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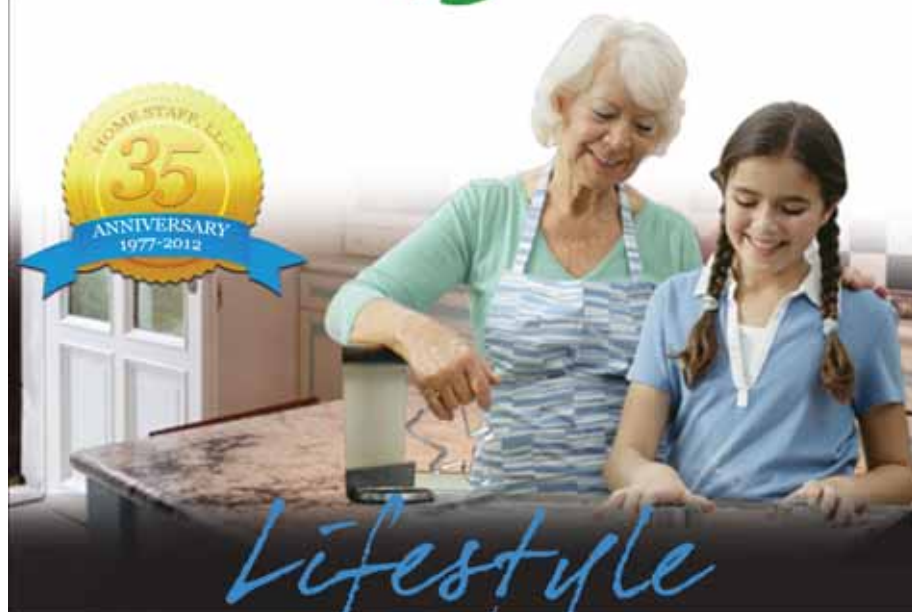
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Alan Canfora holds John Filo *Life* magazine photograph of him at Kent State University on May 4, 1970 at the Worcester Art Museum on Sept. 29.
(advocate photo by brian goslow)

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Exhibit brings back memories of national crisis

By Brian Goslow

David Davis remembers that November 1963 weekend as clearly as if it happened last month.

"I remember everything," said Davis, 60, of the assassination of President John F. Kennedy and the events that followed. At the time, Davis, who now lives in Sherborn, was in the sixth grade at the Tenacre School in Wellesley.

"My mother picked me up from school on Friday; we got out at 2 and we turned on the radio in the car and we heard the news (about the shooting of Kennedy in Dallas) and we went home and turned on the TV. We didn't leave the TV till Tuesday morning."

Like millions of Americans, Davis' family purchased the following week's *Life* magazine, its logo in black accompanying a portrait of the late president. Davis still has it, safely stored away.

However, his collection of Kennedy artifacts — and other similarly traumatic events that would follow in the years to come — did not stop there. Years later, Davis began acquiring photographs of seminal



moments that took place between the time when Davis was a child and Kennedy began his run for the presidency to Davis' college years at Wesleyan University in Connecticut, as the Vietnam War was coming to a close.

That collection would spawn "From Kennedy to Kent State: Images of a Generation," an exhibition of 120 photographs Davis donated to the Worcester Art Museum that are on view through Feb. 3.

Images from Camelot greet visitors at the show's entrance: the solitary figure of Kennedy walking on the dunes while Jacqueline and Caroline Kennedy play on the beach of Hyannis Port; the Kennedy-Nixon television debate; "The Loneliest Job in the World"; and frames from the Abraham Zapruder film, *The Assassination of John F. Kennedy*.

The theme of assassination haunts the exhibition — the lead word in photographs capturing the killings of JFK assassin Lee Harvey Oswald, Martin Luther King, Jr., Robert F. Kennedy, Kent State University student Jeffrey Miller, and the unarmed Viet Cong prisoner having a pistol fired into his head in a Saigon town square.

Museum visitors, some wearing '60s garb, study the images intently, the older ones recalling the times and the stories associated with them while younger visitors try to comprehend the meaning of the images before them as the voice of Joan Baez singing We Shall Overcome from the March on Washington fills the gallery.

"I wanted the people who were alive back then to look at them and go, 'Wow, I remember that' and remember how they felt and remember how it formed who they are," Davis said.

"It's important for young people to really see what happened in that period of time because the whole country took a right turn. The '50s weren't as idealistic and innocent and perfect as people think they were.

And, the '60s starting with Kennedy's assassination marked the beginning of domestic unrest. Nothing defined the tumultuous state of the nation more than May 4, 1970 when four students were killed on the campus of Kent State University in Ohio after three days and nights of protests that followed President Richard Nixon's announcement that the United States was expanding its involvement in the Vietnam War into Cambodia.

Kent student Alan Canfora had recently attended the funeral in his hometown of a friend killed in Vietnam. "I was there with my friends and roommates, including George Caldwell — it was his brother that was killed," Canfora recalled during a recent interview with the *Advocate*. "When we stood at the graveyard, before his coffin was lowered into the ground, we all looked at each other and we swore that at our next opportunity we were going to protest vigorously to send our message to President Nixon to stop the horrible war in Vietnam."

A noontime protest against the war's escalation was called for the Kent campus. "We had been planning on making some protest flags throughout that weekend but we never got around to it," Canfora said. "But on May 4, I did wake up in time to saw a broom handle off and cut it in half, and then I attached some black material with some help from my friend."

What happened soon afterwards was captured in a John Filo photograph that would appear in the next issue of *Life*. Standing behind him, Filo captured Canfora waving his black flag at Ohio National Guardsmen, who stood 150 feet away.

"I thought, it was unlikely that they would shoot," Canfora said. "I thought they had their fingers on the triggers but I really thought that neither I, nor anyone else there, was doing anything that deserved to get shot."

Soon after the photograph was taken, students were given an order to disperse. The Guardsmen marched up a hill, then turned and began firing at the crowd — 67 shots in all. Canfora jumped behind a tree before feeling a bullet go through his right wrist. Four others, including Jeffrey Miller, whose image with then 14 year-old Mary Anne Vecchio standing over his lifeless body, would win Filo the 1971 Pulitzer Prize, died.



John Paul Filo, American, born 1948, Kent State, May 4, 1970, Gelatin silver print, gift of David Davis, 2011.140

Canfora was in attendance at the opening of "Kennedy to Kent State," where one attendee, noting he was in Vietnam in 1970, told him how his fellow troops had learned about the shootings through the *Stars and Stripes* newspaper distributed to soldiers in the field and they had been angry with those who fired the shots.

Canfora has had many conversations with servicemen over the years. "I have to admit, that there are a few, very few, hostile Vietnam veterans that blame the protestors for losing the war in Vietnam," he said.

"But the majority of the Vietnam veterans that I've spoken with, either in person or through my website, thank the protestors because our main motivation was to stop the war so that our fellow citizens, our schoolmates, our neighbors, our friends, our relatives — you know those guys that fought in Vietnam were from our generation — could come home. We knew those guys — we loved them. That was our main reason for stopping the war and protesting so vigorously, along with our concerns about the deaths of the Asian people."

Canfora regularly hears from people through his website, alancanfora.com, as well as May4.org, the website of the non-profit educational Kent State May 4 Center, asking about the events of 1970.

"The vast majority of people that make inquiries are college-, high school- and middle school-age students" doing school reports, Canfora said. "I think it's the teachers, very often from the baby boomer generation, who are teaching these lessons about the 1960s, about Vietnam and Kent State, and consequently, they assign their students to study this information."

He continues to work toward receiving an apology from and bringing to justice those who gave the orders to shoot and that did the shooting at Kent State.

Canfora has served as director of the May 4 Center since 1980 and is a charter member of the May 4 Task Force student organization

which formed in 1975. But he makes it clear that's not the only focus of his life. He is library director for the Akron Law Library and is chairperson of the Barberton Democratic Party, a position he has held for over 20 years.

The country has undergone significant changes since that day in May.

Davis believes we no longer experience tumultuous times on our student campuses or hold large-scale protests like in the 1960s and early 1970s because there is no longer a military draft. "The opposition to the current wars just doesn't exist because people can forget that they are happening; (back then) it was the students and their friends that were facing the draft," he said. "I was in the draft lottery so I know what that felt like, and it was not good."

Lottery numbers were based on birthdays, matched with a random number draw between 1 and 365.

Davis' lottery number was in the middle, around 150, so Davis was told he was "really safe" from the prospect of being drafted. There was a back-up plan, however. "I had a wonderful, eccentric great-aunt who I think was a little bit crazy, but I loved her," Davis said. "She had lost her younger son in World War II and was very bitter because it happened after peace had been declared but they hadn't gotten the word where he was. So she said to me 'If you get drafted, you come to me and I'll shoot your toes off.' She meant it and she would have done it."

While the period captured in the exhibition was a very unsettling time to grow up in, Davis finds some of the things going on today even more unsettling. "But that's more about the mood and the tone and the attitude (of the discussion)," he said. "I'm really surprised at the tone of the political discourse in this country because I think to myself, 'My God, where are the flower children? They're certainly not running the government. What happened to peace, love and freedom and respect for other people and live and let live and do your own thing?'"

Having spent 12 years of his life compiling the "Kennedy to Kent State" collection, Davis looks at the 120 images on the Worcester Art Museum walls as children that have left home.

"It was personal, almost a diary of what formed the person that I am in that very intense time of adolescence and young adulthood," he said. "I think I needed to somehow, instead of putting it on paper and writing a play or a book, I needed to do it chronically and visually, because I'm a very visual person. And that was my way to express the core of who I am and what made me that way."

For more information about the exhibit go to the Worcester Art Museum website at www.worcesterart.org.

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Long-term care can bankrupt Americans

By Sondra Shapiro

Two years ago my husband, David, and I bit the bullet and purchased a long-term care insurance policy. We had begun talking about retirement, and when we broached the topic of someday needing home or institutional care, we felt financially vulnerable. So we began exploring long-term care insurance options.

After doing exhaustive research on what a policy should include, how much it should cost and what we should be aware of, we called a highly recommended agent. Because we were in our 50s the premiums were relatively reasonable, especially when weighed against what it could cost our family for long-term care. That's not to say it was an easy decision to assume an extra expense during these uncertain economic times.



Just My Opinion

Ultimately, we decided that biting the bullet was better than the alternative — financial ruin — which is affecting many families faced with such care. A new study by MetLife's Mature Market Institute reports that the cost of health and daily living assistance provided in a facility or at home, is rising faster than inflation for most long-term care services.

As for that long-term care insurance option I was touting, the cost for a new policy for people 55 to 65 rose by as much as 50 percent compared with five years ago. Companies have been dropping products because they are financial losers; and for many of the remaining policies the premiums are rising or coverage is decreasing — or both.

In the last five years, monthly rent for assisted living, which includes help with daily living activities, rose 17 percent to \$3,486; the price for a private room in a nursing home rose 4 percent to \$248 a day.

One small reprieve was that the cost for home-health aides and adult-day services remained the same. However, according to a report in the *Wall Street Journal*, which cited a report by the Medicare Payment Advisory Commission, home-health-care spending by Medicare beneficiaries climbed 129 percent to \$19 billion from 2000 to 2010.

Long-term care funding is an afterthought for most families. Since it's a huge expense that primarily retirees confront, it has been easier to not think about it until

something happens.

With such dire financial consequences for families, it boggles the mind why long-term care was not on the radar during this or any election in memory.

To be fair, the national priority has rightly been deficit reduction and ways to get us out of the recession. To be realistic, the financial consequences of long-term care for families and the government cannot keep being ignored.

There was a small ray of hope tucked within President Obama's sweeping health care plan. Called the CLASS Act, it would have set up a national, voluntary long-term care insurance program. Though it was barely sufficient, at least it was something that could have been built upon — that is until it was scraped by the Obama administration.

Individual states have begun passing consumer protection laws pertaining to the sale of long-term care insurance policies. Massachusetts just became the 47th state to do so.

As the population ages, the demand for care will reach staggering levels. This makes federal neglect a huge mistake.

As history shows, the prices will keep escalating. Ultimately, the burden will bankrupt families and those families will turn to government (Medicaid) for help. The Medicaid system, which has become the primary payer of such care, was not designed to foot such a bill and cannot continue to do so. There needs to be a more efficient and cost-effective solution.

When FDR signed Social Security into law in 1935 as a New Deal program, he said its impetus was to keep the nation's elderly out of impoverishment. In FDR's day, with a lifespan of 65, there was little concern about long-term care or about its cost depleting household savings. Today, with an average lifespan of 80.8 years, the country again faces the issue of poverty in old age because of the cost of long-term custodial care.

Though today's Americans are less welcoming of big government, it is in the nation's best interest to help its neediest. As far as I'm concerned, I'd welcome any talk including public/private initiatives. Anything would be better than the status quo of silence in Washington.

Like my and my husband's decision to buy insurance despite the uncertain economic climate, it's time for the country to bite the bullet.

Sondra Shapiro is the executive editor of the Fifty Plus Advocate. Email her at sshapiro.fiftyplusadvocate@verizon.net. And follow her online at www.facebook.com/fiftyplusadvocate, www.twitter.com/shapiro50plus or www.fiftyplusadvocate.com.



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AARP congratulates Carmen Pola, the Massachusetts recipient of the 2012 AARP Andrus Award for Community Service.

Pola, a longtime activist in Boston's Mission Hill neighborhood, has worked tirelessly to bring together the city's older residents to address a wide range of issues—including granting access to health care and jobs, improving public schools and bettering public housing conditions.

Honoring the legacy of founder Dr. Ethel Percy Andrus, the prestigious AARP Andrus Award for Community Service is given annually to one outstanding volunteer in each state whose service makes a valuable contribution to society.

For more information about AARP in Massachusetts, visit aarp.org/ma or call 1-866-448-3621.



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Geek Squad provides quick fixes for older computer users

By Brian Goslow

During this holiday season, you may decide to buy yourself a new electronic toy — or take the big step of helping a parent or older loved one get online through a new computer laptop, tablet or Smartphone. Take comfort in knowing that you now have 20,000 people waiting to help you through this great transition.

Geek Squad, which has been providing assistance with computer problems through Best Buy for years, is now lending a hand to AARP members as well through its new Geek Squad Tech Support and Guidance program.

"If you have a computer and if you're intimidated by it, you're less likely to actually learn how to use it."

— Derek Meister

The AARP package, which costs \$169.00 annually — \$99 if you buy a new computer at Best Buy — includes exclusive content and pre-purchase advice for AARP members, unlimited in-store, online and phone support for up to three personal computer devices, expert installation, training and repair, and round-the-clock Geek Squad agent availability. Without AARP the one-year package costs \$199.

Geek Squad agent Derek Meister said, while the stereotype of an older computer user being fearful of new technology is a real one, in reality, a lot of it is not as much about their ability to use the product as the intimidation factor.

"If you have a computer and if you're intimidated by it, you're less likely to actually learn how to use it," he said. "So that intimidation factor is really the number one problem for most people to overcome."

While the number is diminishing, some people still have computerphobia. "We have people that are very uncomfortable with

computers, and at the same time, we have plenty of people who will surprise you with just how much they're actually taken to their computers, getting onto the Internet and being able to connect to their friends and family, through Facebook, through Skype and that sort of thing," Meister said.

The AARP Geek Squad website offers a video tutorial, articles and tools to make the learning process easier. If that doesn't help, agents are available 24 hours a day, which is helpful should you find yourself pulling out your hair when things don't work as expected.

"We've learned that a lot of times when people do call us, they're going to be frustrated at the beginning; sometimes they'll be a little upset from that frustration," Meister said. "But as you go through that call and you provide solutions and get things working for them and even showing them things that maybe they didn't realize their technology could do for them before," they are less intimidated.

He gave the example of his mother, who, when she first went online five years ago, used to print out every one of the emails she received. "Now, she's on Facebook, she has an I-Pad, she gets online, she sends us little videos," he said. "It's because we got her to get past that intimidation factor and basically learn to play around with it."

While some Geek Squad Tech Support customers go into their Best Buy locations with their devices, the service can easily be carried out at home with Geek Squad agents able to access computers remotely through the Internet. Meister said approximately 98 percent of customer problems are solved over the phone.

Meister said the three biggest computer operation issues they're asked to solve are "My computer's running slow"; "What should I do about those little pop ups that keep asking me to click through?" and software-related problems tied to email or a printer.

Most often, a slow-running computer, especially if it's older, needs to have its software updated and cleaned up. "We do what we call a 'PC tune-up,'" Meister said. "We go through, get all the system updates, all those little plug-in updates that pop up and bug



Meister

you all the time, like Java, Flash, that sort of thing, and then get the computer running a little bit faster."

As Geek Squad agents conduct that process, as well as its virus spyware removal program, they'll answer customer questions regarding those pesky pop-ups and whether it's a good thing to click them. Agents also

ask the customers if they have children who access the computer. "If they have teenagers (or grandchildren who visit) in the house, their computer is probably infected by a virus because they're more likely to go and just click everything," Meister said.

Another frequent problem area is email and non-working printers. Often, wireless network printers have "forgotten" they're on a wireless network and need to be reprogrammed.

Meister said it brings him pleasure to show customers how to do things with their computer that they couldn't do before. "We know that when the technology is right, literally, anything is possible so we want to make sure they're getting the most out of that technology," he said.

To learn more about the Geek Squad Tech Support and Guidance program for AARP members, visit aarp.geeksquad.com or call 800-921-0907.

Obama's health care overhaul turns into a sprint

By Ricardo Alonso-Zaldivar

WASHINGTON —

Its place assured alongside Medicare and Medicaid, President Barack Obama's health care law is now in a sprint to the finish line, with just 10 months to go before millions of uninsured people can start signing up for coverage.

But there are hurdles in the way. Republican governors who derided "Obamacare" will now have to decide whether they somehow can join the team. And the administration could stumble under the sheer strain of carrying out the complex legislation, or get tripped up if budget talks with Congress lead to scaling back the plan.

"The clarity brought about by the election is critical," said Andrew Hyman of the nonpartisan Robert Wood Johnson Foundation. "We are still going to be struggling through the politics, and there are important policy hurdles and logistical

challenges. But we are on a very positive trajectory." Hyman oversees efforts to help states carry out the law.

In the two years since passage of the Affordable Care Act, the Obama administration has been consumed with planning and playing political defense. Now it must execute.

States recently informed Washington whether they will be setting up new health insurance markets, called exchanges, in which millions of households and small businesses will shop for private coverage. The Health and Human Services Department (HHS) will run the exchanges in states that aren't ready or willing.

Open enrollment for exchange plans is scheduled to start Oct. 1, 2013, and coverage will be effective Jan. 1, 2014.

In all, more than 30 million uninsured people are expected to gain coverage under the law. About half will get private insur-

SPRING page 7



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► Spring

Cont. from page 6

ance through the exchanges, with most receiving government help to pay premiums.

The rest, mainly low-income adults without children at home, will be covered through an expansion of Medicaid. While the federal government will pay virtually all the additional Medicaid costs, the Supreme Court gave states the leeway to opt out of the expansion. That gives states more leverage but also adds to the uncertainty over how the law will be carried out.

"We are still going to be struggling through the politics, and there are important policy hurdles and logistical challenges."

— Andrew Hyman

A steadying force within the administration is likely to be HHS Secretary Kathleen Sebelius. The former Kansas governor has said she wants to stay until the law is fully enacted. "I can't imagine walking out the door in the middle of that," she told *The Kansas City Star* during the Democratic convention. Her office

declined to comment.

Republicans will be leading more than half the states, so governors are going to be her main counterparts.

Some, like Rick Perry of Texas and Rick Scott of Florida, have drawn a line against helping carry out Obama's law. In other states, voters have endorsed a hard stance. Missouri voters passed a ballot measure that would prohibit establishment of a health insurance exchange unless the Legislature approves. State-level challenges to the federal law will continue to be filed in court. "Republican governors are at the center of the health care universe right now," said Michael Ramlet, health policy director at the American Action Forum, a center-right think tank. "They do not have a uniform position across the board."

GOP governors are pressing Sebelius on whether the administration will approve partial, less costly Medicaid expansions. There has been no ruling yet.

On health insurance exchanges, some governors whose states aren't likely to be completely ready are considering the administration's offer of running the new markets through a partnership.

"The real question for Republican governors is, 'Are you going to let the feds come into your state?'" Ramlet said. "The question for the Obama administration is

whether they are going to have more flexibility."

Major regulations due shortly and covering issues including exchange operations, benefits and protections for people with pre-existing health problems could signal the administration's willingness to compromise.

A recent check by The Associated Press found 17 states and the District of Columbia on track to setting up their own exchanges, while nine have decided not to do so. The federal government could end up running the new markets in half or more of the states.

The states on track include California, Colorado, Connecticut, Hawaii, Kentucky, Maryland, Massachusetts, Minnesota, Mississippi, Nevada, New York, Oregon, Rhode Island, Utah, Vermont, Washington and West Virginia.

The nine definitely not setting up exchanges are Alaska, Florida, Louisiana, Maine, New Hampshire, South Carolina, South Dakota, Texas and Wisconsin. Missouri and others are likely to join the list.

As far as Medicaid, 11 states and the District of Columbia have indicated they

will expand their programs, while six have said they will not. That leaves more than 30 states undecided.

The states definitely expanding Medicaid include California, Connecticut, Delaware, Hawaii, Illinois, Maryland, Massachusetts, Minnesota, New York, Vermont and Washington. Those declining include Florida, Georgia, Louisiana, Mississippi, South Carolina and Texas.

On Capitol Hill, Republicans say if a budget deal is going to include tax increases, it must also come with cuts to the health care law, or money-saving delays in its implementation.

While major changes can't be ruled out, they don't seem very likely to former Senate Majority Leader Tom Daschle, D-S.D., who is close to the administration.

"I think Democrats are increasingly emboldened about the health care act," Daschle said. "The president won re-election partly by defending it. There is a new dynamic around the health care effort."

Republican attempts to amend the law will continue, he added, but outright repeal is no longer a possibility. "Budgetary issues will continue to be a big question mark," said Daschle. — AP



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Medicare to reward hospitals for providing better care

By Ron Pollack

Heat failure. Pneumonia. Heart attack. If you or a loved one suffers from one of these health conditions, you will want to make sure you get the right follow-up treatment. And now your local hospital will have a financial interest in making sure you do, too.

While politicians talk about how to reduce Medicare spending in the future, some steps are being taken right now as a result of the Affordable Care Act (the health care law). One of the big improvements the law made is to encourage hospitals to do a better job and get it right the first time. This will help prevent what are called "avoidable readmissions." That's when a patient has to go back into the hospital shortly after being discharged.

Now hospitals that have high rates of readmission for three health conditions — heart failure, pneumonia and heart attack — will have their Medicare payment rates reduced. Over the next few years, more conditions will be added to the list.

Why is this needed? Because evidence shows that too many patients end up back in the hospital when they don't get the right care while they are there or when they are being discharged. Of course, sometimes patients need to be readmitted through no fault of the hospital

— for example, the person may need multiple surgeries to treat a particular condition. But too often, these readmissions could have been prevented with better care.

For example, if no one at the hospital explains to a patient how to take his or her medications when he or she is being discharged, he or she might easily end up with complications that put them back in the hospital.

Families USA

Until now, that hospital would have been paid when the patient was readmitted. So a hospital that didn't do a very good job could easily get paid more than a hospital that kept its patients healthier.

Clearly, we want to reward hospitals for taking good care of their patients, not for giving them inadequate care. Changing the financial incentives will encourage hospitals to provide better care in the first place. For example, hospitals can do a better job when the patient is in the hospital by ensuring that all staff wash their hands frequently, which prevents the spread of infection. Hospitals can also improve communication with patients (and their caregivers) and with other health care providers who care for the patient. For example, they can make sure patients know how to care for themselves when they leave the hospital and that their regular doctors know what tests were performed at the hospital and what medications were prescribed.

The patient has a role to play, too. A stay at a hospital can be overwhelming, but the patient needs to take the

time to ask important questions about their care plan and to make sure they understand it. He or she can ask a family member or friend to help. There are also several resources that help the patient and caregiver through this process. The Family Caregiver Alliance provides an online guide for families and caregivers that they can use during the hospital discharge planning process at www.caregiver.org under "Fact Sheets." Medicare has created a checklist to use during discharge from a hospital, which can be found at www.medicare.gov/publications/pubs/pdf/11376.pdf. And if you ever have concerns about the quality of the care you receive, you can contact your local Medicare Quality Improvement Organization (QIO). You can find your local QIO by visiting www.ahqa.org and clicking on QIO Locator. To learn more about how a QIO can help, visit www.medicare.gov/Publications/Pubs/pdf/11348.pdf.

Hospitals can greatly improve the outcome for patients by taking proven steps, such as patient education. No one wants to be in the hospital, and you certainly don't want to have to go back if that can be avoided. This change to the way hospitals are paid is a smart first step to improving care for all of us.

Ron Pollack is the executive director of Families USA, a national organization for health care consumers. It is nonprofit and nonpartisan, and its mission is to secure high-quality, affordable health coverage and care for all Americans. www.familiesusa.org.

New settlement improves Medicare at home

By Al Norman

Two years ago, a U.S. District Court Judge in Burlington, Vermont ruled in the case of *Anderson vs. Sebelius* that Medicare should pay for home health services to prevent a deterioration in a patient's condition.

Sandra Anderson began receiving home health services from the Visiting Nurse Association of Chittenden and Grand Isle Counties (VNA) in 2004. She was 60 years old at the time, and had just returned home after being hospitalized for her second stroke. Anderson's lawsuit claimed that the federal government had violated the Medicare statute, regulations and policy manual by applying an informal and unlawful "stability presumption" — whereby coverage was automatically denied for patients whose condi-

tions were "stable" during the covered period. Anderson charged the stability presumption violated her Fifth Amendment due process rights.

To receive Medicare benefits for home health care services, a beneficiary must be: (a) confined to the home; (b) under the care of a physician; (c) in need of skilled services; and (d) under a plan of care. Skilled services "must be consistent with the nature and severity of the beneficiary's illness or injury, his or her particular medical needs, and accepted standards of medical and nursing practice."

The Vermont District Court Judge wrote: "A patient's chronic or stable condition does not provide a basis for automatically denying

coverage for skilled services ... skilled care may, depending on the unique condition of the patient, continue to be necessary for patients whose condition is stable."

In October of 2012 — two years after the Vermont court ruling — a settlement was announced in a class-action lawsuit which will require Medicare to pay more often for physical, speech and occupational therapies for people with chronic conditions like Alzheimer's disease, multiple sclerosis and Parkinson's disease — conditions which are unlikely to "improve." As one advocate for people with Parkinson's noted: "The idea that you would have to show improvement when you have a degenerative disease is blatantly absurd."

Under the settlement, the federal government agreed to revise the Medicare manuals their contractors (fiscal intermediaries) use to make clear that coverage for therapy should be based on a person's need for skilled care — not on their potential for improvement."

Maintaining health, preventing further deterioration (such as slowing the process of dementia) is a valid need for skilled services.

But a note of caution: the Medicare Handbook says that Medicare Part B will cover physical therapy, but "there may be a limit on the amount Medicare will pay for these services in a single year." In 2012, the therapy cap for physical therapy and speech therapy combined is \$1,880, with a separate cap of \$1,880 for occupational therapy. Beneficiaries can get an "exception" to double this amount — but you have to show the therapy will help you "achieve prior functional status or maximum expected functional status within a reasonable amount of time." This language makes no sense for someone with a chronic condition.

Ironically, providing people with better in-home care will prevent the use of costlier settings, like emergency rooms or nursing facilities. So the new settlement is good health care policy, and good fiscal policy as well.

Al Norman is the executive director of Mass Home Care. He can be reached at 413-772-6289, or by email at info@masshomecare.org.

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Baby boomer joblessness lasts longer, hits harder

By Robert Smith

CLEVELAND —

For most of their lives, baby boomers knew an America ascendant, a nation that incited their occasional fury but rarely let them down.

Fueled by new ideals and rock 'n' roll, they developed a counterculture, protested the Vietnam War and marched for civil rights.

Through it all, the boomers radiated optimism, and why not? After swelling the college ranks, they moved up with each new degree and contact, becoming the yuppies who laid the foundation of the business world.

Then came the Great Recession, a calamity emerging as another defining moment for a fabled generation.

The worst economic crisis since the Great Depression hurt young and old, but it saved its harshest slights for the children of the baby boom, the demographic bulge of Americans born from 1946 to 1964.

Seemingly overnight, members of a generation once called forever-young have been made to feel over-paid, over-experienced and over-aged. Baby boomers suffered layoffs and setbacks at record rates in recent years. Many will never fully recover, having lost too much too late in life.

That collective sigh gathering in Ohio and other graying states comes from a vaunted generation suddenly fearful and bewildered.

Unemployment spiked for all age groups

in the recession and it remains highest for young workers. But displaced baby boomers face their own special purgatory. Once unemployed, older workers are out of work longer. And the older they are, the harder it is to get back to hard-earned careers.

Many a Woodstock alumnus has slipped into the era's most dreaded classification: long-term unemployed.

A recent national survey found that job seekers 55 and older had been out of work a numbing 56 weeks, which is 20 weeks longer than the average furlough for younger job seekers. More than half of older job-seekers were considered long-term unemployed, having been out of work six months or more.

Throw in plummeting home values, diminished 401k plans and threats to Medicare and Social Security, and it's no wonder many baby boomers now look warily toward retirement and question what happened to their world.

"We find ourselves at the vortex of a perfect storm," said Frederick Lynch, a sociologist who forecasts a contentious future for boomers in his book, *One Nation under AARP: The Fight Over Medicare, Social Security and America's Future*.

Anticipating steady labor and a comfortable retirement, Lynch said, his generation met globalization, outsourcing, game-changing technology and a preference for younger workers.

As they face layoffs and rejection, some older workers blame age discrimination. Others cite simple economics. Experienced

workers tend to earn higher salaries, and stress the company health care plan, making them fatter targets for downsizing employers.

Older workers are also, according to the stereotype, slower to embrace new technology and new ways of doing things. That can make landing a job far tougher for an unemployed 50 year old, especially with younger generations swelling the crowd.



Dallas Davis, an unemployed sheet metal worker in Cincinnati, took computer classes while looking for work and touted his new skills at job interviews.

"But the job market is so different now," said Davis, 53. "Instead of being one of five people, you're one of 100, or one of thousands going for the job."

For many of the nation's 78 million boomers, retirement planning has been replaced by crisis planning. Those without jobs are scrambling to find one. Those with

jobs are hanging on tight.

"I think we're going through this huge fundamental change," said Lynch. "We thought we would have our parents' lives. Then came this earthquake that many people still don't see."

The boomers will not suffer alone. There are too many of them. As baby boomers struggle, so will their communities. As they put off retirement, younger workers will find fewer job openings, forcing youthful talent to move away.

Some demographers warn of a "silver tsunami" as an increasingly older population draws on scarce public resources.

The individual challenges will be harder to overcome. Losing a job, like losing a loved one, is one of life's tragedies. It's a tragedy easier to recover from when you're 20 or 30 something.

Mark Miller had spent almost his entire career in retail management when, at age 55, a district manager called him into the office on Jan. 11, 2011.

"He said, 'We have to let you go,'" recalled Miller, who managed a CVS store and pharmacy in Mayfield Heights. He had heard rumblings of a corporate restructuring growing larger, but he was busy running a drugstore with diminished staff.

"I said, 'Today?'"

"He said, 'Today.'"

No severance package. No bon voyage.

HARDER page 12

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Historic towns a short distance from nation's capital

By Victor Block

In 1733, a Quaker named Amos Janney settled in an isolated corner of Virginia and built grist and saw mills beside a narrow creek. About a decade later, a group of German immigrants established a community in Maryland that became a resting place for pioneers driving wagon trains to the West.

In 1761, English colonist Robert Harper launched a ferry service across the Potomac River and the settlement that evolved there still carries his name.

These historic towns within a short drive of Washington, D.C. relate chapters of American history as interesting as those explored in the Nation's Capital.

Waterford, the hamlet that grew around Janney's Mill, is a bucolic hamlet of about 300 residents. The community has changed little in size and shape since its founding.

Visitors encounter traces of life as it used to be. Miniscule smokehouses and icehouses still stand in some backyards. A small stone structure that was built in the early 18th century serves as the kitchen of a 19th-century brick home. The Bank House and Doctor's House are among homes whose names indicate their past function.

At the Waterford Market, antiquated soft drink machines dispense beverages for 50 cents. Linda



Waterford Market



Replica of Barbara Fritchie House

Landreth, the jovial proprietor, is often on hand spinning wool provided by sheep she raises. She knits socks, ear warmers and other items that are for sale.

The sign identifying the little post office, which has been in operation since 1897, lacks a zip code because it was installed before they

came into use.

Many Americans inaccurately believe that the Boston Tea Party was the first act of rebellion against Great Britain, which led to the Revolution. But, eight years before that event, in December 1773, colonists in Frederick, Maryland, repudiated the Stamp Act, which imposed a tax on legal transactions and printed material. Frederick County Court judges declared the law to be null and void, and angry residents reportedly hung the tax collector in effigy.

That often-overlooked fact is one of many that comes to life during a visit to Frederick. Originally laid out in 1745, the community was settled by German and Pennsylvania Dutch immigrants. During the American Revolution, the British stationed a Hessian

regiment in town, and two stone barracks still stand as reminders of their presence.

During the Civil War, both Union and Confederate troops marched through. As battles raged in the area, the many churches in downtown Frederick became temporary hospitals. That tale is recounted at the National Museum of Civil War Medicine.

One of the best-known anecdotes relating to the Civil War probably is fictional. Many people are familiar with the poem by John Greenleaf Whittier which lauds the bravery of Barbara Fritchie — a frail 95-year-old Unionist — as Confederate troops marched through the town in 1862. Most historians doubt that, as Whittier wrote, she waved the Stars and Stripes from an upstairs window and uttered the memorable challenge to "Shoot if you must this old gray head, but spare your country's flag." Nevertheless, a replica of the house where this incident did, or did not, occur continues to be a favorite site among visitors.

Whittier's poem notes that the "clustered spires of Frederick stand greenwalled in the hills of Maryland," and the church steeples still watch over the town.

Many of the 2,500-plus other historic properties have been restored, and visitors encounter a streetscape little changed from its early days.

While most associate Harper's Ferry with the quixotic story of the abolitionist John Brown, the West Virginia town also played a starring role in other chapters of the nation's history. The town was the site of several Civil War skirmishes, is a treasure-trove of stories relating to African-American history, and is associated with important advances in American manufacturing.

While the town provided refuge for runaway slaves, it is the story of John Brown that most people know. In October 1859, he led a raid on the Harper's Ferry arsenal, hoping to use captured weapons to launch a slave uprising throughout the South. Most of the raiders were killed or wounded, and Brown was convicted of treason and hung. But while his plan failed, it helped to focus attention on the issue of slavery and became a catalyst for the Civil War.



Waterford Post Office

In terms of manufacturing, John Hall devised a way to manufacture rifles with interchangeable parts, using machinery to replace workers using hand-held tools. That invention helped to transform the United States from an economy of workshop craftsmen to one of industrialized mass production.

For information about Waterford log onto www.waterfordfoundation.org or call 540-882-3018. Frederick information is available at www.fredericktourism.org or 800-999-3613. For Harper's Ferry, log onto www.nps.gov/hafe or call 304-535-6298.



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Go for charitable 'adoption' as holiday gift

By Leanne Italie

NEW YORK —

Buy a sheep, "adopt" a soldier or name a piece of rainforest. There are lots of ways to honor loved ones for the holidays with gifts through charitable-minded naming and adoption programs.

Heifer International's catalog at heifer.org offers shoppers a unique way to make giving more meaningful by buying cows, goats, sheep, llamas, water buffalos, bees, trees and more to benefit people in need around the world. A card of explanation goes to the giftee.

The National Wildlife Federation has an adopt-an-animal program. The adoptions are symbolic and represent a general donation to the cause but do include certificates and small tokens of appreciation, such as a stuffed animal, depending on the amount spent. An array of endangered species are covered, from sea turtles to baby pandas. Order online at nwf.org.

Or try one of these lesser-known programs:

- **Deforestation.** Cuipo, a preservation organization based in Newport Beach, Calif., has purchased swaths of Panama rainforest and allows supporters through its One Meter at a Time Foundation to help foot the bill. Pay \$5 to \$100 at Cuipo.org for various amounts of land or purchase gifts that come with codes on their tags where a meter of rainforest can be named through the website. New partner Sigg, the water bottle people, are offering Cuipo-branded bottles with the codes on tags for naming. The bottles are available for

purchase at Whole Foods markets around the country.

- **New Orleans.** The Audubon Nature Institute in New Orleans went through tough times after Hurricane Katrina. For \$15 to \$500, animal adoptions that benefit the institute's various attractions, including a zoo, aquarium and insectarium, are available at auduboninstitute.org. Donations help feed and care for more than 15,000 invertebrates, fish, amphibians, reptiles, birds, mammals and insects. Special gift packages include a personalized certificate, photo and fun facts. More unusual adoptions include an Amazon milk frog and a giant anteater.



- **Classrooms.** At adoptaclassroom.org, make a generation donation to benefit schools damaged by superstorm Sandy. The site promises 100 percent of donations will go directly to teachers for their students. A donor selects a classroom from hundreds registered by teachers to contribute by region of the country, school name, teacher name and other search criteria. If a donor has no preference, Adopt-A-Classroom partners the donor with an underserved classroom in their community.

- **Soldiers.** Lots of organizations arrange for holiday care packages shipped to active duty servicepeople. At the nonprofit adoptaus-soldier.org, the experience goes deeper. The site "assigns" a U.S. soldier serving in one of more than 128 countries to send care packages and write letters to. Soldiers sign up to participate. Details of the soldier you're matched with arrive via email and are easy to gift to a charitable-minded person on your list.

- **Whales.** While some animal adoptions are symbolic, without a specific animal to bring the experience to life for children, the Pacific Whale Foundation in Maui, Hawaii, offers the personal story of a specific dolphin or whale. And kids gifted a turtle get to name one. It means a lot to young recipients who

might not be so jazzed by a more general donation made in lieu of a holiday gift in his or her name. Adoption packages range from \$25 to \$75 and offer downloadable adoption certificates and plush animal toys in the higher range. Go to pacificwhale.org. — AP

Liberal think tank unveils Medicare cut options

Hoping to head off wider health care cuts in upcoming budget talks, a think tank close to the White House is unveiling a plan for how to save \$385 billion, mostly from Medicare.

The liberal-leaning Center for American Progress targets Medicare service providers, from the pharmaceutical industry to hospitals and nursing homes. And higher-income Medicare recipients would face increased monthly premiums for outpatient and prescription coverage.

The plan calls on Obama to draw the line against broader cuts and premium increases in budget talks with Republicans.

The center's plan rejects raising the Medicare eligibility age to 67. Instead it focuses on squeezing Medicare service providers, a strategy the plan's authors say will make the entire health care system more efficient without risking quality.

Drugmakers would take the biggest hit, accounting for \$160 billion, or about 40 percent of the proposed 10-year savings. Nearly all of that would come from requiring pharmaceutical companies to pay rebates on drugs provided to low-income Medicare beneficiaries.

Hospitals account for an additional \$61

billion in cuts, or 16 percent of the total. Medical device manufacturers and insurance companies would be on the hook for about \$20 billion apiece. Nursing homes are targeted for \$16 billion in reductions.

It would revamp deductibles and cost-sharing in traditional Medicare so that most seniors pay at least their first \$500 in medical costs in any given year, with exceptions for prevention and care for chronic disease. At the same time, it would protect beneficiaries with catastrophic costs by limiting total cost-sharing.

Although this proposal would not save the government any money, some seniors would pay more and others less. Those with Medigap insurance that cover their medical costs from the first dollar would have to pay out of pocket, although they'd recoup some of that through lower premiums. All Medicare beneficiaries would benefit from better protection against catastrophic costs. Overall, the idea behind the proposal is to discourage people from going to the doctor when they don't have to. Well-to-do seniors would pay higher premiums for outpatient and prescription coverage, as well as boosting those premiums by 15 percent. — AP

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► Harder

Cont. from page 9

Miller was one of hundreds unceremoniously trimmed from the payroll.

At first, he sought to get back into his profession, hoping to manage another store. He figured he and his wife could get by on unemployment insurance and her salary as a legal secretary.

"I like working with people, hiring and training, building a team," Miller said.

But after 14 months without work, he's learned some hard truths. He's now willing to accept part-time jobs, even entry-level positions.

"What I found out is, there's lot of people looking for work," he said gravely.

At a certain age, temporary setbacks have greater consequences. For people on the threshold of retirement, there's little time left to replenish a bank account or re-launch a career. Yet, that is what many baby boomers must do, experts say.

A generation once credited with changing the rules and changing the world may have to do it again.

"I call these transformative years for baby boomers," said Kathryn McGrew, a gerontologist and research fellow at the Scripps Gerontology Center at Miami University in Oxford, Ohio.

"They are in times they did not anticipate and they have to transform the way they think about the future. It can be really exciting, but it can be daunting and scary as well."

Shortly after 10 a.m. on a recent Monday, 19 men and women ringed a table in a conference room at the Shaker Heights Library.

The oldest was a 60 something unemployed marketing executive. The youngest, 13 weeks, wriggled in the arms of his dad, an out-of-work librarian.

They were ready for Monday Morning Jump Start, the weekly kick-off meeting of the Career Transition Center, where unemployed boomers come to kvetch, strategize and re-energize.

Bonnie Dick, a veteran career counselor, helped launch the center, aiming to get despondent older job-seekers out of Panera and in front of people who can help them.

"So many baby boomers were falling through the cracks," said Dick, 74. "The middle management people were often the first ones to be downsized, and they had nowhere to go."

She starts the meeting by insisting everyone deliver their 30-second commercial, a quick pitch describing who they are, what they do, and why someone should hire them. Dick encourages her clients to polish the act at home in front of a mirror.

This day, 48-year-old Paul Holter, who was downsized out of a management position at Case Western Reserve University, adds a boomer's touch to the routine.

"Read it to your teenager," he suggested. "If I can get to 30 seconds without an eye roll, I know I'm doing pretty good."

The room erupts in laughter, which rains like balm upon weary souls.

Anger and frustration are common emotions at the job club. So is exasperation. Few were prepared for job hunting in a digital age, where employers prefer electronic communication. Resumes disappear into cyberspace. Rare is the job seeker who hears

a human voice.

When a club member does score an interview, it's often with someone younger, less experienced.

"Speak well to yourselves," Dick declares. "Job search can be demeaning. I want you to stop beating up on yourselves."

They depart vowing to network. What will they find in the weeks and months ahead? The outlook is cloudy.

Jobless rates are inching down as employment steadily improves. Even older workers are starting to find work, career counselors say. But it's often in a new field and for decidedly lower status and pay.

Two years ago, Michael Tew was earning \$85,000 a year as a production planner for Goodyear in Akron. At 61 years old, he was escorted out the door and into his first taste of unemployment.

Today, he earns \$8 an hour as a driver for a Buick dealership. It was all he could find. The gregarious man has accepted that this might be how his career ends.

"Not everybody has a happy ending," Tew said. "This is kind of as happy as mine is getting — and I'm okay with that."

According to a Rutgers University survey of the unemployed, more than half of the Great Recession victims who have found jobs are making less money. Nearly one-third are making more than 30 percent less.

Meanwhile, people are working longer into their golden years and that's not likely to change, said Sara Rix, a senior strategic adviser for the AARP's Public Policy Institute.

Today, 32 percent of people aged 65 to 69 are still in the workforce, compared to 18 percent in 1985.

Many continue working because they enjoy it, certainly, but many soldier on because they must. They lack the financial resources to maintain their lifestyle, Rix said.

In a nationwide survey of older workers, her institute found that more than half doubted they would enjoy financial security in retirement and nearly a quarter had exhausted their savings during the recession.

Changing the rules, changing themselves. Faced with such powerful trends, some see a need for boomers to re-assess and re-imagine. Words like "re-careering" have entered the lexicon.

Some displaced boomers need any job they can find. But older workers are also more likely to enjoy some slack, enough resources to try something bold and new. Maybe the kids are grown. Maybe a working spouse has health insurance.

As a generation, boomers still enjoy advantages. They remain wealthier, healthier and better-educated than those that came before them. They wield the political and marketing clout that comes with numbers. And they stand on a potent legacy.

Theirs is a generation that questioned the status quo and reshaped society. Some see a sleeping giant ready to roar again.

"We do have a heritage of protest," said Lynch, the author, "and nothing unites a group like an external threat."

He thinks a civil rights movement for older Americans may be just around the bend.

Others think it equally likely that boomers will seek personal renewal. Instead of changing the world, they will change themselves. — AP

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Quitting driving: Families key but docs have role

By Lauran Neergaard

WASHINGTON —

Families may have to watch for dings in the car and plead with an older driver to give up the keys — but there's new evidence that doctors could have more of an influence on one of the most wrenching decisions facing a rapidly aging population.

A large study from Canada found that when doctors warn patients, and tell driving authorities, that the older folks may be medically unfit to be on the road, there's a drop in serious crash injuries among those drivers.

The study, published in the *New England Journal of Medicine*, couldn't tell if the improvement was because those patients drove less, or drove more carefully once the doctors pointed out the risk.

But as the number of older drivers surges, it raises the question of how families and doctors could be working together to determine if and when age-related health problems — from arthritis to frailty to Alzheimer's disease — are bad enough to impair driving.

Often, families are making that tough choice between safety and independence on their own.

"It's very scary," said Pat Sneller of Flower Mound, Texas, who talked her husband, Lee, into quitting about a year after he was diagnosed with early-stage Alzheimer's disease.

The couple had recently moved from California, one of the few U.S. states that require doctors to report drivers with worrisome health conditions to licensing authorities. Pat Sneller was stunned to learn Texas doesn't require that doctor involvement, and health workers advised her to ride with her husband and judge his abilities for herself.

Eventually her husband called home in a panic, lost while driving in unfamiliar Dallas for volunteer work. A long scrape on the car that he couldn't explain was the final straw. In 2010, she persuaded him to quit driving, although the now-72-year-old's license remains good until 2014.

"He still says occasionally, 'I can still drive, you know,'" Pat Sneller said.

By one U.S. estimate, about 600,000 older drivers a year quit because of health conditions. The problem: There are no clear-cut guidelines to tell who really needs to — and given the lack of transportation options in much of the country, quitting too soon can be detrimental for someone who might have functioned well for several more years.

It's never an easy discussion.

"It did not go over so well," Benjamin Benson recalls of the time when his sons told the 87-year-old they feared his reflexes had slowed too much for safe driving.

"I've never had an accident," the Peabody, Mass., man said. His family's response: "Well, do you want to wait for the first one?"

The retired accountant wasn't ready to quit then, but he quietly began to analyze what would happen to him and his wife, who doesn't drive, if he did.

His longtime doctor wouldn't advise one way or the other. So over a few months, the couple tried online grocery shopping. They took a taxi to the dentist, not cheap at \$38 round-trip. But Benson calculated that maintaining and insuring the car was expensive, too, when he drove only 3,000 miles a year.

Then Benson surprised his family by giving away the car, and he said he's faring fine so far.

"Most people in our age group know that it's inevitable and play around with the idea that it's going to come and the only question is when," Benson said. "I didn't want to be pushed into it."

Unlike in most of the U.S., doctors in much of Canada are supposed to report to licensing authorities patients with certain health conditions that may impair driving. Ontario in 2006 began paying doctors a small fee to further encourage that step — and researchers used the payments to track 100,075 patients who received those warnings between April of that year and December 2009 (out of the province's more than 9 million licensed drivers).

They compared the group's overall rate of crashes severe enough to send the driver to the emergency room, before the warnings began and afterward, and found a 45 percent drop, reported lead researcher Dr. Donald Redelmeier, a University of Toronto professor. While the study included adult drivers of all ages — for conditions ranging from epilepsy to sleep disorders, alcoholism to dementia — most were over age 60. A small percentage of the province's licensed drivers have received warnings, Redelmeier said; and authorities between 10 percent and 30 percent of the time suspend licenses.

His study highlighted one reason physicians don't like to get involved: About 1 in 5 of the patients who were warned changed doctors. There also was an uptick in reports of depression.

Doctors aren't trained to evaluate driving ability, and the study couldn't tell if some drivers were targeted needlessly, noted Dr. Matthew Rizzo of the University of Iowa. Yet he called the research valuable.

"The message from this paper is that doctors have some wisdom in knowing when to restrict drivers," said Rizzo. His own research shows some cognitive tests might help them better identify who's at risk, such as by measuring "useful field of view," essentially how much your brain gleams at a glance — important for safety in intersections.

Today, the American Medical Association recommends that doctors administer a few simple tests in advising older drivers. Among them:

- Walk 10 feet down the hallway, turn around and come back. Taking longer than 9 seconds is linked to driving problems.

- On a page with the letters A to L and the numbers 1 to 13 randomly arranged, see how quickly and accurately you draw a line from 1 to A, then to 2, then to B and so on. This so-called trail-making test measures memory, spatial processing and other brain skills, and doing poorly has been



linked to at-fault crashes.

- Check if people can turn their necks far enough to change lanes, and have the strength to slam on brakes.

Dr. Gary Kennedy, geriatric psychiatry chief at New York's Montefiore Medical Center, often adds another question: Are his patients allowed to drive their grandchildren?

"If the answer to that is no, that's telling me the people who know the patient best have made a decision that they're not safe," said Kennedy, who offers "to be the bad cop" for families or primary care physicians having trouble delivering the news.

There are no statistics on how often doctors do these kinds of assessment.

"It's this touchy subject that nobody wants to talk about," said Dr. Marian Betz of the University of Colorado, whose surveys show most senior drivers don't think their doctors know whether they drive. She is testing if an advance directive would help get older adults talking with their doctors about how to keep watch on their driving fitness before trouble arises.

More objective measures are needed — and to help find them, hundreds of older drivers are letting scientists install video cameras, GPS systems and other gadgets in their cars as part of massive studies of everyday driving behavior.

Identifying who needs to quit should be a last resort, said Jon Antin of the

Virginia Tech Transportation Institute. He helps oversee data collection for a study that's enrolling 3,000 participants, including hundreds of seniors, in Florida, Indiana, New York, North Carolina, Pennsylvania and Washington. The drivers undergo a battery of medical checks before their driving patterns are recorded for 12 to 24 months.

"If you identify people at risk, maybe you can intervene to prolong the safe driving period," said Dr. Shawn Marshall of the Ottawa Hospital Research Institute. He helps lead Canada's CanDrive II, a project that's tracking 928 drivers in their 70s for five years, to see how their driving changes as they get older.

For now, advocacy groups like the Alzheimer's Association and AARP offer programs to help families spot signs of driving problems and determine how to talk about it.

"I would like to think that my husband would say, 'You really shouldn't be driving anymore' and I wouldn't get mad at him," said Sally Harris, 75, of Crystal Lake, Ill., who took AARP's "We Need to Talk" program in hopes of broaching the subject with a 90-year-old friend who's having driving problems.

Others turn to driver rehabilitation specialists, occupational therapists who can spend up to four hours evaluating an older driver's vision, memory, cognition and other abilities before giving him or her a behind-the-wheel driving test. Some doctors and state licensing authorities order those evaluations, but programs can be hard to find, often have waiting lists and cost several hundred dollars that insurance may not cover.

Having a professional involved can keep family relationships intact, said Pam Bartle, a driver rehab specialist at Marianjoy Rehabilitation Hospital in Wheaton, Ill.

Still, "you could have the sweetest, nicest little old lady and she'll turn on you on a dime if you tell her she can't drive," Bartle said. "It's a desperate thing for people. They can't imagine how they'll manage without driving." — AP



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Baby boomers turn to college to boost job skills

By Encarnacion Pylecolumbus

OHIO — Steve Newman never expected to be going back to college in his 50s to train for a new job.

But the 51-year-old also never expected to get laid off three years ago after 25 years as a civil engineer.

"Fortunately, my wife and I had been making provisions for an undefined emergency since the middle of the previous summer, so we were not without resources," Newman said.

With high unemployment, low home values and downsized retirement accounts, hundreds of thousands of baby boomers are turning to college to boost their job skills. The number of students ages 50 to 64 increased 17 percent nationwide between fall 2007 and fall 2009, according to the latest data available from the National Center for Education Statistics.

The growth has been even more dramatic at Columbus State Community College. The number of students age 50 and older increased more than 81 percent, to 1,506 students, between fall 2007 and fall last year. That age group is the fastest growing population at the school.

"It used to be that many older adults came to college to help pass the time during their retirement and to enrich their

lives," said Chandra Bell, a counselor and career-assistance coordinator at Columbus State. But people are now coming back "because they have lost their jobs, need new skills to keep their jobs or are planning a new career because they can't afford to retire as planned," Bell said.

With 78 million baby boomers entering their retirement years, the country needs more of these experienced workers to stay in the workforce longer, even in part-time positions, officials said.

"Keeping older workers engaged in the labor force is vital for the continued economic growth of our region," said Bill LaFayette, a Columbus economist and owner of the consulting firm Regionomics.

The labor force growth rate has already been declining and is projected to slow to a crawl between 2020 and 2025 because of the exodus of baby boomers, he said.

With people living longer, healthier lives, there is also a new demand for programs designed to train the over-50 population, said Celia Crossley, a career strategist and managing partner of Crosworks.

Last year, about 36 percent of workers said they expected to keep working past age 65, compared with 20 percent in 2001, according to the Employee Benefit Research Institute (EBRI).



"It's a different world today where 50 to 70 is considered the new 'middle age,'" Crossley said.

Martha Harrison, 52, of Powell started playing with the idea of going back to college in 2005 after more than 20 years as a preschool teacher. She was motivated by two primary factors: money and a desire to get a counseling degree to help children deal with their increasingly complicated home lives.

"Preschool teachers barely make above minimum wage, which makes no sense when you think about taking care of someone's most-valuable asset," Harrison said.

She tried a few online psychology classes with a for-profit college in 2005 but didn't really get started on her education until she enrolled at Columbus State's Delaware campus in fall 2010. Harrison has enjoyed

school so much she wants to transfer to Ohio State to work on a bachelor's degree and eventually earn a master's so she can become a school counselor. She isn't daunted by her age.

"The way I look at it, people my age, we have maybe 25 or more years left of working in us, especially in something that we enjoy," she said.

When Newman lost his job, he and his wife, Deb, who is a stay-at-home mom, had saved about half of what they thought they might need to sustain themselves for about six months with no other income.

"We were glad to have made such decisions, despite not having had time to complete our preparation," he said.

Through friends, Newman immediately landed a job as a marketing director for a men's legwear company in Granville. He took a job 11 months later as a traffic engineer for the Ohio Department of Transportation.

But neither worked out long term. So the father of four signed up for a free three-week program at Columbus State that was created to train dislocated workers in logistics — the movement and storage of goods from the beginning to the end of a supply chain.

After the training, Newman got a job as

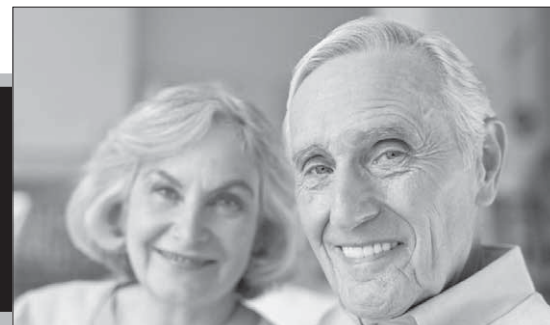
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Republicans ask 'where do we go from here?'

By Charles Babington

WASHINGTON —

Having lost the popular vote in five of the last six presidential elections, Republicans have plunged into an intense period of self-examination, blame-setting and testy debate over whether their party needs serious change or just some minor tweaks.

The fallout will help determine whether the Republican Party might return to heights approximating the Ronald Reagan years or, as some fear, suffer even deeper losses as the nation's Democratic-leaning Hispanics increase in number.

"The party is clearly in some sort of identity crisis," said Rick Tyler, a past aide to former House Speaker Newt Gingrich.

Hard-core conservatives, furious at President Barack Obama's re-election in the face of a weak economy, called for a wholesale shift to resolutely right positions on social and fiscal matters. Some demanded that party leaders resign.

Establishment Republicans largely shrugged off the tirades. But they split into two main camps themselves, portending potentially lengthy soul-searching, especially in Congress.

One group calls for calm and a steady course. It emphasizes that the party still controls the House, and notes that Obama's popular-vote margin was smaller than in 2008.

Some other Republicans, however, see bigger problems. The party must shed its "absolutism on issues like tax increases," which congressional lawmakers oppose at virtually every level, said John Ulyot, a former Republican Senate aide.

That's essentially what Democrats did in the 1990s. Demoralized after big losses by presidential nominees Walter Mondale and Michael Dukakis — and still mindful of George McGovern's 1972 disaster — Democrats turned to a centrist Arkansas governor, Bill Clinton. He won two elections, repositioned the party and served as Obama's top surrogate this fall.

Some activists in both parties say Republicans eventually must follow suit to survive. But staunch opponents of tax hikes, abortion, immigration reform and government regulations dominate their primaries. Until and unless that changes, a shift toward the center may be impossible.

"It's harder for the Republicans, because they are more ideological than Democrats," said Democratic strategist Doug Hattaway. "The religious fervor of the Republican base makes it hard to change or compromise, even though

that's what's needed to remain viable as a party."

While Republican strategists said the Republican Party is aligned with most Americans on big issues, Election Day exit polls raise doubts in some areas. Six in 10 voters said abortion should be legal in all or most cases, the highest share saying so since the mid-1990s. Two-thirds of voters said illegal immigrants working in the United States should be offered a chance to apply for legal status.

Nearly half of all voters supported Obama's plan to raise taxes on couples' incomes above \$250,000. Thirteen percent said taxes should be increased on all Americans, and 35 percent said no one should pay higher taxes.

Speaker of the House John Boehner, and Senate Republican Leader Mitch McConnell will stand at the center of the intra-party debate. McConnell issued a defiant statement the day after the election. "The voters have not endorsed the failures or excesses of the president's first term," he said. "They have simply given him more time to finish the job they asked him to do together with a Congress that restored balance to Washington."

Boehner was more conciliatory in tone when he addressed reporters the same day. But he recommended Romney's tax package — including rate cuts for everyone and the elimination of yet-to-be-named deductions — which he said would create a net increase in government revenue.

Obama has insisted that the wealthiest Americans pay higher tax rates, as they did under Clinton. Many Democrats in Congress agree.

Republican insiders, meanwhile, nervously focused on an approaching problem that could produce even bigger presidential losses in future years. The Republican Party relies overwhelmingly on white voters, a steadily shrinking share of the population. Hispanics, the nation's fastest-growing group, have bristled at Republican attacks on illegal immigration, which some people consider a slap at all Latinos, legal or not.

Republican campaign pros said the party must find a way to temper the talk about immigration without infuriating conservatives who oppose "amnesty" for those who entered the country illegally.

Ulyot said congressional Republicans should embrace more lenient immigration policies immediately.

On still another front, many Republicans said their party must find ways to appeal to women, who voted heavily for Obama. — AP

➤ College

Cont. from page 14

an inventory specialist at ODW Logistics Inc. in Columbus. He then enrolled in a three-quarter-long online certificate program at Columbus State, which helped him move to a more-advanced job at the pharmaceutical company of Boehringer Ingelheim Roxane Inc.

Even though Newman had earned a bachelor's degree from Ohio State in 1984, going back to college was challenging, he said.

"In the past 13 days, I've had to read

seven chapters, take nine quizzes, solve four sets of problems, take one midterm and two finals — and that doesn't even count working 40 hours and spending time with my family."

Newman is just thankful for a second chance, even though he's making \$60,000 a year less than his peak salary as a civil engineer. He's also looking forward to working his way up in what he hopes turns out to be a long, successful second career.

"Getting laid off was quite a blow," he said. "But finding something else to go after and making strides to move ahead has me feeling good again." — AP

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Common-sense steps can cut home energy bills

By Diana Marszalek

With a nearly 90-year-old house in Rye, N.Y., Melanie Cadenhead spends a large part of every winter being cold.

The temperature inside usually drops right around Thanksgiving, and Cadenhead pulls out her sweaters. Having shelled out about \$1,000 a month last winter trying to warm up the place, she does not plan to crank the heat any higher this year.

Modern living does not have to be that hard, energy efficiency experts say.

They cite a host of simple ways to cut energy consumption without sacrificing comfort or lifestyle. From sealing air leaks to unplugging cell-phone chargers, these recommended improvements don't require big-ticket purchases like windows or air or heating systems (although those may be necessary in some cases).

Many energy-saving moves are so inexpensive, relatively speaking, that they quickly pay for themselves.

Sealing air leaks — primarily gaps in construction — and upgrading insulation are the No. 1 ways to nip energy waste, said Scott Stefan, a home energy auditor for Elmsford, N.Y.-based BrightHome Energy Solutions.

"American homes are built for cheap energy and we are not in the cheap energy era anymore," he said. "Almost every home

you go into is badly insulated and leaks a lot of air."

Air leaks, often found around foundations, pipes, recessed lights and chimneys, can be easily identified and sealed; many states have programs that contract with people like Stefan to help you find the source of the problems.

But even sealing your house nice and tight (while still leaving enough airflow for proper ventilation) won't really do the job if your insulation has stopped doing its job, Stefan said. Warm air can escape right through insulation that's been in place for 25 years or more.

"We all recognize that we have to replace our cars and computers, and people love to do that," he said. "But most people have really old insulation — and it's really beaten down and it's not doing them any good."

The cost of sealing leaks or updating insulation varies greatly depending on where you live and the complexity of the job. But "the energy you save from doing this work will more than cover the cost of the work

itself," Stefan said.

Such steps tend to be considerably cheaper than, for instance, replacing leaky windows, another energy-saving step. That could run into the tens of thousands of dollars — although it often could be avoided simply by hanging storm windows in the winter, experts say.

Many state-run energy savings programs offer homeowners low-interest loans to help upgrade energy efficiency, Stefan said.

Another way to cut energy consumption is to

unplug all those "energy vampires" that suck up electricity even when they're not being used, said Ken Collier, editor-in-chief of The Family Handyman.

A typical American home has 40 devices, including TVs, cell-phone chargers and computers that continually draw power even when they seem to be turned off, according to the Environmental Protection Agency. U.S. households spend approximately \$100 per year — roughly 8 percent of household electricity costs — to power such devices

while not in use.

The easiest way to eliminate those costs is to plug your devices into power strips and turn those power strips off when you wrap things up for the day, he said. Another good option is a product called Smart Strip, which looks like a regular power strip but automatically turns off equipment that it senses is not being used.

Using a programmable thermostat and switching to energy-efficient appliances and light bulbs also can yield substantial savings, according to the U.S. Department of Energy.

Today's appliances are 40 percent more efficient than those just 14 years old, Stefan said. That's especially important with big energy suckers like refrigerators, which typically use more energy than anything else in the house.

As for light bulbs, Stefan said, only 6 percent of the electricity drawn by traditional bulbs is turned into light. The rest becomes heat.

Today's light bulbs can provide energy savings of up to 75 percent and last 10 to 25 times longer than traditional bulbs, according to the Energy Department.

"This is not political or ideological," Stefan said. "It's plain old common sense." — AP

Online: U.S. Department of Energy, www.energy.gov/public-services/homes; www.familyhandyman.com; www.energystar.gov.

Analysis: Both sides see mandate, hard road ahead

By Charles Babington

WASHINGTON —

President Barack Obama's re-election, coupled with Republicans' continued hold on the House, gives both parties a chance to rethink, and perhaps undo, the bitter partisanship that has gripped Washington for four years and frustrated Americans who see big problems going unsolved.

It won't be easy. Both sides claim, with some justification, a mandate from the voters.

"We'll have as much of a mandate as he will," House Speaker John Boehner, R-Ohio, said shortly before the election,

correctly anticipating the results.

Senate Republican leader Mitch McConnell, R-KY, was frostier in his post-election remarks. "The voters have not endorsed the failures or excesses of the president's first term," McConnell said.

It won't be easy. Both sides claim, with some justification, a mandate from the voters.

"Now it's time for the president to propose solutions that actually have a chance of passing the Republican-controlled House," he said, "and deliver in a way that he did not in his first four years in office."

After three straight swing elections, Americans decided to keep Obama in the White House, leave Republicans in control of the House and let Democrats stay atop the Senate, with Republicans still able to block measures with filibusters.

There's an irony, or self-flagellation, there. Americans express exasperation at the partisan sniping and gridlock that pushed the nation to the brink of defaulting on its loans last year, and which might trigger new crises soon. The narrowness of Obama's win in the popular vote accurately reflects the nation's nearly 50-50 partisan divide. It's a split that will make progress on any major issues difficult for at least another two years, and

probably longer.

Every newly elected president claims a mandate, and Obama can point to the roughly \$1 billion that Mitt Romney and his GOP allies spent trying to oust him. Yet, for all its tactical brilliance, Obama's campaign was built on relatively modest ideas. It focused on helping the middle class, which is a coalition of identity, not ideology.

It may have been a status quo election. But if the White House and congressional Republicans simply stand their ground on taxes and other issues, they run risks — not just for the nation's well-being, but

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Feeling Healthy

Multivitamins may lower cancer risk in healthy men

By Marilyn Marchione

America's favorite dietary supplements, multivitamins, modestly lowered the risk for cancer in healthy male doctors who took them for more than a decade, the first large study to test these pills has found.

The result is a surprise because many studies of individual vitamins have found they don't help prevent chronic diseases and some even seemed to raise the risk of cancer.



In the new study, multivitamins cut the chance of developing cancer by 8 percent. That is less effective than a good diet, exercise and not smoking, each of which can lower cancer risk by 20 percent to 30 percent, cancer experts said.

Multivitamins also may have different results in women, younger men or people less healthy than those in this study.

"It's a very mild effect and personally I'm not sure it's significant enough to recommend to anyone" although it is promising, said Dr. Ernest Hawk, vice president of cancer prevention at the University of Texas MD Anderson Cancer Center and formerly of the National Cancer Institute.

"At least this doesn't suggest a harm" as some previous studies on single vitamins have, he said.

Hawk reviewed the study for the American Association for Cancer Research.

About one-third of U.S. adults and as many as half of those over 50 take multivitamins. They are marketed as a kind of insurance policy against bad eating. Yet no government agency recommends their routine use "regardless of the quality of a person's diet," said a fact sheet from the federal Office of Dietary Supplements.

Some fads, such as the antioxidant craze over vitamins A and E and beta-carotene, backfired when studies found more health risk with those supplements, not less. Many of those were single vitamins in larger doses than the "100 percent of daily value" amounts that multivitamins typically contain.

Science on vitamins has been skimpy. Most studies have been observational —

they look at groups of people who do and do not use vitamins, a method that can't give firm conclusions.

Dr. J. Michael Gaziano, of Brigham and Women's Hospital and VA Boston, led a stronger test. Nearly 15,000 male doctors who were 50 or older and free of cancer when the study started were given monthly packets of Centrum Silver or fake multivitamins without knowing which type they received.

After about 11 years, there were 2,669 new cancers, and some people had cancer more than once. For every 1,000 men per year in the study, there were 17 cancers among multivitamin users and more than 18 among those taking the placebo pills. That worked out to an 8 percent lower risk of developing cancer in the vitamin group.

Multivitamins made no difference in the risk of developing prostate cancer, which accounted for half of all cases. They lowered the risk of other cancers collectively by about 12 percent. There also was a trend toward fewer cancer deaths among multivitamin users, but the difference was so small it could have occurred by chance alone.

Side effects were fairly similar except for more rashes among vitamin users. The National Institutes of Health paid for most of the study. Pfizer Inc. supplied the pills and other companies supplied the packaging.

The main reason to take a multivitamin is to correct or prevent a deficiency, "but there may be a modest benefit in reducing the risk of cancer in older men," Gaziano said.

Cancer experts said the results need to be confirmed by another study before recommending multivitamins to the public. These participants were healthier — only 4 percent smoked, for example.

For people who do want to take multivitamins, doctors suggest:

- Be aware that they are dietary supplements, which do not get the strict testing required of prescription medicines.

- Ask your doctor before taking any. Vitamin K can interfere with common heart medicines and blood thinners, and vitamins C and E can lower the effectiveness of some types of chemotherapy. For people having surgery, some vitamins affect bleeding and response to anesthesia.

- Current and former smokers should avoid multivitamins with lots of beta-carotene or vitamin A; two studies have tied them to increased risk of lung cancer.

Online — JAMA, www.jama.ama-assn.org; Vitamin facts, www.cancer.gov/cancer-topics/factsheet/prevention/antioxidants; and www.ods.od.nih.gov/factsheets/MVMS-HealthProfessional; Dietary advice, www.dietaryguidelines.gov; Task force advice, www.uspreventiveservicestaskforce.org/uspstf/uspstf-usps-vita.htm; Vitamin E and prostate study, www.jama.ama-assn.org/content/306/14/1549.

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Life-threatening illness: To tell or not to tell?

By Leanne Italie

NEW YORK —

In 1976, as a 24-year-old grad student, Samira Beckwith was diagnosed with the thing people still whispered about: cancer.

She was in and out of the hospital, had five surgeries and endured round after round of chemotherapy and radiation as she battled Hodgkin's lymphoma. Beyond a few professors and close friends, she didn't routinely tell people of her bleak diagnosis as she focused on staying alive.

Years later, as she was about to turn 50, disaster struck again. This time it was breast cancer and a double mastectomy. Her desire for a bit of privacy was the same, but society and sickness had become a share-all whirl.

"Back the first time around, people didn't want to hear or talk about cancer. But the boundaries changed, and the second time it was breast cancer. People really like to talk about breast cancer," said Beckwith, now 59 and clinical director of a health care services company in Fort Myers, Fla.

"But there are still many people who want to keep their illness, keep the decisions that they're making, within a close circle," she said. "They don't want to be out there on Facebook. It's almost like there's something wrong with them because they don't want to share."

Nora Ephron might have agreed. The humorist who chronicled her life

in books and lent romance a laugh in movies kept her leukemia largely locked down to the point that her recent death at age 71 stunned even some close friends. If she had any wisecracks about cancer, she didn't share them with the world.

There's no one right way to handle news of a life-threatening diagnosis, but how difficult is it for people to tell or not tell, and at what cost?

Michael Jaillet, a senior executive at Dell, learned June 20, 2011, that he had amyotrophic lateral sclerosis, or ALS. It was the "ultimate horror," he said. Only his wife and three brothers knew for several months as he sought out a diagnosis, then second and third and fourth opinions.

Among those initially left out of the loop were co-workers and his three children, now 14, 13 and 11.

"It became, in a lot of ways, a bigger burden than the disease," Jaillet said of the secret. "It's guilt, tiptoeing around, talking in code. It's clearing out your email or your Internet browser every night because you know your kids are going to get on and you don't want them to see what you've been researching."

Now "out" and active in raising money for research and supporting others with ALS, the 41-year-old Jaillet sees

dignity in going public and embracing a broader base of emotional support.

"I feel like I've got a torch that I have to carry," he said.

Often with limited energy and a need to maintain normal routines, people faced with life-changing illness may not

know how to go about deciding when, how and how much to disclose.

"Someone's going to know. Word's going to get out and then you're in a position and they're in a position of sort of dancing around the elephant in the room," said psychotherapist Fredda Wasserman, who has spent 40 years helping people navigate that journey.

Anticipating how people will react can be a huge source of anxiety,

said Wasserman, clinical director of Our House, a grief counseling and support center in Los Angeles and co-author of the 2010 book *Saying Goodbye to Someone You Love*.

If sharing the journey is a priority, then be clear about what you need from those you tell, she suggests. An offer of dinner, for instance, doesn't have to mean a night of chitchat with the person who brought it. Do you need jokes to keep you laughing or a shoulder for crying?

"People sometimes want to pray for

you. If they do, you can tell them what you're hoping for," she said. "If I'm looking for a cure, that. Maybe I'm just hoping for a day free of pain. Maybe I'm looking for the strength and courage to face what is ahead for me. Let me tell you what I want."

For others, talking about their illness is the last thing they want to do.

"It makes them feel worse," Wasserman said. "It's, 'I don't want to think of myself as a cancer patient. I don't want to be talking about my aches and pains.' Sometimes people will tell and then really regret it, because they're being treated differently."

Taking control of the conversation is important, she said.

"Say, 'Look, I don't want you to treat me like I'm dying, or I don't want you to treat me like I'm pathetic,'" Wasserman said. "That's one reason why a lot of people don't tell. Their skin cringes to have people talk to them like that."

Jessica Aguirre, the mother of two young boys in Green Acres, Fla., was 29 when diagnosed with breast cancer nearly two years ago. Her bad news came just three days before she received a promotion to manager of the cell phone store where she is now on medical leave, after the cancer spread to her brain.

"I just decided to be completely open with everything and everyone at work," she said. "I just thought, you know what, maybe having this can help somebody else. I think that if you do keep it to yourself it will eat you up inside." — AP



Wasserman

► Analysis

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also for the legacies of a barrier-breaking president and a Republican Party that has tapped a deep vein of conservative, almost libertarian emotion.

In many ways, of course, Obama's place in history is assured. The first black to be elected president has now joined eight other men who, since 1900, won the office more than once. His biggest first-term achievement — the "Obamacare" health delivery overhaul — is safe from repeal by a President Mitt Romney.

Obama's other top goals, however, were largely thwarted by a united Republican Party that fought him at almost every turn. Republicans provided not a single House or Senate vote for the health care law. They beat back his efforts to end the Bush-era tax cuts for the wealthiest households.

Obama offered an olive branch in his victory speech. "In the coming weeks and months, I am looking forward to reaching out and working with leaders of both parties to meet the challenges we can only solve together," he said.

Senate Republican leader McConnell said in 2010 that his top goal was to deny Obama a second term. Well, he lost, even though the nation's high unemployment seemed to make Obama ripe for defeat. Some, perhaps much, of Romney's loss will be traced to Americans' discontent with an opposition party that refused to compromise on big issues even when it's obvious that neither party can get every-

thing it wants.

Boehner, McConnell and other GOP officials now must decide where to bend and where to keep standing firm. They'll have to tip their hand soon. A package of huge tax hikes and spending cuts — known as the "fiscal cliff," and which both parties deeply dislike — is scheduled to take effect in the new year.

So far, Republicans have adamantly refused to raise taxes, even on the richest Americans, as part of a deficit-reduction package. Obama and other Democrats say such tax hikes must be part of the deal. They will point to the election as validation. Boehner will point to his sustained majority.

Democrats think Obama learned some hard lessons in his first four years, including a realization that he must get deeply involved in the sometimes unpleasant business of crafting and negotiating legislation.

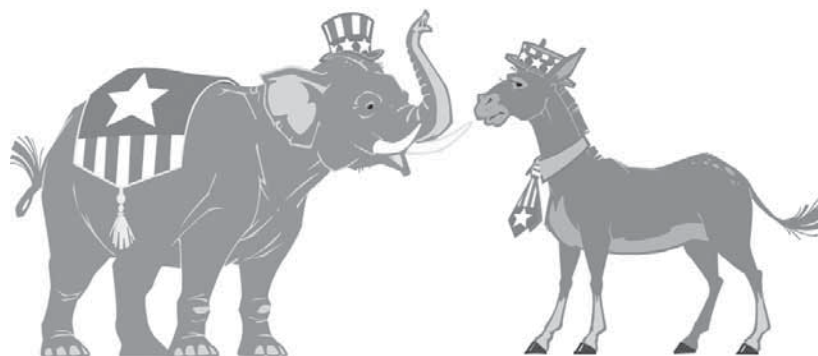
"The American people have made it pretty clear that they are sick of gridlock and fighting," said Jim Manley, a former Democratic Senate aide. Boehner and McConnell, he said, "have figured out that the tea party has done enormous damage to their brand, to say nothing about the economy, and that something has to change."

At the same time, Manley said "the president is going to have to play a more forceful role in the legislative process."

Obama signaled some of his second-

term goals in a recent *Des Moines Register* interview. The fiscal cliff's economic threat is so severe, he said, that a congressional compromise is likely.

"It will probably be messy," the president said. "But I am absolutely confident that we can get what is the equivalent of the grand bargain that essentially I've been offering to the Republicans." It calls for \$2.50 in spending cuts for every \$1 in new revenue.



"The second thing I'm confident we'll get done next year is immigration reform," he said. Perhaps. Or it could prove as difficult as President George W. Bush's bid to partly privatize Social Security right after his re-election.

In recent years, the very idea of bipartisan compromise has come under growing attack, as Americans got fed up with soaring deficits, longstanding threats to Medicare and other problems left unresolved by Congress' old practices. The anger gave birth to the tea party, which boosted candidates who vow not to compromise if they reach Washington.

Passion and ideology drive the tea

party. Congressional leaders, historically, are realists. They keep their committee chairmanships and party leadership posts by constantly monitoring the moods and needs of their rank-and-file colleagues.

Some Washington veterans say Boehner is posturing when he claims that his party won as big a mandate as Obama did. "Boehner and McConnell surely know that they cannot continue to be pure obstructionists and that the economic consequences of going over the fiscal cliff would be extreme," said Matt Bennett of the Democratic-leaning think tank Third Way. But it's not clear they can control their caucuses, he said.

Indeed, the GOP is surely about to engage in some intense self-examination and infighting.

John Feehery, a former top House Republican

aide, said Obama's re-election may give the White House less clout than Democratic insiders think.

"Republicans will feel they have just as big a mandate as the president," Feehery said. It's possible that Boehner and Senate Democratic leader Harry Reid of Nevada "will do the deals and put Obama on mute," he said.

Reid, at least for now, sounds upbeat and bipartisan.

"Democrats and Republicans must come together, and show that we are up to the challenge" of tackling big problems, Reid said after the election was called. "This is no time for excuses." — AP

Retirees head to unconventional destinations

By Clarke Canfield

WHEN Peg Davis was ready to find a retirement community to move to, she looked north — not south — for a place to spend her later years.

Rather than set her sights on Florida, Arizona or some other warm-weather locale, she packed up and moved from Big Flats, N.Y., to the small coastal Maine town of Camden.

Davis, 73, was in search of the slow pace of a small town with natural beauty, cultural opportunities and “a sense of place.” She hasn’t been disappointed since arriving in 2010.

“I wouldn’t go south of Pennsylvania,” said Davis, who vacationed here for years before making the move. “My mind operates like a Mainer. It doesn’t operate like people who escape to Southern comfort.”

The idea of people who uproot and move when they retire conjures up images of warm, sunny Florida or Arizona. But some of the older members of the baby boom generation, the 78 million Americans born between 1946 and 1964, are looking elsewhere, and a number of towns in cooler climates from Maine to Washington have become popular retirement destinations.

Camden is frequently cited in lists of best places for retirees. Others that have merited mention include Asheville, N.C.; Ruidoso, N.M.; Durango, Colo.; the San Juan Islands in Washington’s Puget Sound; St. George, Utah; Medford, Ore.; Coeur d’Alene, Idaho; Kalispell, Mont.; and towns along lakes Superior and Michigan in northern Michigan.

“Boomers and retirees these days are considering a much wider range of destinations for retirement, often choosing states that don’t commonly come to mind, such as Maine and Montana,” said Mary Lu Abbott, editor of *Where to Retire* magazine. “Yes, the Sun Belt remains

popular, but many people prefer a four-season climate and enjoy the changing of seasons. They seek towns that are safe and have active, appealing downtowns and good hospitals nearby, and increasingly they’re looking for places with a lower cost of living and lower overall tax rate.”

Maine doesn’t have a low income tax rate and housing prices are high in Camden. But the town fits the bill in most other regards, drawing more and more retirees over the years, many of whom have some previous connection to the town, spending summers or vacations in the area.

Camden, with a population of 4,850, has a picturesque harbor that is home to historic windjammers in summer and fall. Nestled at the base of the Camden Hills, the town has its own ski mountain. The downtown has stores and restaurants that are locally owned. Crime is low and incomes and education levels are high.

In 1990, about 33 percent of residents were 55 and older, according to the U.S. Census Bureau. By 2010, nearly half were 55 and over. By last count, Camden has more people in their 60s than in their 20s and 30s combined.

Camden’s median age is 53, which is old even by Maine standards. The Pine Tree State, with the nation’s oldest residents, has a median age of 42.7 years.

Smaller, far-flung places aren’t for all retirees, of course. They can have long, cold, snowy winters and high housing costs. Many are remote, even isolated. Public transportation often isn’t available, and doctors can be in short supply in the more rural locales.

Some have a shortage of cultural opportunities, good restaurants and part-time jobs.

Different people have different ideas of retirement, said Leigh Smith, who moved to a Camden retirement community with her husband, Ron, from the Boston area in 2003. While Smith and her husband moved to Maine for retirement, a cousin of hers wasted no time moving away from Maine, to Florida, when he stopped working.

“You think, my goodness, why would you retire to Maine? It’s snowy, icy,” she said. “But the winters here, I have found, are better and milder than Boston.”

The idea of going to Florida didn’t appeal to the 66-year-old Smith because of the humidity, crowds and hurricanes. She likes that life here has a slower pace but that there’s still plenty to do.

“It’s like the 1950s here,” she said. “People trust each other. People don’t lock their homes or cars, although we do because we’re from Boston and it’s ingrained.”

She and her husband like that they can walk to downtown, that performance centers and museums are nearby, and that people are active around here — be it walking, biking, kayaking, boating, hiking or volunteering their time for community groups. It’s also important that a hospital is located nearby and there’s bus service from town when they want to go to Portland, Boston or New York.

“When we first visited Camden, neither of us had heard of the town,” said Ron Smith, 70. “But when we were shown the area, we were sold on it pretty quickly.”

With baby boomers now reaching retirement age, they’re looking for places that are walkable with good restaurants, volunteer opportunities and perhaps college courses they might be able to take, said David Savageau, author of *Retirement Places Rated*, now in its seventh printing. They’re also looking for places with familiarity, where they’ve visited on vacation or perhaps spent summers as a child.

For many retirees nowadays, the idea of a “golf kind of idle recreation” retirement associated with Florida isn’t appealing, he said.

“That’s the old view of retirement,” Savageau said. “And it’s kind of dying out, the desert Southwest and South Florida. That was for our parents; for us it might be somewhere closer to home, a college town, a ski resort or a historical area that gets some kind of tourism in season.” — AP

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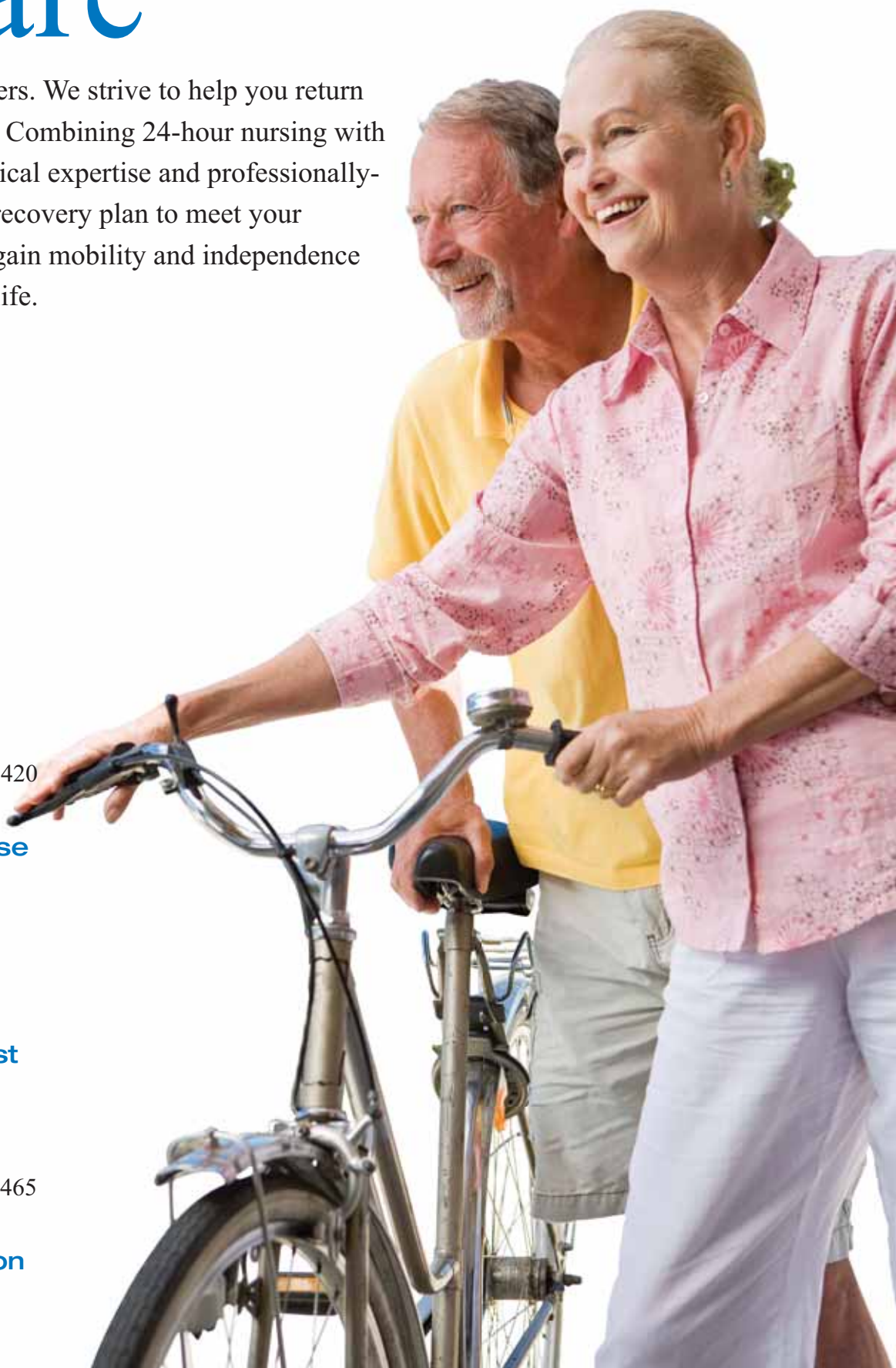
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