules you must follow vary depending on your area and what DME you need. If you have Original Medicare, it will usually cover 80 percent of the cost of your DME and you or your supplemental insurance will be responsible for the remaining 20 percent. This applies to providers who accept assignment, or the Medicare

amount as payment in full. If you go to a provider who doesn't accept assignment, you may have to pay more. Call 800-Medicare or go to

[www.medicare.gov/supplier](http://www.medicare.gov/supplier) to find out your cost and the rules you must follow.

If you have a Medicare Advantage plan, each plan sets its own rates. Contact your plan to find out your cost and rules you must follow.

## **PART D PRESCRIPTION COVERAGE**

The coverage gap, also known as the doughnut hole, is a period of time during your Part D prescription drug coverage when the amount you pay for your drugs suddenly increases. The coverage gap starts when your total drug costs—including what you and your plan have paid for drugs—reaches \$2,960 in 2015.

As a result of the Affordable Care Act, you get discounts to help you pay for your drugs during the coverage gap. In 2015, there is a 55 percent discount on brand-name drugs and a 35 percent discount on generic drugs while you are in the coverage gap. These discounts will gradually increase each year until 2020, when you will typically pay no more than 25 percent of the cost of your drug.

In 2015, once you have paid \$4,700 out-of-pocket, you reach catastrophic coverage. During catastrophic coverage, your costs will be significantly less

[www.medicarerights.org](http://www.medicarerights.org) |

[www.medicareinteractive.org](http://www.medicareinteractive.org);

Consumer Helpline: 800-333-4114

## ***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
- Granite State Future
- Department of Health & Human Services

### **Other Groups we work with:**

- AARP
- NH Business and Industry Association
- 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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## HOSPITAL COMPARE

The Centers for Medicare & Medicaid Services (CMS) for the first time introduced star ratings on Hospital Compare, the agency’s public information website, to make it easier for consumers to choose a hospital and understand the quality of care they deliver. Today’s announcement builds on a larger effort across HHS to build a health care system that delivers better care, spends health care dollars more wisely, and results in healthier people.

The Hospital Compare star ratings relate to patients’ experience of care at almost 3,500 Medicare-certified acute care hospitals. The ratings are based on data from the Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS) measures that are included in Hospital Compare.

*HHS News, April 16, 2015*

## NEW MEDICARE SNAPSHOT HIGHLIGHTS COMPLEXITIES OF ENROLLING IN MEDICARE

Every day, 10,000 Baby Boomers are turning 65 and becoming eli-

gible for Medicare, but often the rules concerning how to enroll in Medicare are unknown to retirees and people with disabilities. The Medicare Rights Center released a new Medicare Snapshot: Stories from the Helpline, spotlighting the complexities of navigating Medicare enrollment.

Too frequently, individuals mistakenly delay or decline Part B enrollment because they are unaware of their rights and obligations. For those who fail to enroll in Part B in a timely manner, possible consequences include gaps in coverage, lifetime premium penalties, and disruptions in accessing needed care. To address these enrollment pitfalls, Medicare Snapshot outlines needed improvements to the Medicare enrollment process, including:

- Better notice for newly eligible Medicare beneficiaries;
- Enhanced support for employers and other messengers;
- Streamlined Medicare enrollment periods; and
- Expanded avenues for recourse
- For those approaching Medicare eligibility, Medicare Snapshot offers this advice:
- Consider all of your options well before you become Medicare-eligible, and start thinking about Medicare enrollment six months before you become eligible.
- If you have employer-sponsored health coverage, then you should carefully con-

sider whether to enroll in or delay Medicare Part B depending on the size of your company and whether or not Medicare will be your primary coverage.

- Make an appointment to speak to a representative at your local Social Security office about your circumstances after you have done some basic research.
- Write down what you are told by the Social Security representative, confirm that you understand the information you are being given, and keep a record of all conversations.
- If you are going to enroll in Part B, do so early in your enrollment period so that you do not experience any delay in coverage.
- If you are in an unusual circumstance, don’t assume that you understand how the general rules apply to you. Explain your circumstance to a trained counselor and ask questions!

For additional help, beneficiaries and caregivers can visit Medicare Rights’ informational website at [www.medicareinteractive.org](http://www.medicareinteractive.org), or call the national helpline at 800-333-4114.

## SIX WAYS TO END FOOD WASTE

1. *Use every last drop.* When you have a jar with food still left that’s either inadequate for a full serving or cannot easily be decanted, use it as a base for something else by adding new

ingredients and shaking to loosen the dregs. The salvage here may seem minimal – a teaspoon here, a tablespoon there – but it adds up. It’s also a great exercise in creative food usage and can be the start of some new recipes that you may not have thought of otherwise. Examples: To the last of a jar of peanut butter add soy sauce, rice wine vinegar and sesame oil for peanut sauce that can be used on everything from cold noodles to shredded cabbage for a twist on coleslaw. To the last of a jar of mustard add balsamic vinegar, olive oil and maple syrup for a Dijon-maple vinaigrette. To the last of a jar of tomato sauce add cream, shake, pour into a pan and heat for pink pasta sauce. To the last of a jar of Nutella add coffee, milk and ice cubes for an iced Nutella coffee. Just start with the jar, think of what recipes might use the ingredient that remains, and get creative.

2. *Rethink your vegetables.* Most of us have been taught certain ways in which to view our produce and it’s hard to see the whole vegetable in a different light. When approaching a vegetable on the cutting board, take a moment to consider the possibilities. Many of us have learned that once-neglected broccoli stems can be delicious when peeled; the same goes

## 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
Grafton	Chuck Engborg	eengborg@roadrunner.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 &amp; Senators</i>		
Cheshire	Rep. Susan Emerson	semerson435@aol.com
Cheshire	Sen. Molly Kelly	molly.kelly@leg.state.nh.us

for asparagus stalks. Likewise, beet greens and carrot tops can be cooked or used for pesto; radish and turnip greens can be cooked or used in salads; kale ribs can be sliced and sautéed; cauliflower leaves are delicious roasted with the rest of the bunch. There are so many ways to use the whole shebang; since all the bits and pieces have unique flavors, taste them and let their personalities be your guide. And the same goes for fruit: candied citrus peels and pickled watermelon rinds come to mind.

3. *Create a stock stockpile.* For the bits of produce, as referred to above, that you can’t figure out an application for, create a “stockpile.” I keep a covered bowl in my fridge and add all the scraps of vegetables I can’t find a use for during the week, and I create a batch of vegetable stock every Sunday. It’s always a different mix and may include everything from onion skins to herb stems to root greens to garlic ends. I mostly use the stock for soup bases, cooking dried beans and risotto; and whatever can’t be used that week (which is rare)

then goes in the freezer. Bonus: Cheese rinds, like those from Parmesan, add a wonderful richness to soup stocks, too.

4. *Think outside of the icebox.* Most of us know how handy the freezer is, but for some reason employing it for unusual ice cubes is often overlooked. Here are some ideas: Use leftover coffee for coffee ice cubes for iced coffee; use leftover juice for juice ice cubes to add to sparkling water; freeze leftover vegetable stock in ice cube trays to add as a finish for pasta; use leftover wine for wine ice cubes to deglaze sauté pans with; use leftover coconut milk to make coconut ice cubes to add to smoothies; use leftover lemon juice mixed with honey for ice cubes destined for iced tea. The possibilities go on and on.

5. *Make your freezer a smoothie bar.* The secret to smoothie success is using frozen fruit instead of plain ice, which melts and dilutes the flavors. And to be honest, sometimes the best frozen fruit to use is that which was frozen near the end of its life, when its sugars are at their highest and texture no longer matters. So if you were overambitious while fruit shopping, fear not, as you see it becoming mushy before your eyes. Peel it, chop it, and freeze it – and you will have many of the makings of a smoothie right on hand. When it comes time, add fresh fruit (if you have it, but it's optional), frozen fruit, and enough

liquid to allow your blender to do its thing, and voila.

6. *Behold your bread.* Bread is a beautiful thing, but once it has passed its prime, it becomes a less beautiful thing. Stale bread – and that harboring an ecosystem of mold – do not a nice sandwich make. I put sliced bread in the freezer the minute I get it home; for unsliced bread, I slice it first (or in the case of baguettes, portion it into what will reasonably be used for a meal) and do the same. The freezer takes none of its texture away, and in fact, keeps it as fresh-tasting and toothsome as when I got it. But if you don't freeze your bread, there are many ways you can employ it once it has become stale. Consider: bread crumbs, croutons, French toast, bread pudding, panzanella (the delicious tomato and bread salad), toss hunks in olive oil and sink them in soup, use in vegetable burgers, top casseroles with it, make stuffing, and when all else fails, make toast!

<http://www.treehugger.com/green-food/6-simple-tricks-nix-food-waste-home.html>

## 6 STAGES OF SUCCESSFUL ADULTHOOD

I have always doubted that “adulthood” is one amorphous blob of a stage. How could I be identical to my 30-something kids? Haven't I moved further along in my development? Aren't those miles worth something?

**Raise Your Voice!**  
**Please let us know  
what's on your  
mind and what's  
important to you.**

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Turns out, the answer is yes. A hundred years ago, children were considered miniature adults. It was only with the arrival of pediatrics that childhood was understood to have distinct and necessary stages. Parents were now able to anticipate the stages, and work better with their kids to help them become max functional adults.

Well, guess what? *Science now tells us that adulthood contains its own developmental stages.* Adult development as a subject for scientific study is a very new field, and the research is intriguing. We're learning that, just as successful childhood involves developmental tasks like independence and individuation, successful adulthood appears to involve six developmental stages.

In a fascinating book called [\*Aging Well\*](#), George E. Vaillant, M.D. and his team studied three groups of men and women over sixty to eighty years to learn how they were developing. The data were analyzed and recorded. Researchers discovered the stages of adult development: the factors that predicted whether a person will age well or badly over a lifetime.

The coping mechanisms that we develop as adults; these mechanisms are usually beyond the

reach of younger people. This study data is groundbreaking, because it's gathered over decades. In contrast, our usual way of finding out how to age successfully is to ask very old people how they did it. "I drink a shot of whiskey every day", says the beaming centenarian, but this isn't helpful.

Truth is, the elder doesn't know. Whether due to denial or failure of memory or who knows what, the only way to know the answer is to track a bunch of people over many years, control for variations, and look for commonalities, which Vaillant did.

By tracking these people from childhood (including observations of their home environment and family life), interviewing people who knew them well, and scrupulously adjusting for bias, researchers unearthed patterns. That information has profound implications for you and me – not just what stages to expect, but what factors predicted a long and happy old age, and what (surprisingly) didn't.

There's so much more to this that I'd like to post more in upcoming days, but without further ado, here are the six stages. They typically happen sequentially but may not.

*Identity* – a sense of one's own self separate from family of origin

*Intimacy* – the task of living with another person in an interdependent, reciprocal, committed, and contented fashion for a decade or more.

*Career Consolidation* – expanding one's personal identity to assume a social identity within the world

of work (this includes homemaking)

*Generativity* – demonstrating a capacity to unselfishly guide the next generation (without parenting them; involves giving up control of outcomes) *Personal note: Bill and I are here.*

*Keeper of the Meaning* – similar to Generativity but less related to individuals and more to broader society. Focus is on conserving and preserving "the collective products of mankind – the culture in which one lives and its institutions. " Concern for a social radius extending beyond one's immediate community.

*Integrity* – acceptance of oneself in existence; wisdom of one's place in the larger scheme of things, of one's uniqueness, of where one fits in the cosmic order; acceptance of mortality (my words).

As I said, there's so much more. For example, adults tend to develop mature coping mechanisms, which are interesting when you notice yourself engaging in one! And also, there are elements of healthy aging that you may want to focus more on. We'll continue the discussion, but for now, I hope this gives you a feeling of comfort about your own development.

Lynne Spreen, 4/10/15

## Health & Wellness

### AGE RELATED HEALTH CARE DISCRIMINATION

Q. I'm 64 and went to a new doctor about knee pain. He looked at my chart and then said, "At your

age, you might want to think about scaling back your activities." I excused myself, stood up and walked out. I'm committed to staying very active — I bike a lot and do yoga twice a week — and the age discrimination was obvious. I think it's pretty common in health care. How can I stop it from happening to me again? — Gracie M., New York

A. He's lucky you reacted in such a civil manner! Doctors who assume that lowered expectations and disability are normal for older folks are seriously out of step with everything we now know about healthy aging.

It's important to recognize age discrimination and fight against it, because it can lead to increased health problems. A recent study from UC San Francisco looked at data from the National Health and Retirement Study (2008-2012) and found that age discrimination in health care has seriously unhealthy consequences. Folks who said they encountered age-related health-care discrimination twice a year or more (and hundreds of thousands do) were almost 30 percent more likely to develop "new or worsened functional ailments."

So here are a few tips to help you decide on a new doc — don't worry that you're being too demanding; insist that your health-care providers treat YOU, not your age.

1. When you go to an appointment, set the rules. It's OK to say, "I expect you to treat me like an adult, not an old fart." If the doctor doesn't respond well to that or continues to be

condescending, find another doctor.

2. Take a list of questions to ask the doctor, so YOU get the answers you need.
3. Bring someone with you; reinforcements can help spot and deflect age discrimination.
4. Don't be shy about talking directly to your doctor about age discrimination (but we don't think that's a problem for you).
5. *Drs. Oz & Roizen, 4/13/15*

(Editor's Note: Remember, your sore knee is just as old as your good knee.)

## 6 FOODS THAT RELIEVE GAS

According to naturopathic doctor Ivy Branin, of [Simplicity Health Associates](#) in New York City these 6 foods aid digestion and prevent gas and bloating.

1. *Dandelion Greens*  
A bitter herb like dandelion seems like it would churn your stomach into a gassy knot, but this backyard nuisance is actually a bloat- and gas-fighting all-star.
2. *Pineapple and Papaya*  
Their ability to break down proteins in meat not only make pineapple and papaya natural meat tenderizers but these enzyme-rich foods can also ease digestion by helping break down proteins during digestion., according to Branin. The longer it takes to break down these proteins, the more likely it is that you will experience the feeling of fullness and bloating,

### Dr. Bill Thomas on his Age of Disruption Tour meets with NH Aging Enthusiasts



**EngAGING NH recently co-hosted a Granite State luncheon with Dr. Bill Thomas, founder of the Eden Project who is working nationally to Changing Aging. Dr. Thomas met with 22 stakeholders who want to make NH Age Friendly.**

3. *Kimchi*  
Considered a staple in any Korean kitchen, kimchi is a spicy mix of fermented vegetables that includes cabbage as its main ingredient. This fiber-rich food actually aids in digestion by populating the GI tract with beneficial bacteria.
4. *Kefir*  
Fermented cow, goat or sheep milk has up to three times more beneficial bacteria than yogurt — which helps the body break down food and prevent buildup of gas, according to research from
5. *Spices*  
The best way to prevent gas, according to Branin, is to add spices to your diet. In particular, she recommends black pepper, fennel seeds, caraway seeds, anise, rosemary, cardamom, coriander, basil and cloves. Considered carmina-

tive, which literally means an herb that prevents gas, these spices can go a long way in keeping the tummy taut and gas-free.

6. *Chamomile*  
Another carminative herb known to prevent and eliminate gas is chamomile, Branin recommends drinking chamomile as a strong tea (two bags steeped for 15 to 20 minutes) or a liquid extract taken before meals. “I recommend this to many of my patients who suffer from gas, with great results”, she says.

Ashley Neglia, [Grandparents.com](#), 3/3/15

## MELLOW PASTIMES CAN BE GOOD FOR YOUR HEALTH, TOO

This makes total sense: When you're engaged in an activity you

truly enjoy, you're happy. And, when you're happy you're not dwelling on all the negative things in life, nor are you stressed about obligations or problems. Certainly this is a good thing from an emotional point of view, but it also has physical benefits.

We know exercise reduces stress, but it turns out that more simple stationary things, like doing puzzles, painting or sewing can help, too.

To find that out, Matthew Zawadzki, an assistant professor of psychology with the University of California, Merced, looked at how the body reacts to leisure activities, defined as anything a person does in his or her free time.

In the study, 115 men and women from different racial groups, ages 20 to 80, were asked to wear little electrodes attached to their chest which measured heart rate throughout the experiment. They were then monitored over the course of three consecutive days, taking surveys at random times throughout the day. The survey questions included what they were doing at that very moment and how they felt about it.

Virtually all the participants reported reduced stress and had a lower heart rate during leisure activities, as compared to parts of the day when they weren't involved in leisure. Leisure could include exercise and socializing, but in many cases it was simple stationary things like listening to music, doing puzzles, sewing, even watching movies or TV. The people said they were 34 percent less stressed, 18 percent less sad

and their heart rate dropped, on average, by 3 percent.

A still from a quirky animation exploring some of the ways we relieve stress.

The positive benefits of leisure activities even appeared to persist for hours after the activity itself ended.

“We're still talking about the short term, but there was a definite carryover effect later in the day,” says Zawadzki, “and if we start thinking about that beneficial carryover effect day after day, year after year, it starts to make sense how leisure can help improve health in the long term.”

When a person is stressed, “their body is worked up – heart rate, blood pressure, hormones – so the more we can prevent this over-worked state, the less of a load it builds up,” he says.

You could think of this as a sort of mental escape. When you're totally engaged in and enjoying what you're doing, you don't have time to ruminate and worry. You also don't have time to get bored. And boredom, says Zawadzki, can be dangerous.

“There's something called 'boredom eating,’” he says, “where people just binge on junk food as a way to distract themselves. We'll often watch TV passively for hours at a time, rather than actively engage or really think about it. People smoke, drink, do drugs when they're bored.”

So the next time you're absorbed in a good book or a good movie, or even just listening to your fa-

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vorite music, remember you're not only enjoying yourself. You're helping your health.

## **BUILDING SELF-DISCIPLINE**

Harry S. Truman once said, “In reading the lives of great men, I found that the first victory they won was over themselves ... self-discipline with all of them came first “. But for the rest of us, self-discipline often comes second ... if at all.

Every day, we admit defeat to self-indulgence when we choose to snooze over waking up early, watch TV. instead of study and eat junk food when we should exercise. There's no doubt about it: if you want to achieve your goals, be it lose 14 pounds, write a best-selling children's book, start a non-profit or enroll on an online class, you need to build self-discipline. But self-discipline isn't something we should be afraid of and contrary to popular belief, it isn't that difficult to build...Once you know how.

### **Step 1: Start with ONE Habit**

Success in life and work is built sequentially – ONE habit at a time. If you can master one habit, you can master **any**. As a coach, I work with many clients who regularly allow their bad behaviors to get the better of them, and one of

the most common problems I see is when they try to change everything at once. They want to discipline themselves to go to bed before midnight, leave their phone outside their room, wake up early, write a blog post, meditate, get things done and everything in-between. But this doesn't work because trying to fix everything at once is like building Rome in a day. You overwhelm yourself, you don't notice marginal gains and you lose interest on the cusp of victory. So, instead, just concentrate on changing ONE habit. And to make it easier on yourself, focus on one you already know how to do, but perhaps have been either neglecting or doing inconsistently. These include washing up immediately after eating, making your bed, going for a walk, flossing, etc. Choose ONE habit and become **consistent** in doing it.

### Step 2: Commit Only to Starting

Starting a habit we've been procrastinating on is always difficult. And sometimes, the mere thought of putting on our running shoes, preparing a salad or writing a thousand words is enough to discourage us from starting – even when they're easy. Build self-discipline is about getting good at starting. And the secret to starting is making behaviors so easy you can't say no. Think of a habit as a sequence of tiny behaviors. Let's use going to the gym as an example. If you're like most people, when you think of going to the gym, what you're *really* thinking isn't exercise, you're thinking about how you have to pack your gym bag, go to the gym, change into your exercise clothes, warm

up, exercise, warm down, shower, change back into your street clothes and go home. You're also thinking about how long the habit is going to take. But by focusing on the first action – say, packing your gym bag – and being fully present as you do it, you avoid talking yourself out of doing it. So, with your one habit, focus on the first action you need to take and commit to it.

Be mindful while you're doing it. This prevents you of thinking about what you need to do next and not starting at all. Fill up the sink with warm, soapy water and bring your attention to how it feels on your skin. Then wash one cup. And then another, and another, and so on. Slip your feet into your running shoes and tie the laces. Loop, swoop and pull. Become mindful of how snug your feet feel in your running shoes. Type one sentence and listen to the sounds of your fingers clicking the keys. Your book begins to come to life, one sentence at a time. Take care of the first action and the remain-

ing actions will look after themselves.

### Step 3. Build Consistency by Counting

“I have no problem with *starting* habits, but committing to them, that's my problem “. I hear this a lot. Consistency *is* hard – but only when your expectation is unrealistic to begin with. That's why we make behaviors simple; it's impossible to *not* do them. The secret of being consistent is to fall in love with the boredom of the process and not concerning ourselves with the “all-or-nothing” mentality. Being consistent isn't about never missing a day; it's about missing a day, learning why you missed it and doing everything you can to ensure it doesn't happen again. As UCLA Bruins Coach John Wooden said, “Process is primary”. If you want to be consistent, start tracking your progress. Try and make a game out of it. How many days can you do your habits in a row? Have a target and meet it – then move the goal posts apart.

### Step 4: Rinse, Wash, Repeat

There comes a point when you no longer have to track your progress. The behavior becomes a habit. You no longer need to rationalize or decide to do it. There's no rationalization and no resistance. You simply do it. That doesn't mean you stop bringing your full attention to what you're doing or stop trying; it simply means it's become *easier* to do. You become self-disciplined. The next step is to choose a new habit and repeat the process. Remember: success in life and work is built sequentially,

**Help Spread the Word!**

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one habit at a time. *Sam Thomas Davies scouts the leading edge of the human sciences for what's new, surprising, and important. He writes about research-based ways to improve habits, add new skills and sustain excellence*

<http://www.pickthebrain.com/blog/build-self-discipline-4-easy-steps/#3OvWeFPBUYdZP54W.99>

## FOCUSING THE BRAIN ON BETTER VISION

As adults age, vision deteriorates. One common type of decline is in [contrast sensitivity](#), the ability to distinguish gradations of light to dark, making it possible to discern where one object ends and another begins.

When an older adult descends a flight of stairs, for example, she may not tell the edge of one step from the next, so she stumbles. At night, an older driver may squint to see the edge of white road stripes on blacktop. Caught in the glare of headlights, he swerves.

But new research suggests that contrast sensitivity can be improved with brain-training exercises. In a study published last month in *Psychological Science*, researchers at the University of California, Riverside, and Brown University showed that after just five sessions of behavioral exercises, [the vision of 16 people in their 60s and 70s significantly improved](#).

After the training, the adults could make out edges far better. And when given a standard eye chart, a task that differed from the one they were trained on, they could correctly identify more letters.

“There’s an idea out there that everything falls apart as we get older, but even older brains are growing new cells”, said [Allison B. Sekuler](#), a professor of psychology, neuroscience and behavior at McMaster University in Ontario, who was not involved in the new study. “You can teach an older brain new tricks.”

The training improved contrast sensitivity in 16 young adults in the study as well, although the older subjects showed greater gains. That is partly because the younger ones, college students, already had reasonably healthy vision and there was not as much room for improvement.

Before the training, the vision of each adult, young and older, was assessed. The exercises were fine-tuned at the beginning for each individual so researchers could measure improvements, said Dr. [G. John Andersen](#), the project’s senior adviser and a psychology professor at the University of California, Riverside.

During each session, the subjects watched 750 striped images that were rapidly presented on a computer screen with subtle changes in the visual “noise” surrounding them — like snow on a television. The viewer indicated whether the images were rotating clockwise or counterclockwise. The subject would hear a beep for every correct response.

Each session took an hour and a half. The exercises were taxing, although the subjects took frequent breaks. But after five sessions, the subjects had learned to home in more precisely on the im-

ages and to filter out the distracting visual noise. After the training, the older adults performed as well as those 40 years younger, before their own training.

The older participants were also better able to make out letters on an eye chart at reading distance, although not one 10 feet away. The younger students were better able to see the distant eye chart, but not the closer one.

“We think that a behavioral intervention where learning is going on changes brain structure in older adults”, Dr. Andersen said.

In the absence of a disease like glaucoma or changes in the retina and optic nerve, contrast sensitivity is processed by the brain’s visual cortex. This study suggests that certain areas of the brain can be strengthened. “It means the visual system has a high degree of [plasticity](#), even in old age”, Dr. Andersen said.

Dr. Andersen and his colleagues, including Denton DeLoss, a graduate student and the paper’s lead author, say they do not know how long the effects of this modest intervention will last. But an earlier study in which older adults received training to sharpen their ability to discern texture showed

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that the improvement [was sustained for at least three months](#).

Dr. Andersen said that as people aged, the random firing of neurons in the brain's visual system increased, creating a kind of internal noise. At the same time, the aging brain struggles harder with external visual noise, such as snowflakes in a blizzard that obscure words on a road sign.

The latest study's exercises were designed to train adults to filter such external visual noise so they could better discern edges of contrast. "It's possible that the brain might simultaneously have been trained to reduce internalized noise," Dr. Andersen said.

Researchers are increasingly focused on perceptual learning, the brain's ability to discriminate among stimuli — training the ear, for example, to distinguish between Shostakovich and Bartok, or the palate to discern a cabernet sauvignon from a pinot noir. There is also much research on the aging brain. But until now, few scientists have thought to examine the possibilities for improving perceptual learning in older adults.

"These researchers are leading the charge," Dr. Sekuler said.

[Jan Hoffman](#)

[http://well.blogs.nytimes.com/2015/04/06/focusing-the-brain-on-better-vision/?\\_r=0](http://well.blogs.nytimes.com/2015/04/06/focusing-the-brain-on-better-vision/?_r=0)

## Dollars & Sense

### HOW TO AVOID THE 4 BIGGEST RETIREMENT BLUNDERS

You might think a stock market crash is the biggest threat to your retirement plans. Not so. A steep drop in stock prices certainly doesn't help, but basic lapses in retirement planning actually represent a much bigger danger to your retirement security. So if you want to have a comfortable and secure retirement, be sure to avoid these four major planning blunders:

#### **Blunder No. 1: No Plan B**

In an ideal world, you'd start contributing to 401(k)s and other accounts in your 20s, stick to that savings regimen and have a hefty nest egg by retirement age. In the real world, things don't always work out so neatly, which is why many people enter the later stages of their career well short of the savings they need to retire. That's why it's crucial to have a back-up plan.

An all-out savings effort in the home stretch to retirement should definitely be one contingency. For example, a 50-year-old with nothing saved who earns \$80,000 a year and gets 2 percent annual raises could accumulate a nest egg of nearly \$150,000 by putting away 10 percent of salary until age 65, assuming a 7 percent annual return. Boost that savings rate to 15 percent — which is the target many pros recommend over an entire career — and the savings balance jumps to almost \$220,000. Pull out the stops and save 20 percent annually, and our 50-year-old can go from zero to more than \$290,000 in just 15 years.

Granted, even this effort can't make up for a lifetime of not saving. But you can certainly accu-

multate enough in 15 years — or even five or 10 — to appreciably improve your retirement standard of living. Other things to consider when creating your Plan B: working a few extra years to save more and allow account balances to grow; strategies for maximizing Social Security benefits; tapping the equity in your home by downsizing, taking out a reverse mortgage (or both); and perhaps even relocating to a city or town with a lower cost of living.

#### **Blunder No. 2: Investing by the Seat of Your Pants**

With all the attention the financial press gives to the market's ups and downs, it's easy to equate smart investing with good timing — i.e., knowing when to jump out of stocks and into bonds or predicting which type of investment is about to skyrocket and which is ready to nosedive. But let's be real: Market meltdowns take most investors by surprise, as stocks' 37 percent loss in 2008 did. And even if you're savvy enough to get out before a meltdown, fear of getting hit with further declines makes it all-too-easy to miss the first sharp rebound that eventually follows a collapse. For example, stock prices jumped 70 percent in 12 months a year after hitting bottom in March 2009.

A better strategy: Settle on a diversified mix of stocks and bonds that makes sense given your risk tolerance and how long you plan to keep your money invested. Then, generally stick to it except for occasional rebalancing. This approach is particularly important as you near the end of your career

and enter retirement, since you've got to balance two competing goals: growing your nest egg while simultaneously protecting it from unacceptable losses.

### **Blunder No. 3: No Strategy to Turn Savings Into Income**

Tilting your retirement portfolio toward bonds and dividend stocks is *not* a retirement income plan. Indeed, by focusing too heavily on income-oriented investments you could actually put your portfolio and your retirement security at risk. You're better off developing an income plan that allows you to maintain a diversified portfolio while also taking full advantage of the other retirement resources at your disposal.

Start by getting a handle on estimated costs by filling out a retirement expenses worksheet. Next, see how much of those expenses you can cover from guaranteed sources of income, such as pensions and Social Security. If you think you'd like more assured income, consider an immediate annuity. You can then rev up a good retirement income calculator to see how much of the remainder of your expenses you can reasonably expect to cover withdraws from a diversified portfolio of stocks and bonds.

The aim is to keep draws low enough so you don't run through your nest egg too soon, but high enough to provide sufficient spending cash (especially early in retirement, when you'll be able to enjoy yourself the most).

### **Blunder No. 4: Failing to Chart a Post-Career Course**

It would be a shame to get the financial side of retirement right, but feel unhappy or unfulfilled after leaving your job.

You can avoid that unwelcome situation by doing a little "lifestyle planning". The basic idea: to think seriously about how you'll fill the hours when you no longer have a job or contacts with work colleagues to soak up much of your time. Among the things that can lead to a more meaningful and satisfying retirement: cultivating a circle of friends and maintaining ties with family members; keeping physically fit and mentally alert and, staying active and engaged through work or volunteering.

The Ready-2-Retire tool can help you think more seriously about these issues, as can attending a pre-retirement workshop like the ones offered at the Osher Lifelong Learning Institute at the University of North Carolina-Asheville.

Clearly, there are plenty of other retirement planning mistakes you can make. But if you avoid these four blunders, you'll dramatically increase your chances of being able to have a financially secure and emotionally satisfying post-career life.

*Walter Updegrade,*

## **Tech Tips**

<http://www.nextavenue.org>

### **TRAVEL TROUBLES**

Had a bad trip or booked your trip on line and having problems finding a person to help? Christopher Elliott might be able to help. A

travel writer featured in a number of prestigious publications, including National Geographic, he describes himself as a consumer advocate for those with travel woes.

Contact him at:

<http://elliott.org/help/>

### **HOW TO SEE EVERYTHING YOU'VE EVER GOOGLED** (if you're so brave)

You probably don't remember what you Googled 10 minutes ago, let alone the myriad inane and fleeting things you've searched since the engine's beginnings.

But unless you're browsing in incognito mode or have tweaked your account settings, Google remembers those things. Not only that: Google logs all of your searches, analyzes them, and uses them to individually personalize the search results you see — which has pretty profound implications for both literacy and privacy.

Now, the search giant has created a way for users to better understand that process. In a feature quietly rolled out last January, and surfaced by a Google blog over the weekend, users can download their search histories from Google, including things they've searched across computers and phones.

These histories aren't 100-percent comprehensive: They only include searches you've made while signed in on your Google account. (Admittedly, if you have Gmail, this is probably more or less most of the time.)

Google also delivers them as JSON files, which aren't the most human-readable things. But if you

download your search history from the little drop-down in the top right corner of this page, open it in your computer's notepad or other plain-text editing app, and search for the term "query\_text," you'll get a rundown of everything you've ever searched. I downloaded my archive to make this GIF of every phrase I've Googled in the past seven days. (No, I didn't edit anything out; yes, you want to see Skateboarding Taco for yourself.)

Caitlin Dewey April 20

#### 4 STEPS TO A HEALTHIER RELATIONSHIP WITH TECHNOLOGY

I've written about digital technology for 35+ years, most of the time in Silicon Valley. Over the decades our evolving devices, and what we can do with them, have dramatically transformed almost every facet of our lives -- from how we bank, travel, and shop, to more abstract realms like how we derive a sense of self-worth, how we forge and sustain relationships, and how we choose to spend our attention.

I think the first step to getting a human and humane handle on this rapid transition from a nature-based to a digital-based society is for us all -- individually and collectively; technologists and the public - to step back from time to time, catch our breath, and re-visit our relationship to technology from a more conscious and empowered place. To me this involves engaging in the 4 P's. Put simply, it's about taking the time to Pause. Perceive. Pray/Meditate. And Practice.

**Pause.** One of the greatest threats to our well-being now is the incessant barrage of marketing "noise" we receive from our consumer electronic (CE) devices. It's estimated that the average person sees about 5000 ads a day -- that's over 80 percent of the messages we get each day -- and most of that registers sub-consciously. Much of the digital content we get every day is designed to frighten us, titillate us, and make us greedy and envious. And we don't even know this is happening.

Might that have something to do with the coarsening of society that we sometimes experience? We are constantly at the receiving end of a tsunami of destabilizing content. But we are under no obligation to accept it, or take in any more of it than what serves our aspirations and highest purpose.

We can control how much we choose to expose ourselves. Pause and think about that. Pause to develop composure within yourself. To focus on the signal of meaning in your life, and minimize the noise and blather that comes at you constantly -- much of it delivered by our always-on devices.

**Perceive.** Throughout history, science and technology were largely concerned with *things in themselves*: stars, atoms, levers, micro-processors. And philosophers and poets were more interested in *connections between things*: love, mercy, justice.

But in the last century the physical and life sciences have focused more on *relationships*. The theory of relativity measures everything in relation to the speed of light.

#### 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 18 Lowe Avenue, Concord, NH 03301.**

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Big Bang and evolution theories show how the present state of the universe and the biosphere are the result of measurable processes over time. The life sciences reveal that the mind (*psyche*) and body (*soma*) are extremely interdependent. Perceiving and appreciating the interconnectedness of all things is no longer for mystics or poets alone, but now for hard-core physicists and microbiologists.

Involvement in the web of existence is not an optional activity. Whatever holds existence together -- whether we call it God, Tao, super symmetry -- it deserves our awe, attention and, respect. So when we pause, we need to also perceive. And that means to see as well as to look; to hear as well as listen. Perceive the interconnections that are all around us and within us and without us.

**Pray/Meditate.** St. Benedict who established the monastic order in the 6th Century that kept law, medicine, scholarship and faith alive during the Dark Ages, observed that the Latin word for prayer (*ora*) is contained the word for work (*labora*). Doing appropriate work with appropriate tools is prayer.

Francis of Assisi, the patron saint of the Silicon Valley area, said, “Pray always, and if necessary use words.” If we hope to reintroduce notions of virtue and values back into the scientific and engineering enterprises, mindfulness is the stepping off point. All spiritual traditions practice this: the cultivating of a keen awareness of what a given situation is, how to respond to it, and what will result from that response. That’s also the definition of engineering, rightly understood.

As we practice mindfulness, we develop an understanding of our interconnection. We absorb the reality of our interconnectedness into the core of our being using the ancient spiritual technologies of stillness and silence. Whether you call it prayer or meditation or something else entirely, it is a priceless tool.

**Practice.** We can make effort to be mindful and composed when using our tool –at work, home, school—and intend the outcomes to leverage kindness. It can’t be done all the time, but we can start and build on the practice: be calm; be kind. Be conscious of your actions and thoughts so that from among all the options before you, when

you use a tool, you choose the one most likely to produce kindness.

In the past that was called virtuous behavior. And it’s called a *practice* because it takes work over time, but with more practice the process gets easier. To the extent possible, every time you use a tool—whether pencil or supercomputer—practice doing so in a composed frame of mind, and intend that the outcome of the effort is an act of kindness. This isn’t possible much of the time, of course, but it’s a start to rethinking technology as if people matter.

Pause. Perceive. Pray or Meditate, and Practice. These four simple approaches have the potential to transform our relationship to technology.

In closing, here is a short verse that speaks to the essence of our current condition:

*Nature is how universe-mind touches our own mind.*

*Tools - technology - are how our mind touches universe-mind.*

*When these minds are aligned, there is success-in-living.*

*When they are misaligned, there will be catastrophe.*

*Mindfulness in our tool-use is essential now,*

*For our success, our sanity, our survival.*

*Tom Mahon, 4/8/15,  
<http://www.dailygood.org>*

## Laugh & Live Longer

### HONEST!

A Policeman came to my door and asked where I was between 5 and 6 and seemed quite irritated when I answered, “Kindergarten”.

### OOOPS

After a meeting several days ago, I couldn't find my keys. I quickly gave myself a personal “TSA Pat Down.”

They weren't in my pockets. Suddenly I realized I must have left them in the car.

Frantically, I headed for the parking lot. My husband has scolded me many times for leaving my keys in the car's ignition.

He's afraid that the car could be stolen.

As I looked around the parking lot, I realized he was right. The parking lot was empty.

I immediately called the police. I gave them my location, confessed that I had left my keys in the car, and that it had been stolen.

Then I made the most difficult call of all to my husband: “I left my keys in the car and it's been stolen.” There was a moment of silence.

I thought the call had been disconnected, but then I heard his voice.

“Are you kidding me?” he barked, “I dropped you off!”

Now it was my turn to be silent.

Embarrassed, I said, “Well, come and get me.”

He retorted, “I will, as soon as I convince this cop that I didn’t steal your damn car!”

## HEALTH TIP

DO NOT wash your hair while showering!!!

It is so good to finally get a health warning that is useful.

It involves the use of your hair shampoo while showering

and what occurs when it runs down your body.

I don't know why I didn't figure this out sooner. When I wash my hair while showering; the shampoo runs down my entire body. Printed very clearly on the shampoo label is a warning that reads: “For extra body and volume.”

Well, no wonder I've been gaining weight.

I've gotten rid of that shampoo and now use Dawn dish washing soap. It's label reads: “Dissolves fat that is otherwise hard to remove.”

Problem solved.

## MORE ON HEALTH

Colonoscopies are important medical procedures that have saved lives. And yet they're as popular as, well, a colonoscopy. Here are comments purportedly made by patients to physicians during their procedures.

“Now I know how a Muppet feels!”

“Could you write a note for my wife saying that my head is not up there?”

“Any sign of the trapped miners, chief?”

*Dave Barry, Miami Herald*

## REALLY!

MapQuest really needs to start its directions on number five. Pretty sure I know how to get out of my neighborhood.

*Aaron Karo, ruminations.com*

## BETTER?

“Has your diet changed?” I asked an 87-year-old woman I was admitting into the hospital.

“Yes,” she said. “For Lent, I gave up whipped cream on my Jell-O, hard candy, and my two beers a night. [Pause]

And look where it's gotten me.”

*L.K., via Internet*

## Purposeful Living

### VOLUNTEERISM: THE BACKBONE OF SENIOR CENTERS

In celebration of National Volunteer Appreciation Month, the NH Association of Senior Centers would like to take this opportunity to recognize the backbone of our Senior Centers – our VOLUNTEERS!

Those who embrace a life of active, energetic, and engaged citizenship through volunteering are the heart and soul of Senior Centers across New Hampshire.

Through service, ordinary people can make an extraordinary impact. Thanks to thousands of volunteers, entire communities benefit from their strong and vibrant Senior Centers.

A recent poll of fifteen Senior Centers resulted in a resounding message of “We simply couldn’t do what we do without them! Our volunteers not only make our programs possible, but each individual contributes a unique talent which allows for creating a diverse offering within our Center.”

Collectively in these 15 Centers, more than 2,300 very special people gave over 110,000 hours of their most valuable assets—their personal time, talent and knowledge in 2014. They’re teaching classes, assisting programs, providing rides and services, helping others, cooking and/or delivering meals, mailing newsletters, answering phones and so much more. Their altruistic attitude is valued at more than \$2.5 million in labor costs.

In New Hampshire, there are 42 multipurpose Senior Centers along with another 70+ recreation departments, nutrition programs or independent organizations providing senior services at some level. To find a senior center near you, please visit [www.nhasc.org](http://www.nhasc.org)

*Patti Drelek*

## Board Notes

### INCREMENTAL DEATH

There is a saying, “It’s not the mountain that wears you down, but the pebble in your shoe.” Apparently, older adults in New Hampshire have been walking around with little pebbles, spread out over time, camouflaging painful changes.

## 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	<a href="https://guinta.house.gov/contact/email">https://guinta.house.gov/contact/email</a>
U.S. Representative Ann Kuster	137 Cannon House Office Building, Washington, DC 20515	(202) 225-5206		<a href="https://kuster.house.gov/contact/email-me">https://kuster.house.gov/contact/email-me</a>
U.S. Senator Kelly Ayotte	144 Russell Senate Office Building Washington DC, 20510	(202) 224-3324	(202) 224-4952	<a href="http://www.ayotte.senate.gov/?p=contact">http://www.ayotte.senate.gov/?p=contact</a>
U.S. Senator Jeanne Shaheen	520 Hart Senate Office Building Washington, DC 20510	(202) 224-2841	(202) 228-3194	<a href="http://shaheen.senate.gov/contact/">http://shaheen.senate.gov/contact/</a>

Some of these changes can be tracked by looking at the infrastructure through which federal funds come to NH to benefit NH's older citizens who need support and services to remain as independent as possible. The infrastructure can be robust or it can be weak. NH often opts for the latter.

A good example of this choice is NH's State Council on Aging (SCOA) with its related Area Committees on Aging (ACOA). Unlike other states with statewide networks of regional Area Agencies, NH's Department of Health and Human Services chose to provide the planning, staff support, control of funds and oversight. This infrastructure choice also extended to how NH investigated charges of abuse and neglect as well as how it provided case management to individual elders who needed Medicaid funded home care. This interconnected design (from the State to the local Area Committees) should have created the foundation for planning from a big picture perspective. But, over the years this interconnection has unraveled as most of the Area Committees have become nothing more than a contact number.

Other incremental changes can be tracked through how the Department establishes and implements overall budget priorities and organizational arrangements. The various program areas compete for their needs to be met. Over the years organizational changes have included:

- Downgrading the Division of Elderly and Adult Services to a Bureau (BEAS) – less status/power
- Eliminating the unit for Alzheimer's Disease and Related Dementia – fewer programs and services for individuals with this increasingly prevalent disease.
- Moving the Long Term Care Ombudsman Program that oversees complaints about nursing homes out of the Bureau – strengthened the program's ability to function independently.
- Downgrading SCOA from a Council to a Committee and relocating its budget to BEAS – less status and availability to funds
- Moving-eligibility responsibility for Medicaid - covered nursing home care and community - based care programs

out of BEAS – less coordination and goal consistency.

Changes that have directly resulted from budget cut decisions include the following:

- BEAS stopped providing staff support to the Area Committees on Aging.
- BEAS reduced its quarterly newsletter from 4 to 3 times a year
- BEAS stopped providing staff support to SCOA – even business cards for SCOA members had to be personally solicited from the Commissioner.
- BEAS eliminated hosting the Vaughan Awards recognizing older volunteers throughout the State.
- BEAS dropped funding and supporting the annual Conference of Aging.
- The share of Medicaid covered nursing home payments made by the counties through property taxes was significantly increased
- Case Management was contracted out.
- Services that are much needed to support older adults in the community and prevent premature placements in nursing

homes were and are cut or eliminated in each budget cycle. Example: Congregate Housing is no longer available through state funding.

- Rates to providers are flat or reduced, and public/private partnerships are a thing of the past. And,
- At the State level, the Attorney General's Office position that supported BEAS investigations on abuse and neglect was eliminated.

Similar changes have also been occurring at the federal level:

- The Administration on Aging (AOA) has stopped hosting a once a decade conference in which delegates developed a vision and goals for the coun-

try, and replaced it with regional listening sessions.

- Reauthorization of the federal Older Americans Act was delayed for two years.
- Sequestration stripped funds from programs such as Meals on Wheels, but when federal funds were restored they were not returned to the state providers.

While we don't necessarily advocate for a separate Agency on Aging, we do ask, "Where's **OUR** representation?" The Department often promotes through what it says, the "importance of prevention"; "One Stop Shopping"; "No Wrong Door"; and community options - all rational and legitimate concepts.

However, with fragmentation and continued undercutting, these concepts simply cannot be implemented. Unfortunately, the Department's rhetoric rings hollow. NH has one of the fastest growing older populations in the country. The policies and actions **must match the needs.**

## EngAGING NH

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ADDRESS CORRECTION  
REQUESTED