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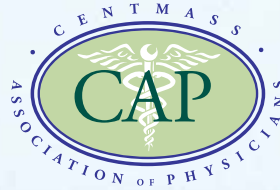
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# How to make the downsizing process less emotional

By Brian Goslow

When Heidi J's mother decided it was time to prepare to move from her longtime Boston area home to a nearby life care community, she was faced with the challenge of what to do with her collection of antiques.

"She had 50 years of 'treasures' stored in a basement, garage, closets, drawers, etc. which could not all fit in her new apartment," said Heidi, who asked that her last name not be used to protect her mother's privacy.

Heidi was fortunate to have had the benefit of time — approximately two years after her mother, then in her early 80s and widowed, first expressed her desire for a new living space — to help prepare her for the move by deciding what to do with the amassed collection.

"Downsizing had to be a team effort," she said.

Going through each piece together was like opening "time capsules," with Heidi's mom remembering where she got each artifact and the story that went with each one. "However, reminiscing about each and every item only made them more difficult to part with," Heidi said. "Sometimes the process was stressful, as we knew she could only take a fraction of her belongings to her new apartment."

Many of the items were given to family members. Others were offered to antique dealers, a transaction that was sometimes difficult as Heidi's mom felt her "treasures" were worth way more than what the dealers were willing to pay for them. "My mantra was, 'We can't take all this stuff with us,'" Heidi said. "Over time she was willing to sell more items and pocket a little mad money."

A professional moving service brought a small assortment of items to Heidi's mom's new home, while storing whatever items remained.

"It was a very emotional process," Heidi said. "Downsizing and moving is saying goodbye to not only a house and the things in it, but to bygone times. There is a finality to it. A period at the end of a sentence."

Years ago, many items from a downsize would end up at the local dump. These days, professional move managers can help find willing buyers for in-demand items and non-profit organizations that have families that can benefit from donated items.

Laurie Nordman, owner of NextStage Associates, a professional move management company based in Westborough, said

the best time to downsize is when someone is doing it by choice, and has the luxury of time in making decisions on what to do with prized items.

The best scenario for her clients, time wise, is when they have approximately two months for the process. "We set up a weekly appointment with them and we just sort of work at it a little at a time, and by the time they're ready to move, by the time the house is ready to be listed, they're ready and they haven't had to make any fast choices," she said.

In addition to providing improved time management, Nordman said, a move management company often has a better idea of what items might have value and reusability.

"If there are things someone wants to consign, things that are (perceived to be) popular and desirable, that changes over time," Nordman said. "A lot of times, the families will throw away the stuff that's actually popular now and save the stuff that had the value when they bought it. What a lot of clients don't realize is what people want now is stuff from the '60s and '70s."

One example would be good china, which many perceive to have great value, so they hold onto it for decades, even if it's never used, while throwing out currently-in-demand '60s-era Mod plastic dishes.

When it comes to what family members want, "use creates meaning," said Nordman. "Very often when we're talking to people, they say, 'My kids don't want the good china' and what I often say is, 'How often did you use it?' Because if you used it twice a year, it has no memories for them. But ask them (their children) if they want the cookie jar or ask them if they want the bowl they ate their cereal out of, chances are pretty good that those are the things they want."

Catherine Evans, 64, of Maynard, decided it was time to downsize when she realized her house contained "too much unused stuff." Without a timetable, she and her husband are going through the process themselves, with the help of their teenage grandchildren. "It's been great," she said. "We have these discussions as I tell the stories connected to the pieces. It lets them know me and my husband better — and differently."

But Evans' upbringing makes it somewhat difficult for her to discard things. She grew up on a farm where folks created what they needed out of whatever was available. "You didn't go to the store for a 'something,'" she said. "It has always been for me, well, that I might need it sometime."

Secondly, she's an artist who's made a name for herself repurposing discarded materials. "My creativity kicks in. I see multiple uses for most things," Evans said. "I can think of dozens of things to use an empty toilet paper tube for."

Then there are the emotions that return with each object in the house. "Every single

piece of paper has to be rethought," Evans said. "Every old photo brings back memories. With some things, it feels like broken dreams, things I hoped for that never materialized."

Toni Coleman, a psychotherapist based in McLean, Va., has worked with people going through downsizing or are helping their parents with it; she has personally gone through it with her own parents and in-laws.

"The overwhelming feelings folks experience are a sense of loss over their youth and past life and a nostalgia about what they have lost and must give up as they move into the later stages of their lives," Coleman said. "They may make attempts to hold on to things they no longer need and offer resistance to those helping them declutter. They also often push their kids and/or grandkids to take useless and unwanted things and use them as a way of holding on to their past and memories."



A downsizing work-in-progress: Catherine Evans' attic

Sometimes the pressure to downsize comes from relatives.

Clinical psychologist Natalie Gelman has been running a discussion group on aging at the Mastick Senior Center in Alameda, Calif. When the subject of downsizing came up, some of the participants felt they were being hassled to do so by their children and as a result, were resentful and angry toward them.

"What stood out for me as the strongest issue was that they felt their power and control were being challenged," Gelman said. "They did not like being parented and felt capable of making their own decisions." They generally believed the objects they had stored away were too valuable to discard, but the perceived value was not always financial. Rather it was frequently tied to memories the owners felt were too precious to dispose of.

So where's the best place to start a downsizing project?

With books. Once someone has read a book, most likely, he or she is not going to read it again, pointed out NextStage Associates' Nordman, noting that books are perfect to offer to others.

That includes that pile of cookbooks taking up valuable space. "We always can tell the best cookbook in the house because it's the one with the most dog ears and the most grease stains — that's the cookbook that you

keep," she said. "The one that doesn't even have the binding cracked, that's the one you can donate (or pass onto a friend) because that cookbook has never been used and it probably never will be."

For the most part, unless there's a rare book, it's not cost effective for Nordman's company to try to sell a collection. It normally tries to match the books with a charity that can do something with them.

People who haven't made the transition to computers tend to be paper savers. "That's tough," Nordman said. "For example, if you're got recipes from the '80s that you've never tried, yet they're still sitting there in your box of recipes, you have to ask yourself, 'Am I ever going to make this or do I just like the idea of someday making this?' If it's something that you actively use, if it's a friend, then you keep it. If it's an acquaintance, you think about keeping it, and if it's a stranger, you let it go."

Before getting rid of personal papers, Nordman suggested contacting a lawyer and banker to make sure they have no further use. Then, to protect that information from getting in the wrong hands, take advantage of shredding services at office supply stores. "They shred by the pound," she said. "You can have 40 years of no-longer-needed records gone in a matter of 30 minutes as opposed to you spending weeks and months and years with a little cheap shredder trying to do it all."

Whether it's newspaper or magazine articles, recipes, paper items, tools, linens, kitchen items or tablecloths,

Nordman shares one basic rule to make the downsizing process much easier: "Realistically, if you haven't used it in the past five or six years, chances are pretty good you're not going to need it, so it's probably OK to let those things go," she said.

When Nordman's company surveys a customer's property, it prioritizes the client's wishes as well as where items that aren't being sold or given to family members can find new homes. For example, kitchen items can be utilized by Household Goods Recycling of Massachusetts in Acton, yard tools by Habitat for Humanity, women's clothing can make a difference at Abby's House in Worcester, and More Than Words in Waltham has homes for all those books you'll never open again.

Nordman estimates that 30 percent of her company's business is caused by an "unanticipated transition" due to a sudden death or an illness forcing someone to move. "We can more than handle an emergency transition and we can do it really well — it takes the stress out of it for the family," she said.

*Resources: Household Goods Recycling of Massachusetts, [www.hgrm.org/](http://www.hgrm.org/); Habitat for Humanity, [www.habitat.org/](http://www.habitat.org/); Abby's House, [www.abbyshouse.org/](http://www.abbyshouse.org/); More Than Words, [mtwyouth.org/](http://mtwyouth.org/); NextStage Associates, [www.nextstageassociates.com](http://www.nextstageassociates.com).*

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# Acceptance and pragmatism, American style prevails

By Liz Sidoti

**Editor's Note: Just My Opinion will return next issue.**

WASHINGTON —

It's a counterintuitive notion in an era where it's easy to feel like Americans are sitting in judgment of one another every day. Yet here it is right in front of us: When it comes to social policy in the United States, a new pragmatism prevails in a number of surprising ways.

## Guest Column

In a relatively short span, American views have shifted on everything from gay marriage to marijuana legalization to illegal immigration and, perhaps, more. New laws, predictably, have followed. And, today, parts of this country now allow gays to wed and people to smoke marijuana for fun, while Congress is debating whether to permit millions of people in the country unlawfully to stay.

Like it or not, this is what appears to be happening: We are becoming a country that's becoming more accepting rather than exclusive as technology and globalization combine with generational, ideological and demographic changes that are reshaping the nation's very fabric.

With the lessons of war and recession fresh in our minds, is it possible that the period we just underwent gave us some perspective? When people are worried about feeding families in the face of tough economic times and staying safe in the face of terrorism threats, do we no longer have the bandwidth to worry about whom others sleep with, what they smoke or whether they're living here legally? Have we reordered our priorities, becoming so focused on existential challenges that we don't have room for as much judgment in our lives anymore?

Certainly, prejudice still exists and it will likely forever. But the numbers agree. When it comes to social policy, at least, we are changing.

President Barack Obama remarked on how far we've come before an audience of young people in Belfast recently, when he invoked his own nation's history of discrimination while praising the peace achieved so far in Northern Ireland.

As the Supreme Court prepared to rule on gay marriage, a Pew Research Center survey found that for the first time in its polling just over half — 51 percent — of Americans favor allowing gays and lesbians to marry legally. It also found that 72 percent say that legal recognition of same-sex marriage is "inevitable." This comes a year after Obama declared his support for it.

With two states deciding last fall to legalize pot for recreational purposes, Pew also found in April that most Americans — 52 percent — now back doing so. It's the first time in more than four decades that a majority has taken that position. Support for legalization has risen 11 percentage points since 2010. As recently as a decade ago, only about one-

third backed making marijuana legal.

And as Congress tackled immigration reform, a CBS News/New York Times survey in April found 83 percent favoring an eventual path to citizenship for people in the country unlawfully. That was 20 percentage points higher than what a Pew poll found in 2007, the last time the country engaged in a debate over the issue.

At first glance, these swings in public opinion, and the political changes that at times grudgingly follow, seem easy to explain: Our culture is increasingly defined by the younger, more liberal, more accepting generation, but our system of laws remain defined by the older, more conservative, less tolerant generation.

Partly. That explanation belies the complexity of what's really going on. Attitude shifts, including greater acceptance of differences, tend to follow times of high stress.

Certainly millennials, people born since 1980 who are now generally between 18 and 32, play a large role in the country's reshaping.

This generation of Americans skews left ideologically, growing up in the polarized period of the George W. Bush years and rallying behind Obama in the period since, becoming more liberal than the previous generation and even their parents' baby boom generation. They came of age at a time when images of the burning World Trade Center towers and unemployment lines likely were seared into their memories as they determined what mattered to them — and, perhaps as importantly, what didn't.

Their impact on the nation's fabric is similar to the impact young people had on the nation in the late 1960s, only in reverse.

But the influence of millennials is only one factor contributing to this public opinion swing.

Other demographic changes — racial and ethnic — are also at play in a nation where whites have long been a majority. They are on pace to lose that status in the next generation, somewhere around the year 2043, as fast-growing Latinos exert their dominance. All that has helped fuel changes in American views about reforming the nation's patchwork immigration system.

And then there's the ideological shift, with significant swaths of both the right and the left showing a be-and-let-be libertarian bent, wary of government intrusion in their personal lives. That strain is evident in both views on pot and gays, and, to some extent, immigration as well.

Contributing to all that is the fact that we're more connected than ever, with seemingly unlimited information literally at our fingertips and the ability to communicate with someone on the other side of the world through a handheld device — something so recent, yet already so universally accepted that we tend to overlook its power.

ACCEPTANCE page 8

Fifty Plus Advocate



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## Five reasons why volunteerism is good for you

By Michael E. Festa

I see the power of the volunteer firsthand. AARP volunteers work every day to help people 50+ turn dreams into real possibilities, to strengthen communities and to fight for issues that matter to families.

Here in the Bay State, our volunteers save residents money on their taxes through AARP Foundation Tax Aide. They keep our roads safe through AARP Driver Safety. They help low-income seniors remain independent in their homes through the Massachusetts Money Management program. They enroll eligible seniors for SNAP, the Supplemental Nutrition Assistance Program. And, they make their voices heard at the State House and in Washington, DC on issues like Medicare and Social Security.

According to the U.S. Bureau of Labor Statistics, people over 65 volunteer the most hours — an average of 96 hours per year, almost two hours every week. These dedicated individuals have a positive impact on their communities — while improving their own lives as well. Yes, volunteering is good for you too.



Whether you have five minutes, five hours or five days, consider volunteering for these five reasons:

- You will help people in your community live their best lives. The number one reason to volunteer may be obvious: helping those in need is a good thing. Whether by making a phone call to a legislator, improving a child's reading skills, or helping a neighbor balance his or her checkbook, volunteers make a difference, one person at a time.

### AARP and You

- You will feel connected. Studies have shown that staying socially connected is related to good physical and emotional health, especially for older people. When talking with our dedicated AARP Foundation Tax Aide volunteers earlier this year, many told us that they truly valued and appreciated the friendships they made with other volunteers — and their clients.

- It will help your career. Out of work, or looking for your "what's next" activity? Volunteer experience can help round out your resume. Many of the skills acquired in volunteer work can be transferred successfully to the paid workforce, and companies can identify and recruit top talent in today's multigenerational workforce by considering persons with

volunteer experience as potential employees.

- You will be happier. Research shows that volunteering helps with depression and improves mental health. Taking time to help others in need puts your own problems into perspective, and may provide a much needed break from everyday stresses and problems.

- You will live longer. Numerous studies have found that volunteers live longer and have lower rates of disease than those who don't volunteer, no matter what age. According to a health and retirement study by University of California, volunteers over age 65 had less than half the normal risk of dying compared to their non-volunteering peers. The maximum health benefits came from volunteering 40 to 100 hours per year, or one to two hours each week.

So what are you waiting for?

To find volunteer opportunities near you, visit [www.createthegood.org](http://www.createthegood.org).

*Michael E. Festa is the state director of AARP Massachusetts, which represents more than 800,000 members age 50 and older in the Bay State. Connect with AARP Massachusetts online at [www.aarp.org/ma](http://www.aarp.org/ma); Like us at [www.facebook.com/AARPMMA](http://www.facebook.com/AARPMMA) and follow us on [www.twitter.com/AARPMMA](http://www.twitter.com/AARPMMA).*

## Photo ids: What's wrong with this picture?

By Al Norman

In hard financial times, people are driven to do things that they would not ordinarily do. This goes not just for low-income folks struggling to make ends meet financially — but also for state officials looking to respond to charges of fraud and abuse in our public assistance support system.

Case in point: putting photo identification on electronic benefit cards, or EBTs.

In late June, the General Court on Beacon Hill was crafting legislation to deal with the highly publicized issue of welfare fraud and abuse. During debate in the senate, lawmakers included a provision requiring that EBTs carry photo IDs. For homebound elders and individuals with disabilities, a photo requirement on the Supplemental Nutrition Assistance Program (SNAP/food stamp) cards presented two major challenges — getting out to have a photo taken and being able to have families and caregivers use the card on behalf of a homebound recipient.

A coalition of elder advocacy groups, led by AARP Massachusetts, objected to the mandated photos and send a letter to the senate arguing in part:

"The current proposal of adding a photo identification on the SNAP card would create a burden on vulnerable older residents, many of whom may rely on others to purchase their food or would need to travel to a site for recertification and to obtain the identification. We believe that government has a responsibility to design and implement programs in ways that promote rather than discourage, participation by all who are eligible, including legal, noncitizen residents ... In the Commonwealth of Massachusetts, over 45 percent of all SNAP households include one or more elder or disabled member."

During floor debate, the senate added an amendment offered by Sen. Cynthia Creem, D-Newton. Her amendment requires the state to exempt the following



groups from the photo ID requirement:

- Applicants and recipients of Supplemental Security Income who apply through the Social Security Administration;
- Applicants and recipients who apply

### Push Back

through the simplified elder application and for whom the state has granted a waiver of the face-to-face interview due to a hardship;

- Residents of group homes for the blind or disabled;

- Individuals in residential substance abuse treatment programs whose benefits are paid through authorized representatives and individuals and agencies designated as authorized representatives for persons who are elderly, blind or disabled.

The Creem amendment also authorized the state to issue "an electronic benefits transfer card that is authorized to be used without photo identification." Finally, the Creem amendment requires the state to "identify any current cardholder who may have barriers to complying with such requirement, including but not limited to

cardholders who are elderly or disabled, cardholders residing in group homes or other residential treatment settings, or cardholders who rely on family members or an authorized representative to assist them ..." and to "promulgate regulations to ensure that such barriers do not prevent such individuals from receiving benefits ..."

One state senator, who clearly was not thrilled with the idea of putting photos on EBTs, told me that she was approached one time in a grocery store by someone who offered to sell her a food stamp card at half of its value. This isn't just a sign of fraud — it's a sign of desperation. We still have thousands of seniors in this state who need SNAP cards to help put food in the table. We need to make sure that we don't make them feel like criminals with ID cards that stigmatize them for being poor. And we need to make sure their family and paid caregivers can use the cards if the elder is homebound.

*Al Norman is the executive director of Mass Home Care. He can be reached at 978-502-3794, or at [info@masshomecare.org](mailto:info@masshomecare.org).*

## ► Acceptance

Cont. from page 7

We're also more exposed to different people and ideas, given that the around-the-clock media environment picks up on — and promotes — changes in societal attitudes. Just look at programs like *Weeds*, *Modern Family* and *Ugly Betty*.

Diversity, it seems, is all around us to larger degrees than ever before, a byproduct of globalization. By being exposed, matter-of-factly, to different people with different beliefs, it's hard to see how we wouldn't eventually become more open to including and accepting others who look or act different than the majority.

Even if we wanted to go back to being more exclusive, could we? It's hard to imagine that in this increasingly open society, at least socially, America could turn back in the other direction. As the president put it: "Each successive generation creates a new space for peace and tolerance and justice and fairness."

So while there will always be some degree of prejudice in the world, the United States — a nation engaged in a constant quest to figure out who we are and what we believe — will probably continue chipping away at it, one generation at a time.

*Liz Sidoti is the national politics editor for The Associated Press. Follow her on Twitter: <http://twitter.com/lisidoti>.*

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Medicare won't pay for Eli Lilly Alzheimer's agent

WASHINGTON — Eli Lilly & Co. said it will push ahead with a first-of-a-kind imaging chemical designed to help screen for Alzheimer's disease, despite a negative ruling by Medicare officials. The Centers for Medicare and Medicaid Services reported it will not cover the chemical, called Amyvid, which highlights brain plaque in medical imaging scans. The government program provides health coverage to more than 47 million seniors, and is the largest payer for prescription drugs in the U.S.

In its decision, posted online, Medicare said more trials are needed to prove the tool works.

In its decision, posted online, Medicare said more trials are needed to prove the tool works. The government will pay for patients enrolled in future studies, but not for general use. The radioactive imaging agent works by binding to beta-amyloid plaques and causing them to show up on positron emission tomography, or PET, scans of the patient's brain. The presence of these plaques may help indicate that a patient with cognitive problems has Alzheimer's disease, although such a scan does not definitively show that. Eli Lilly, which is based in

Indianapolis, has said Amyvid is one tool intended to help find the cause of a patient's cognitive decline. The ruling is an unexpected setback for the product after European Union regulators endorsed the chemical in January. The U.S. Food and Drug Administration approved the drug for sale in 2011. "Lilly remains steadfast in our request for Medicare coverage of beta-amyloid imaging agents for the appropriate patient population," said Wei-Li Shao, director of the company's Alzheimer's business, in a statement. Eli Lilly and Co. paid \$300 million in 2010 to acquire the drug and its developer, Avid Radiopharmaceuticals Inc. Avid Radiopharmaceuticals CEO Daniel Skovronsky said in a statement the Medicare ruling "may stifle future innovation aimed at improving diagnosis." Doctors currently diagnose Alzheimer's disease by observing patients and administering physical and mental tests. The disease is the sixth-leading cause of death in the U.S. and the most common form of dementia, a term for brain disorders that affect memory, judgment and other mental functions. Alzheimer's attacks neurons in the brain, leading to problems with memory, thinking and behavior. There is no cure for the disease, and scientists are not even sure what causes it. — AP



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6.13

## Therapy as good as surgery for knee repair

By Marlynn Marchione

**Y**ou might not want to rush into knee surgery. Physical therapy can be just as good for a common injury and at far less cost and risk, the most rigorous study to compare these treatments concludes.

Therapy didn't always help and some people wound up having surgery for the problem, called a torn meniscus. But those who stuck with therapy had improved as much six months and one year later as those who were given arthroscopic surgery right away, researchers found.

"Both are very good choices. It would be quite reasonable to try physical therapy first because the chances are quite good that you'll do quite well," said one study leader, Dr. Jeffrey Katz, a joint specialist at Brigham and Women's Hospital and Harvard Medical School.

A meniscus is one of the crescent-shaped cartilage discs that cushion the knee. About one-third of people over 50 have a tear in one, and arthritis makes this more likely. Usually

the tear doesn't cause symptoms but it can be painful.

When that happens, it's tough to tell if the pain is from the tear or the arthritis — or whether surgery is needed or will help. Nearly half a million knee surgeries for a torn meniscus are done each year in the U.S.



The new federally funded study compared surgery with a less drastic option. Researchers at seven major universities and orthopedic surgery centers around the U.S. assigned 351 people with arthritis and meniscus tears to get either surgery or physical therapy. The therapy was nine sessions on average plus exercises to do at home, which experts say is key to success.

After six months, both groups had similar rates of functional improvement. Pain scores also were similar.

Thirty percent of patients assigned to physical therapy wound up having surgery before the six months was up, often because they felt therapy wasn't helping them. Yet they ended up the same as those who got surgery right away, as well as the rest of the physical

therapy group who stuck with it and avoided having an operation.

"There are patients who would like to get better in a 'fix me' approach" and surgery may be best for them, said Elena Losina, another study leader from Brigham and Women's Hospital.

However, an Australian preventive medicine expert contends that the study's results should change practice. Therapy "is a reasonable first strategy, with surgery reserved for the minority who don't have improvement," Rachelle Buchbinder of Monash University in Melbourne wrote in a commentary in the

medical journal.

As it is now, "millions of people are being exposed to potential risks associated with a treatment that may or may not offer specific benefit, and the costs are substantial," she wrote.

Surgery costs about \$5,000, compared with \$1,000 to \$2,000 for a typical course of physical therapy, Katz said.

One study participant — Bob O'Keefe, 68, of suburban Boston — was glad to avoid surgery for his meniscus injury three years ago.

*THERAPY page 12*

## Implanted 'bracelet' helps treat chronic heartburn

**A** tiny magnetic bracelet implanted at the base of the throat is greatly improving life for some people with chronic heartburn who need more help than medicine can give them.

It's a novel way to treat severe acid reflux, which plagues millions of Americans and can raise their risk for more serious health problems.

It happens when a weak muscle doesn't close after swallowing as it should. That lets stomach juices splash back into the throat. Drugs like Nexium and Prilosec reduce acid. But they don't fix the underlying problem, called GERD, or gastro-esophageal reflux disease.

The Linx device, made by Torax Medical Inc., of St. Paul, Minn., is a ring of titanium beads with magnets inside. Doctors place it around the weak muscle at the base of the esophagus in a half-hour operation using a scope and "keyhole" incisions in the belly. The ring reinforces the weak muscle to keep it closed, yet is flexible and expands to let food pass when someone swallows. The ring comes in multiple sizes; it is about a half-inch in diameter and expands to about 1.5 inches. People don't feel it once it is implanted.

The device costs \$5,000; the operation

*IMPLANTED page 12*

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\* The new Tax Reduction Act of 2005 mandated that seniors spend-down all of their combined assets before the sick spouse can qualify into a nursing home. The act requires a 5-year look back for any transfers by seniors designed to deprive the state of those available resources to pay for the nursing home. In a Rest Home setting it is only 1 year look back!!!

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# Red eyes can have many causes, treatments

By Dr. Jean E. Keamy

**M**any people assume that red eyes mean they have an infection causing conjunctivitis. This may not be the case. There are many reasons why the eyes can be red.

Acute redness with a green discharge typically points to infectious conjunctivitis. Often it is accompanied by sinusitis or congestion. It is highly contagious and usually needs antibiotics if it is bacterial conjunctivitis. If it is viral conjunctivitis, the antibiotic will not help. Supportive care is indicated for viral conjunctivitis.

Redness associated with burning, blurry vision, foreign body sensation or eyelid



## Vision Quest

heaviness with a clear or white discharge might not be an infection. It could be dry eyes. Dryness on the surface of the eyes can lead to chronic redness. Over the counter medications that gets the red out can actually make matters worse. They make the eyes even drier. Dry eyes can be treated with artificial tears, prescription eye drops and punctal plugs.

If itching is a major complaint along with red eyes, allergic conjunctivitis may be the culprit.

Seasonal and environmental factors stimulate hay fever. Sometimes symptoms are isolated to the eyes. Rubbing the eyes often makes them worse. Over the counter allergy drops may help. Often a prescription

allergy drop is indicated for relief.

Red, painful eyes with light sensitivity may indicate a more serious problem. It may be a sign of inflammation in the eye. This could be inflammation of the cornea, sclera or inside the eye, called respectively, keratitis, scleritis or iritis.

Medical care should be sought immediately with an ophthalmologist.

These are just some of the major causes of red eyes. Signs that demand immediate attention include blurry vision, pain and photophobia. Since there are so many

causes of red eyes, it best to seek the care an ophthalmologist.

*Dr. Jean Keamy is a board certified ophthalmologist specializing in LASIK, PRK, refractive surgery, cataract surgery, and routine eye exams. She owns Keamy Eye & Laser Centre and can be reached at 508-836-8733. Learn more at [www.seemedrkeamy.com](http://www.seemedrkeamy.com) or [www.facebook.com/Keamyeye](http://www.facebook.com/Keamyeye) Archives of articles from previous issues can be read on <http://fiftyplusadvocate.com/archives/category/health/eyecare>.*

## ► Therapy

Cont. from page 10

"I felt better within two weeks" on physical therapy, he said. "My knee is virtually normal today" and he still does the recommended exercises several times a week.

Robert Dvorkin had both treatments for injuries on each knee several years apart. Dvorkin, 56, director of operations at the Coalition for the Homeless in New York City, had surgery followed by physical therapy for a tear in his right knee and said it was months before he felt no pain.

Then several years ago he hurt his left

knee while exercising. "I had been doing some stretching and doing some push-ups and I just felt it go 'pop,'" he recalled. "I was limping, it was extremely painful."

An imaging test showed a less severe tear and a different surgeon recommended physical therapy. Dvorkin said it worked like a charm — he avoided surgery and recovered faster than from his first injury. The treatment involved two to three hour-long sessions a week, including strengthening exercises, balancing and massage. He said the sessions weren't that painful and his knee felt better after each one.

"Within a month I was healed," Dvorkin said. "I was completely back to normal." — AP

## ► Implanted

Cont. from page 10

can run \$12,000 to \$20,000 depending on hospital charges, said Dr. John Lipham, a surgeon who offers it at the University of Southern California and at Hoag Memorial Hospital Presbyterian in Newport Beach. Many insurers cover it for patients who are not helped enough by antacid medicines.

As many as 20 million Americans have GERD. It's not just a quality-of-life issue: Chronic acid reflux can raise the risk of a condition called Barrett's esophagus, which in turn can raise the risk of throat cancer.

"No one doubts that reflux should be treated," but most people get enough relief from acid-lowering medicines, said Dr. Brian Reid. He's director of the Barrett's esophagus program at Fred Hutchinson Cancer Research Center in Seattle.

Lipham and other doctors recently published a study of the device in 100 patients in the *New England Journal of Medicine*. All had had reflux for at least 10 years and were getting worse despite using antacids.

After having the magnetic ring implanted, the acid measured in their throats greatly decreased. Quality of life improved substantially for 92 percent, and within one year, 86 percent no longer needed acid-lowering medicines.

The most frequent side effect was difficulty swallowing, which occurred in 68 percent of patients right after surgery. That dropped to 11 percent after one year and 4 percent after three years.

Six of the 100 had to have the device removed. In three it was because swallowing problems persisted. Other problems prompted removal in the others.

The device is available so far in 24 states. — AP



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# Barge cruise offers luxury, history, food, wine

By Sondra Shapiro

FRANCE —

**D**om Pierre Perignon, the 17th century French Benedictine monk, is erroneously credited with the invention of sparkling wine. In fact, this winemaker spent a lifetime trying to keep the bubbles out of Champagne.

That fascinating tidbit was typical of the in-depth exploration offered during a recent six-night sojourn aboard a slow luxury barge through the Champagne wine region — located about 100 miles east of Paris.

Our trip began in the town of Chateau-Thierry where our barge was docked amid a traveling carnival. As we eight passengers boarded, we made our way through a throng of children interacting with a menagerie of animals. While sipping our welcoming glasses of Champagne onboard, we watched a camel and llama grazing nearby. This small town tableau absorbed us into the local culture from the start.

From the majestic cathedral of Reims and medieval hilltop city of Laon to the somber reminders of two world wars fought on its soil, the Champagne region offered much to explore and to learn about above and beyond the sparkling wine for which it is famous. Of course there was also plenty of opportunity to sip bubbly during visits to the famous Moët & Chandon and the family-owned Champagne House of Ployez Jacquemart.

The all-inclusive itineraries offered through French Country Waterways appeal to the traveler who prefers a more comprehensive experience.

Our four-cabin barge had a homey, French inn feel, with common areas comprised of a comfy salon, elegant dining room, book-lined library and an outdoor space for dining or enjoying the scenery. Warmly decorated and spacious staterooms are stocked with bottled water, robes and fresh cut flowers. There is free Internet, too.

What guests will not find are televisions or radios. The English speaking crew of six — hailing from France, Germany and Italy — enthusiastically pampered and catered to just about every whim. The young staff was friendly yet professional.

The slow pace of the trip — the barge travels a bit more than 90 miles during the entire week — offers lots of time to take in the sights, sounds, history, food and wine of the

region.

Typically, the Princess would spend half the day wending its way through the canals, amid bucolic landscapes dotted with brilliant yellow rapeseed fields, quaint farms and villages. We contented occupants often spent time reading, chatting or gazing out the window for glimpses of wildlife or farm stock. Other times we were let off at one of the numerous locks to walk the towpaths alongside the barge. Bicycles were available, but we always chose to hoof it in the name of exercise.

The other part of the day, we were zipped away for excursions in a Mercedes van driven by the versatile Claire Smithson, a crewmember and our personal guide.

We would return late afternoon to a cocktail hour featuring a sampling of unique appetizers followed by a four-course candle-lit dinner. Using local produce, dairy, poultry, fish and beef, Chef Carlos Valle skillfully prepared sumptuous mealtime offerings. The fresh butter served with every meal was a religious experience, even if artery clogging.

Lunch and dinner included two wines — a red and a white — and a cheese course described in detail and presented with fanfare by our knowledgeable server. French Country Waterways material boasts that more than half of its wines are from Grand Cru — a designation indicating a favorable reputation for wine production — and Premier Cru — the highest level of five within the Grand cru classification — vineyards. The cheese course always offered three local French specialties such as Compté, Roquefort, Camembert and others.

Chef Carlos made appearances at lunch and dinner to describe the menu. Though I shamelessly admit that most of us passengers, along with a crewmember who will not be named, usually snuck a peak at the bill of fare before our chef came out to proudly describe it. No description, however, could equal the actual presentation and flavor combinations we enjoyed each day. The meals on board were so special that even the evening we had an included dinner onshore at the two Michelin-starred Les Crayeres in Reims couldn't compare.

When we weren't eating, we were exploring. Our first day we visited the American Cemetery and World War I battlefields of Belleau Wood. It was a somber outing as we wandered amid the rows of crosses and Stars of David marking the final resting places of 2,289 young American Marines who never made it home from the battle fought



Crewmember Sarah Greenstreet describes the evening cheese course



Dom Perignon at sunset (photos by sondra shapiro)



The Princess

during the summer of 1918. The battlefield was a visual contrast of horror and beauty, as traces of shell holes and trenches were still visible amid a forest of wild flowers and trees.

The next day was our first introduction to the region's star product. We spent the morning at the abbey of Hautvillers, the burial place of the iconic Dom Pierre Perignon. Then we traveled to the Champagne capital, Épernay, and home to Moët & Chandon. Our group was led on a private tour through the wine caves where we got a lesson in champagne-making and learned the history of the Champagne house that produces the most famous bubbly in the world — Dom Perignon. The tour ended with a tasting featuring a rosé and a white Champagne from Moët & Chandon's most recent vintage, 2004. The following day we visited the smaller, family owned House of Ployez Jacquemart.

During the morning of our stay in Reims, we took a stroll to the Museum of Art, followed by an afternoon visit to the 13th century cathedral. This majestic wonder is where French kings were once crowned. Though the Germans heavily damaged the cathedral during World War 1, it was fully restored by 1938 with its rose windows, ornate carvings, tapestries, whimsical choir clock and captivating Marc Chagall stained glass windows all intact.

Our last day, we docked in the quaint little town of Maizy and boarded our Mercedes van to visit the medieval hilltop city of Laon. Stuck in a time warp — boasting quaint streets, shops and a cathedral — we fans of Dan Brown novels were especially enthralled by an authentic Knights Templar church.

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# Oasis to serve Alzheimer's, dementia sufferers

By Brian Goslow

WORCESTER —

**T**he owners of the Dodge Park Rest Home and Day Club have announced plans to construct a two-building nursing and rest home complex for Alzheimer's and dementia sufferers.

The 82-unit Oasis at Dodge Park will be built across the street from the current Randolph Road facility, on the site of the former Odd Fellows Home, a local landmark built in the 1800s that has gone unused for two decades and will soon be demolished to make way for the new facility.

Construction of Oasis at Dodge Park will start this fall with the opening scheduled for October 2014.

"We found an increased need for individuals with memory impairment, dementia and Alzheimer's to be cared for in a setting and environment that is not a nursing home," said co-owner and executive director Micha Shalev. "Most of those people we have right now, at Dodge Park, and those people who would be across the street, are people that would not be able to be cared for in assisted living. They need a higher level of care and they need better direct-care staffing in order to accommodate their activity of daily living."

The ability to acquire the property immediately across the street was crucial to Shalev's and co-owner and administrator Ben Herlinger's ability to expand the institution while not compromising their mission to be hands-on owners. "We knew it would be easier for us to continue



Proposed design for the Oasis at Dodge Park

our management style on both campuses, with one across the street from the other," Shalev said. "One of the unique and key features we have at Dodge Park is that we are on site and involved with all operations 24/7."

Shalev and Herlinger said they instill a resident-centered program at Dodge Park and strive to have families feel like co-partners in the care of their loved ones by making themselves available by cellphone or e-mail around the clock. "It's a very unique system where the owners are on the floor," Herlinger said. "We know everyone and the residents and their family members know us."

The expansion became necessary as the current facility, licensed for 60 people, was getting more requests for placement than it had capacity for. The new complex is designed to house individuals with dementia and Alzheimer's disease with different levels of activities and accommodations depending on need.

Shalev and Herlinger said the concept for the design of the Oasis at Dodge Park came from their nearly 27 years in the assisted-care and nursing-home business. They wanted a facility that would have the feel of luxurious hotel-style living, but with a home-like feel. To keep residents active

physically and mentally, the facility will be constructed to encourage the enjoyment of the outside world, with a large central courtyard and backyard gardens intended to keep their senses active in fully secure areas.

"They will be able to roam around completely. They won't be able to leave, but still will be able to enjoy the freedom to go sit down at the patio and have some coffee

there or walk with their children and stroll in the garden we're going to have between the two complexes on the Oasis site," Shalev said.

Two dining rooms will be built around the courtyard, allowing residents to see the outdoors while they eat. The main living room will have a two-story high ceiling and have lots of glass for exterior viewing. "In any portion of the building, residents will have access to full daylight and exterior landscaping," Shalev said.

Programs at Oasis at Dodge Park will build on the original facility's offering of constant activities from 7 a.m.-9:30 p.m., seven days a week, to keep residents engaged. The owners found clients who used to have behavior problems open up once they participate in arts and crafts and painting programs and they look forward to their next project. Music and sing-a-longs also have proven to be invaluable in getting residents who might have been inactive and silent to become talkative.

These breakthroughs are "part of the most rewarding

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# Getting your parents to sit down and say 'yes'

By Marianne Delorey

I have been in elder care for over 25 years. I have studied the psychology and economics of aging. I know the service industry and am familiar with different levels of care. I thought nobody would be more prepared to talk to my mom about life care options. But what I didn't know was that she would not be prepared to talk to me.



## Caregiving Tips

Several years ago, I asked my mom when she felt it would be appropriate to downsize. You could visibly see her bristle. She sat upright and narrowed her gaze. She spoke with confidence and said, "I am not moving until I have to."

"Ok," I recounted. "But you do realize

that if I have to move you, it will be during a crisis."

"Fine," she said.

I let the topic drop. After all, she is well and (relatively) young. I felt confident that I could manage a crisis if needed, although I was secretly hoping we'd be able to talk in more detail before that happened. Then it hit me. The answer, just like the AA pledge, was for families in this situation to accept what could not be changed and to be brave enough to change what we could.

For those family members who are desperate for a plan, but have an elder who refuses to prepare for their decline, the key is to start planning anyway. Talk to siblings and other family members in the area. Go around to different facilities. Educate yourself about available services. Determine what you will be able to do, and what you cannot do. Then, (and this is where you need to be brave) present the plan to the elderly family member. It may sound something like this:

"Mom, I know you don't want to think about a time when you are not independent, so you don't have to. My brother and I have decided that if you cannot make decisions for yourself, we will bring you to the place down the street from me or around the corner from him, depending on availability. We will bring you the essentials, clothing, toiletries, etc. All of the other stuff, including your collectibles, will be packed up and put in storage. We can go through those items as we have time. We will sell your house and car and we will use our neighbor as a lawyer for your affairs if needed."

"If you don't like any of these plans, now is the time to make sure we understand what you want. Would you like to come with me to the places I mentioned so you can see them yourself? Do you want to meet with the lawyer in advance so we are both clear on what you want in case you can't speak for yourself? Is there anything in your attic that you feel

you will need if ever the time comes? The door is open to have this conversation. It does not have to be now, but if you leave these decisions to us, just know we will do our best."

There is no question that this will be a hard conversation for anyone to hear. But it is only fair to the caregiver and the elder. Elders need to take ownership of their future and plan. Families need to decide what they can offer and what other resources they will need.

Recently, my mother and I finally did have a meaningful discussion about these decisions. While we are not done, at least I got my mother to "maybe someday."

Marianne Delorey, Ph.D., is the executive director of Colony Retirement Homes. She can be reached at 508-755-0444 or mdelorey@colonyretirement.com and www.colonyretirementhomes.com. Archives of articles from previous issues can be read at www.fiftyplusadvocate.com.

## Recognizing signs of abuse in dementia afflicted adults

By Micha Shalev

One occasionally reads of sensationalized newspaper stories of elderly Alzheimer's and dementia victims who were subjected to abuse or neglect while they were residents in a nursing home.

Based on such newspaper accounts, one would have the impression that most cases take place in such facilities. While these kind of incidents do take place in such facilities, they are not the norm. Recent studies show that most cases of this type of abuse happen in a family home setting by family members or paid caregivers.

Some potential indicators for each type of elder abuse include:

- Passive and active neglect — Evidence that personal care is lacking or neglected; signs of malnourishment; chronic health problems both physical and/or psychiatric; dehydration and pressure (bed) sores.

- Physical abuse — overt signs of physical trauma; signs of restraint trauma injury;

additional physical indicators such as hypothermia, abnormal chemistry values or pain upon being touched; repeated unexplained injuries; inconsistent explanations of the injuries; a physical examination reveals that the older person has injuries which the caregiver has failed to disclose; a history of doctor or emergency room "shopping" and repeated time lags between the time of any injury or fall and medical treatment.

## Caregiving Tips

- Material or financial abuse — unusual banking activity; bank statements no longer come to the older adult; documents are being drawn up for the elder to sign but the elder can't explain or understand the purpose of the papers; the elder's living situation is not commensurate with the size of the elder's estate; the caregiver only expresses concern regarding the financial status of the older person and does not ask questions or express concern regarding the physical and/or mental health status of the elder; personal belongings such as jewelry, art and furs are missing; signatures on checks and other documents do not

match the signature of the older person; recent acquaintances, housekeepers or care providers declare undying affection for the older person and isolate the elder from long-term friends or family or they make promises of lifelong care in exchange for deeding all property and/or assigning all assets over to the acquaintance or caregiver.

- Psychological abuse — Look for psychological signs such as ambivalence, deference, passivity, shame, anxiety, depression, hopelessness, helplessness, thoughts of suicide, confusion or disorientation. Behavioral signs include trembling, clinging, cowering, lack of eye contact, evasiveness, agitation or hyper vigilance.

- Sexual abuse — trauma to the genital area, venereal disease, infections and/or unusual discharge or smell.

- Violation of basic rights — The caregiver withholds or reads the elder's mail; intentionally obstructs the older person's religious observances; or has removed all doors from the older adult's rooms.

- Self neglect — Is a controversial category in relation to elder abuse. The following questions lie at the heart of the controversy. If an individual is compe-

tent but chooses to neglect their personal health or safety, is this abuse? Is intervention, particularly involuntary intervention, appropriate in cases of self-neglect?

Self-neglect represents the highest percentage of cases of elder abuse. In fact, the Public Policy Institute of AARP estimates that self-neglect represents 40 to 50 percent of cases reported to a state's Adult Protective Services department.

Unfortunately, these statistics fail to take into account the fact that self-abusers do not fit a uniform profile. There are many factors that may lead one to self-neglect and the subsequent intervention necessary for each is unique.

Micha Shalev MHA CDP CDCM is the owner of Dodge Park Rest Home and The Adult Day Club at Dodge Park located at 101 Randolph Road in Worcester. He is a graduate of the National Council of Certified Dementia Practitioners program, and a speaker covering Alzheimer's and Dementia training topics. He can be reached at 508-853-8180 or by e-mail at m.shalev@dodgepark.com or visit online at www.dodgepark.com. Archives of articles from previous issues can be read at www.fiftyplusadvocate.com.

## New England better on primary care than most of U.S.

By Dave Gram

PLAINFIELD, Vt. —

Ronald Pitkin, 84, remembers the day in the early 1960s when his brother Belmont got a gash in his leg while the two were cutting firewood. They went to the office of the town physician, Dr. Frank Corson.

Corson worked alone, and Pitkin was drafted to be his assistant. "He told me 'You're going to have to scrub up.' I was the operating room nurse that day."

Now Pitkin gets his health care at The Health Center, a sleek, modern clinic that houses primary care, dentistry, psychiatry and other specialties under one roof. It's one of eight facilities in small towns around Vermont that charge based on patients' ability to pay. They provide primary care to about 25 percent of the mostly rural state's

residents, and experts say they're a key part of the reason why Vermont leads the country in primary care doctors per capita.

"This is a terrific health care center," Pitkin said recently as he waited for a checkup with the center's senior physician, Dr. John Matthew. "It's more care, and help in general, for less dollars than just about anywhere."

With Vermont leading the way, five of New England's six states rank in the top six for primary care doctors per capita, according to data from the Association of American Medical Colleges. The sixth, Connecticut, ranks 12th. As the national shortage of primary care doctors is expected to increase after the federal Affordable Care Act takes full effect next year, some are looking to New England's states with an eye to what they've been doing right.

Several factors contribute to New

England's relatively strong position. Among them: strong public health programs ensuring that high percentages of residents have health coverage, meaning fewer doctors deliver uncompensated care. Massachusetts, which enacted a universal health care

program in 2006, has about 97 percent of its residents carrying health coverage. In Vermont, it's about 94 percent.

The high rates of people already insured

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## ► Oasis

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aspect of what we do," Herlinger said. "It is the most rewarding feeling you've ever felt. You get a hug or a kiss, even a look of recognition from somebody who has full dementia — they recognize you and you can see it in their eyes, it's the most rewarding thing."

Residents with limited mobility will be encouraged to walk around — thus the Oasis design of welcoming places filled

with plants, where residents will want to frequent and, if they've got green thumbs, participate in the upkeep.

Technology also will play a role in residents' lives with big screens supplying information that will help keep them in the moment. "Here they can see the weather, what activities and what meals are being offered (on a given day) in beautiful color in a large font," Shalev said. "This makes a big difference for them."

For more information: call 508-853-8180 or visit www.dodgepark.com.



## 6 tips on managing your 401(k) plan effectively

By Alex Veiga

The run-up in stock prices this year could tempt even the most hands-off investor to wade into their 401(k) and make some changes.

The Dow Jones industrial average, Nasdaq and Standard & Poor's 500 indexes are each up more than 20 percent over the past 12 months. But experts suggest investors tread cautiously and avoid major changes aimed at timing the market.

"It's a retirement account. You are investing for not months or even years, but decades into the future," said Eric Tyson, author of *Personal Finance for Dummies*.

"Most people, including most professional investors, are not very good at market timing," he said.

Even if you're a set-it-and-forget-it investor, unless you've pulled out of stocks altogether — as some investors did right after the 2008 financial crisis — it's likely the stock portion of your 401(k) account has grown significantly in the last few years.

A new survey from Fidelity Investments shows that the average balance of its 401(k) accounts hit a record high in the first quarter of \$80,000. That's up 8.4 percent from the same period last year, and represents an increase of 75 percent since the stock market hit bottom in the first three months of 2009, the company said.

In contrast, some 1.6 percent of investors

age 55 or older who eliminated stocks from their portfolios when stocks collapsed in 2008, and never rebalanced their holdings, saw their portfolios grow just under 26 percent since the first quarter of 2009, Fidelity said.

Still, making periodic adjustments to your plan's asset allocation is a wise move, and part of remaining engaged with your overall retirement strategy.

Here are six ways to efficiently manage your 401(k):

1. Get the basics right: Don't leave money on the table. If your company offers to match up to a certain amount of your 401(k) contribution, make sure you're putting in enough to qualify for the maximum.

Once you have that covered, save as much as you can, as early in your working years as you can.

How much? Experts vary on this, but a common benchmark is to set aside 15 percent of your pay, including any matching funds from your employer. Under IRS rules, the maximum contribution is \$17,500 this year.

That means, if your employer is matching up to 3 percent of what you put in, you need to pitch in another 12 percent. If your employer's match is more generous, you can put in less, said Beth McHugh, a vice president

of market insights at Fidelity.

2. Don't bank entirely on winning investments. The market rises and falls, and timing may not be on your side — just ask folks who began relying on their retirement savings as the market hit the skids in 2008.

One good way to maximize your savings is to put more money into the plan.

"Those who continued to not just remain invested, but remained committed to making

contributions, are the ones that were able to come out ahead in the end," McHugh said.

Since the first quarter of 2009, Fidelity's 401(k) accountholders have, on average, contributed 8 percent of their pay to their plan. It was slightly higher before that.

3. Periodically assess retirement cost. Making sure your financial needs are met in retirement requires having a sense of what those costs will be. And not just the basics, but any travel or other major purchases. You'll also need to update that plan, particularly as you get closer to your post-work life.

By some estimates, retirees will need 85 percent of their pre-retirement income coming in from several sources, including Social Security, 401(k) plans and other retirement accounts, a pension or similar employer-

sponsored plan, and personal assets, such as other investments, savings or real estate.

"If you're behind saving or want to retire at an earlier age, you may find when you crunch the numbers that to reach your goal you should be saving 15 or even 20 percent," Tyson said. "If you're at a point in your earnings career where your earnings are relatively high but you don't think it's going to last, you don't want to keep working as hard, you may want to save 20 percent to 25 percent of your income during a certain period."

Fortunately, there are a bevy of online calculators that can help craft an estimate for how much you'll need to put away for retirement.

Look for these on the websites for large 401(k) plan managers such as Vanguard, Fidelity or T. Rowe Price.

A couple of alternatives: The AARP's retirement calculator and [www.Bankrate.com](http://www.Bankrate.com).

4. Rebalance your asset mix. Experts recommend taking a look at your asset mix — how much you have invested in certain funds of varying risk, or say, the proportion of your 401(k) invested in stocks versus bonds or other investments — and tweak them occasionally.

"Whether the market is up or the market is down, it's always a good time," said Philip Rousseaux, president of Everest Wealth Management Inc. "It's kind of an automatic

MANAGING page 21



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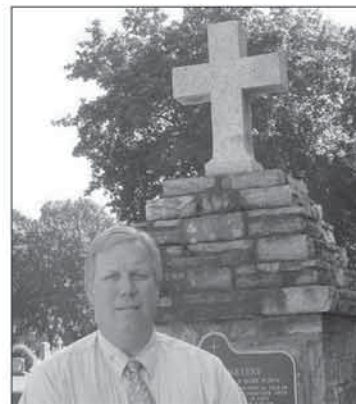


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## Judges: Social Security pushes approval of claims

WASHINGTON —

**D**riven to reduce a huge backlog of disability claims, Social Security is pushing judges to award benefits to people who may not deserve them, several current and former judges told Congress.

Larry Butler, an administrative law judge from Fort Myers, Fla., called the system "paying down the backlog."

A former Social Security judge, J.E. Sullivan, said, "The only thing that matters in the adjudication process is signing that final decision." Sullivan is now an administrative law judge for the Department of

Transportation.

The House Oversight and Government Reform Committee is investigating why many judges have high approval rates for claims already rejected twice by field offices or state agencies. Two current and two former judges spoke at a subcommittee hearing.

The number of people receiving Social Security disability benefits has increased by 44 percent over the past decade, pushing the trust fund that supports the program to

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## ► Managing

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way of always selling high and buying low."

Simply put, if you're heavily invested in a segment of stocks that have gone up sharply, you bring down your position on that a bit and shift the funds over to a segment that's undervalued.

Rousseaux recommends rebalancing at least on a quarterly basis.

Tyson, on the other hand, said every three to five years is just fine, unless the market has undergone a significant downturn.

As a general rule, stocks are going to be more volatile and risky in the short term, but reduced over the long-term. With bonds, it's reversed. They're less volatile in the near term, but there's a chance that they're not going to give enough of a return in the long term, sapping your funds for retirement.

5. Resist timing the market. Making major

changes to your 401(k) to profit off a market trend can be risky, and experts suggest avoiding it altogether.

"Market timing changes people make are often made on emotional reactions to events," Tyson said. "It's better to have an overall allocation, and stick to that."

And if you do take a shot and miss, don't wait on the sidelines for a time to jump back into the market.

"You don't want to compound that mistake by continuing to engage in more market-timing," Tyson said.

6. Play catch-up. A law passed in 2006 allows workers over 50 to beef up how much they contribute to their 401(k) plans and other individual retirement accounts. It's aimed at helping those workers closer to retirement age put more tax-deferred money aside while they're still working.

This can be especially helpful if you've incurred a big loss over the years during a market slump. — AP

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# DOMA Decision: What it means for estate planning

By Linda T. Cammuso

The Commonwealth of Massachusetts legalized same-sex marriage in 2004. While the intent was to put same-sex couples on equal footing with heterosexual unions in this state, federal law prevented those couples from enjoying the same rights as their heterosexual counterparts.



## Legal Briefs

Without federal recognition, same-sex spouses were required to file separate federal income tax returns, they could not receive Social Security survivor benefits and they were ineligible for some federally funded programs such as Medicaid — even those programs administered by the state.

All that changed when the U.S. Supreme Court ruled, on June 26, that the Defense of Marriage Act (DOMA) is unconstitutional and that it is discriminatory for the federal government to treat legally married gay couples any differently than it treats legally married heterosexual couples. By striking down DOMA's definition of marriage, the Supreme Court decision now makes as many as 1,000 federal laws and regulations available to same-sex married couples.

This ruling has a profound impact on estate planning and asset protection planning. Expanded financial and estate planning benefits that have become available to same-sex

couples include:

- **Federal Estate Tax Marital Deduction:** Same-sex married spouses may now transfer unlimited assets to each other, both during their lifetime and following the first spouse's death, without having to pay any federal estate or gift tax — providing that the recipient spouse is a U.S. citizen.

- **Gift splitting:** Currently an individual can give up to \$14,000 to as many recipients as they wish without incurring a gift tax. Same sex couples may now combine this annual exclusion, called gift splitting, to give any person \$28,000 free of gift tax implications.

- **Retirement plans:** The Employee Retirement Income Security Act of 1974 now applies to same-sex couples. It gives same-sex spouses full spousal rights to each other's retirement accounts, including spousal

rollover planning, which allows the surviving spouse to rollover the deceased spouse's IRA or other qualified retirement plan to the surviving spouse's own account and postpone the required minimum distribution until the year following the survivor's 70th birthday.

- **Veteran's benefits:** Previously domestic partners have been ineligible for many military benefits such as health care and survivor payments. The Department of Defense intends to make the same benefits available to all military spouses as soon as possible.

- **In the realm of long-term care/nursing home planning,** Massachusetts had previously clarified that same-sex marriage would be recognized under the MassHealth regulations. However, the expanded federal protection means same-sex spouses can now engage in typical nursing home planning — such as

gifting assets to each other — without the federal gift tax, estate tax and capital gains tax consequences they previously faced.

For the same-sex couple who has an estate plan, it's time to create a new one to take advantage of all the opportunities available. For those who have not done planning — it's time begin the process to fully protect yourselves and your loved ones.

*Linda T. Cammuso, a founding partner at Estate Preservation Law Offices and an estate planning professional, has extensive experience in estate planning, elder law and long-term care planning. She may be reached at [www.estatepreservationlaw.com](http://www.estatepreservationlaw.com) or by calling 508-751-5010. Archives of articles from previous issues may be read at [www.fifty-plusadvocate.com](http://www.fifty-plusadvocate.com).*

## Judges

Cont. from page 21

the brink of insolvency.

Social Security officials say the primary reason for the increase is a surge in baby boomers who are more prone to disability as they age. Deputy Social Security Commissioner Glenn Sklar noted that the vast majority of disability claims are initially denied.

To qualify for benefits, people are supposed to have disabilities that prevent them from working and are expected to last at least a year or result in death.

According to Social Security data, there were errors in 22 percent of the cases

decided in 2011, Sklar said. He said some errors were procedural and did not necessarily result in incorrect decisions.

"The true wrong rate would be less than 10 percent," Sklar said.

Nearly 11 million disabled workers, spouses and children get Social Security disability benefits. That compares with 7.6 million a decade ago. The average monthly benefit for a disabled worker is \$1,130.

An additional 8.3 million people get Supplemental Security Income, a separately funded disability program for low-income people.

Social Security disability claims are first processed through a network of local Social Security Administration field offices and state agencies called Disability

Determination Services. About two-thirds of initial claims are rejected, according to agency statistics.

If your claim is rejected, you can ask the field office or state agency to reconsider. If your claim is rejected again, you can appeal to an administrative law judge, who is employed by Social Security.

In 2007, the average processing time for a hearing was 512 days. Today it is 375 days, Sklar said. The agency has reduced the wait time even as the number of applications has increased.

But the judges who testified recently said the quality of their decisions has suffered.

JUDGES page 23

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## ► Care

Cont. from page 19

means “we will not experience the same (influx of newly insured patients) in Vermont as in other states that have very high rates of uninsured people or low Medicaid eligibility,” said Mark Larson, commissioner of the Vermont Department of Health Access.

Medical schools in New England, including the University of Vermont College of Medicine and the University of Massachusetts Medical School, have increased their emphasis on educating doctors for primary care in recent years, officials said. Vermont and New Hampshire augment a federal program that offers partial loan forgiveness for doctors willing to work in under-served areas with a similar state program.

In rural northern New Hampshire, Edward Shanshala, executive director of Ammonoosuc Community Health Services, said he tries to use the lifestyle as a lure when recruiting new doctors. “If you like to hike, bike, ski, fish and things like that — great,” he said.

Doctors also have time to see more patients because physician’s assistants and nurses deliver some basic care to patients, said Brian Rosman of the Boston-based consumer group Health Care for All.

“The goal is to have everybody working at the top of their license,” Rosman said. “Doctors should do things that really need doctors.”

Even in New England, though, the picture is “far from rosy,” said Dr. Joseph Gravel, president of the Massachusetts Academy of Family Physicians. Starting family physicians at his Lawrence office make \$130,000 a year; specialists can make three or four times that much, Gravel said. With many new doctors facing student loan debts in the hundreds of thousands of dollars, the incentives are clear.

A physician workforce study by the Massachusetts Medical Society (MMS) reported that even a state ranking third in primary care doctors per capita had experienced a shortage for eight consecutive

years. Half of all primary care physicians were not accepting new patients, with others reporting long wait times.

MMS spokesman Rick Gulla said the per-capita numbers may overstate access. “Many physicians in the state are teaching, doing research or other activities. Some of those physicians only see patients a day a month, and this also affects patient access to care.”

And the need for care is increasing, too, as the general population ages. Maine has the nation’s highest median age; Vermont is second.

“It seems like not only is Maine’s general population aging, but a significant percentage of primary care practitioners is also getting to an age of retirement,” said Vanessa Santarelli, CEO of the Maine Primary Care Association, which promotes and supports 20 federally qualified health centers across the state.

And sometimes the hiking, skiing and fishing just aren’t big enough attractions, Shanshala said. He described some of the lengths to which he’s gone to recruit physicians. When doctors in training leave after brief stints, he invites them to return for the company picnic and tries to keep in touch in case they ever want to come back.

Still, the picture New England is better than elsewhere, Gravel said. He cited a 2007 report in the *Journal of the American Medical Association* saying that among new medical school graduates just beginning their residencies, just 3.3 percent nationwide were going into family practice.

Strong support from the community and from Vermont’s political leadership were among the chief satisfactions of Matthew’s 40-plus-year career, he said. Good primary care leads to good overall health, he said, noting Vermont has been ranked the healthiest state for several years running — six, according to the United Health Foundation. — AP

AP writers Holly Ramer in Concord, N.H., and David Sharp in Portland, Maine, contributed to this report.

which there is very little incentive to deny claims, but lots of pressure to approve them. It requires more documentation to deny a claim than to approve one, said Sullivan, the former Social Security judge. Also, rejected claims can be appealed while approved claims are not.

If Congress doesn’t act, the trust fund that supports Social Security disability will run out of money in 2016, according to projections by Social Security’s trustees. At that point, the system will collect only enough money in payroll taxes to pay 80 percent of benefits, triggering an automatic 20 percent cut in benefits.

Congress could redirect money from Social Security’s much bigger retirement program to shore up the disability program, as it did in 1994. But that would worsen the finances of the retirement program, which is facing its own long-term financial problems. — AP

## ► Judges

Cont. from page 22

So far this budget year, the vast majority of judges have approved benefits in more than half the cases they’ve decided, even though they were reviewing applications typically rejected twice by state agencies, according to Social Security data.

Of the 1,560 judges who have decided at least 50 cases since October, 195 judges approved benefits in at least 75 percent of their cases, according to the data analyzed by congressional investigators.

None of the judges who testified spoke of being specifically ordered to award claims. Three said they had been pressured to decide cases without fully reviewing medical files.

The judges described a system in



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# Program teaches seniors how to use the Internet

By Tara Bahrapour

WASHINGTON —

Sitting in the basement of Shiloh Baptist Church in Northwest on a Monday morning, Alice Jones placed her weathered hands on the sleek iPad as if it were a magical portal to another planet.

To the 75-year-old retired hospital worker, it was.

"I need to be out in this new world of pushing buttons," said Jones, one of 50 District residents who received iPads recently, the start of a pilot program to distribute the devices to seniors who are at risk of isolation and depression.

The program is aimed at the tech-uninitiated, like Jones — who doesn't use ATMs for fear they will eat her card. "I've got to get computerized," she said with a chuckle, and nine other seniors seated near her nodded. "What's that Google? I want to find out about this Google stuff."

The \$250,000 pilot, which will bring iPads, computer training and home Internet service to 100 seniors over the next year, is a program of the AARP Foundation, an AARP-affiliated charity, and is being administered in the city by Family Matters of Greater Washington, a social-services organization.

The initial recipients, most of whom live in Ward 2, will attend classes twice a week for six months to learn how to use the Internet, Skype, email and social-media platforms such as Facebook. Fifty more began classes in July. Comcast is providing discounted Internet service, and Netgear is donating modems.

The goal of the program is to combat the isolation that can set in as seniors retire and their close friends and family members die, lose touch or move away.

Isolation is an "unrecognized crisis among seniors," said Tom Kamber, executive director at Older Adults Technology Services, which developed the program and is training its volunteer instructors. "A lot of older people feel, in the digital age, that they are not relevant or included."

A 2012 study by the European Centre for Social Welfare

Policy and Research, affiliated with the United Nations, found that Internet use increases social connections, both online and face to face, among people 65 and older. And a Pew Research Center study found that last year, for the first time, more than half (53 percent) of people 65 and older were online.

Understanding the mysteries of the Internet can lift a veil dividing generations, Kamber said. "What happens when someone gets an iPad in their hands? They think, 'I felt like things were passing me by, and now I feel like I'm part of it.'"

In the District, the program selected low-income seniors at high risk of being disconnected from friends and family, said Najeeb Uddin, the AARP Foundation's vice president of technology.

"We're targeting people on the verge of being isolated and depressed. Their spouse might have passed away," he said. "It's about connecting to the community. It just happens to be that we're using technology to do it."

Participants, whose levels of isolation were assessed at the beginning of the program, will be reassessed after six months using an evaluation developed by Cornell University. If positive changes are reported, the program will be expanded on a national level, an AARP spokeswoman said. The foundation is also considering launching a similar six-month pilot in Sioux Falls, S.D., targeting rural seniors.

At an ice cream social to kick off the program, seniors took notes in careful cursive. Not a smartphone was seen among them.

Bertha Grant, 83, who lives alone in a senior citizens building in Ward 6, said she had never used the Internet.

"I didn't have any use for it," she said. "I figured at my age, I was too old."

William Goode, 72, a professional caddie wearing a bow

tie and straw hat, agreed. "Why would I think I would ever need it?" he said.

But Goode is an artist, and Ali Muhammad, one of the trainers, pointed out that he could create a website for his art.

"Now why would I want to create my own website?" Goode asked.

"So people, without coming to your house, they can see your work," Muhammad said, and Goode nodded in approval.

Thelma Pugh, who declined to give her age, said she wanted to learn how to "load some tunes."

"I see people walking around," she said, putting her fingers to her ears and pantomiming a person rocking out. "I want to hear what they're listening to."

Sitting in the classroom as the instructor showed the class how to take photos of each other, Charles Triggs said that when his marriage broke up six or seven years ago, his access to a computer also dissipated.

"I left it with her," said Triggs, a 66-year-old resident of Ward 2. "I just feel left out. They say, 'Contact us on such-and-such-dot-com.' I can't do that."

With his iPad, he said, "I won't feel left out any more. I'll be part of the world again."

The seniors, born in the 1920s, '30s and '40s, said they have had to get used to a lot of changes since they were young. Like not being able to find a pay phone on every corner. Like seeing people walk down the street with wires trailing from their heads, looking like lunatics talking to themselves.

But a few had already begun to venture into connectivity. Sterling Patrick, 66, who had a little experience with texting, offered his classmates some tips.

"Like if you want to say, 'I love you'; you write, 'I love' and the letter U." — AP



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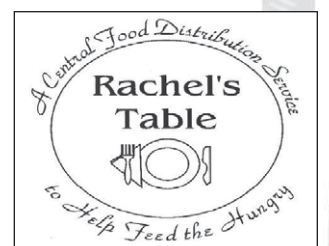
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## Summer can inspire decor all year

By Melissa Rayworth

**T**he sun-drenched colors and inviting textures of summer provide plenty of decorating ideas. The trick is doing it right.

But with a light touch and strategic choices, your home can be brightened all year long by the fleeting beauty of summer.

Above all, "do not be literal with summer," said Los Angeles-based designer Betsy Burnham. Avoid putting up a sign that says, "Gone Fishin'" or displaying a collection of seashells on a table, she said.

Instead, try examining the colors inside a handful of shells, then decorating a room in those shades. Or upholster one piece of furniture in crisp, summery linen, rather than slipcovering an entire room that way.

Designer Joe Lucas of Lucas Studio in West Hollywood, Calif., agrees. A mix of sand-colored paint and ocean blue fabrics can be a tasteful reminder of summers by the shore.

Here, Burnham, Lucas and decorde-mon.com founder Brian Patrick Flynn offer tips on successfully using summer as your design inspiration.

"Summery interiors are best described as relaxed," Flynn said. "While autumnal

and wintry spaces are packed with rich velvets and earthy palettes, summery spaces are super-light, unstructured and pretty darn casual."

Flynn uses deliberate contrast to point up that casual feeling: "I like to juxtapose super-relaxed elements such as slipcovers or bedding made from washed linen with super-tailored elements such as tailored tartan or pinstripe accents. The result is preppy, but still casual."

One option is a palette of muted summer colors (sandy beiges, soft driftwood grays, nautical blues), which can be used throughout a room without overpowering it.

Lucas is a fan of very pale gray wall colors that include just a hint of green or blue. They look great alongside natural, pale wood furniture.

Flynn recommends "washed-out blue" wall colors, such as "Krypton" by Sherwin-Williams or "Drenched Rain" by Dunn-Edwards. "Blues with the perfect amount of gray in them tend to be timeless and also work as 'new neutrals' — colors with tons of personality which tend to work well with almost every other hue out there."

These muted blues pair beautifully

with white, he said: "The mix of blue and white together is totally timeless, plus it can be mixed up in many different ways to update the look. Almost all colors accent blue and white well."



The other summery option is to go vivid, using grassy greens, geranium reds, deep corals and the teal of tropical waters. Done right, these colors can elevate the look of a room.

"I'm a huge fan of teal and coral," Flynn said. "I especially love them together, since it strikes the perfect balance of feminine and masculine."

But tread carefully. To balance out these saturated colors, Burnham suggests bringing in plenty of crisp white.

"People always think that they have

to have their wood finished in a stain," Burnham said. "Why not a painted finish? Paint your bookcases white... It's summery, but livable year-round. Or try painting a floor somewhere in your

house, like a guest room floor." Lucas agrees: "We're always pushing clients to paint out their dark cabinets," he said. "Everyone thinks their library has to be stained a rich mahogany or dark walnut," but there are better approaches. "Paint it an off-blue-grey or lacquer it a fun, brighter color."

"I use tons of linen in summer-inspired spaces, as well as cotton and textured wovens," Flynn said. Also, he said, "sea grass and sisal are other summery textures which will never go out of style."

The key with these materials, said Burnham, is moderation. Materials like rope or weathered wood are great "as long as you don't have a room full of any of those items. One sisal carpet, a rattan chair or a rattan seat on a wood chair," is all you need, said Burnham.

Also, "glass is summery," she said, "but not cut glass. Just simple, New England looking pieces."

Lucas points out that grasscloth is also both summery and stylish. — AP

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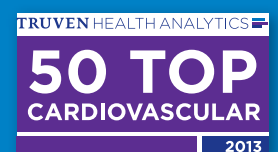
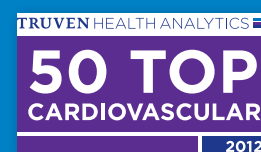


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