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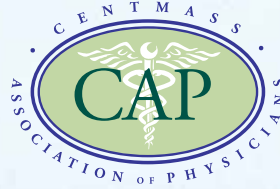
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Athletic challenges: An attainable goal at any age

By Brian Goslow

Deb Kranich Riel, 58, of Worcester, paddles her whitewater canoe year-round in the waters of New England and Ontario. When she's not in the water, she's out with her "living treadmill," a Plott Hound named Trigger, walking several times a day.

Marty Ayotte, an "incomplete paraplegic," prepared for his 60th birthday putting in 50 miles of roadwork in his hand-powered cycle. The Worcester resident is now preparing for a fresh season of skiing



Ayotte

on a seat ski at Wachusett Mountain.

Charlie Erban, 71, of Andover, plays racquetball three hours a week; he recently finished fifth in the 70+ singles competition and fourth in the 65+ age group in the doubles competition at the National Senior Games in Cleveland.

Ann Hicks, 80, of Needham, continually practices for track and field events — the shot put, javelin, discus and hammer throw — a decline from the 11 she used to regularly participate in through most of the past two decades. Despite missing this year's national competition due to injury, she's got her eye on several world records for her age group.

All four are examples of people living healthy, active lifestyles. While everyone can't be expected to be as competitive as they are, that doesn't mean there aren't ways to get long underused muscles back into shape en route to changing one's health and body for the better.

"If you don't use it you will lose it," said Michael J. Cooney, D.C., of the Rutherford Allied Medical Group and Calmare Therapy Pain Relief Center in Rutherford, N.J. "Keeping fit is a necessity to ensure a better quality of life. Sports and other physical activities enable the body and mind to rebuild and repair itself."

Erban and Hicks participated in the Massachusetts Senior Games, an athletic competition for men and women ages 40 years and up to face off annually in summer and winter sports; every two years, its top finishers in each sport move on to the National Senior Games.

While the Mass Games, which began in 1991, feature all of the traditional track and field events, managing director Larry Libow is looking to expand to newer competitions to attract a wider range of participants. Many of the current athletes are as highly competitive as they were in their younger days, which can be a challenge in trying to get more casual athletes involved.

"I'm trying to bring activities that will get people off of their couch," Libow said. The rapidly expanding sport of Pickleball is one of those activities. Played on a court laid out identically to a tennis court but approximately a third of the size, participants use paddles and a hard Wiffle ball-like ball with holes in it.

"Basically, it allows older folks to play what is essentially a game of tennis (both singles and doubles), but without having to worry about covering so much court," Libow said. New facilities for the sport are opening up throughout the region, especially on Cape Cod.

Libow also is trying to get a grandparent-grandchild day going at Wachusett Mountain — "Maybe both will learn to ski on the same day" — and establish a ballroom dancing competition, Libow said. "If we can get 25 couples to get up on the



Riel

dance floor, that would be great."

He said he's working hard to increase his organization's educational programs and fitness activities because the demographics say the number of older adults in the state is going to sky rocket in the years ahead. "We're trying to get ready for that demographic shift," Libow said.

Racquetball player Erban has been involved with the Massachusetts Senior Games for 15 years, and has participated in five National Senior Games. "The experience has been extremely positive," he said. "You meet a lot of nice people working out having lots of fun."

As of late, he's been getting in three hours of court time a week at a club in Foxborough. "The workout level should be two or three times a week to maintain your skill level, but I've been looking after my dad," Erban said. "My health, fortunately, has been excellent."

When he can't make it to the court, he keeps fit by doing leg lifts and in the sum-

mer, he puts in 10 to 15 miles on his road bike two or three times a week.

Erban has tried to encourage his friends to be more active. "Most people in their 70s, if they haven't been doing anything rigorous, it's hard to get them into it," he said. "They don't start unless they have a (health) problem (they need to address). Otherwise, they're not going to get started."

In multi-sport athlete Hicks' case, she knows herself well enough not to stop, even though she's battling arthritis. "My exercising keeps me pain free," she said. "Sometimes

when I've done too much gardening or too much training for one day, I might take some Ibuprofen at night. If I don't move, I get very stiff. That's one of the reasons I compete — by doing all these different events, I use all these different muscles and joints."

Hicks recently suffered a temporary setback when she tripped in her new sneakers, resulting in a broken elbow that caused her to miss the National Senior Games for the first time in over two decades. It was a major disappointment for her as it would have been her first in the 80-84-age bracket in which she was striving to break several world records. She plans to try again in two years, but recognizes she's up against the statistic that most people at her age lose 10 percent of their skill level each year.

But Hicks is not most people. "I love competition," she said. She earned her first

ATHLETIC page 16

ActiveRX Active Aging Center opens in Westborough

Not everyone is cut out for intense competition, but everyone should stay active. An ActiveRX Active Aging Center recently opened in Westborough. Unlike many health clubs and gyms where members sign up and utilize the facilities as they choose, ActiveRX, which targets individuals 60 and older, creates custom-designed programs tailored to each member's comfort level and most "optimal path to active aging" based on their risk for injuries and falling and specific areas of weakness.

"The whole focus is to help seniors recover and in some cases, preserve — they haven't really lost all that much yet, but some folks have — their strength," said Paul Reilly, owner and managing director of ActiveRX Westborough, which utilizes a combination of strength and physical therapy.

"Sometimes the folks have been de-conditioned or have not had a lot of activity or

have injuries or prior conditions that can impede them from fully taking advantage of the strength therapy program."

How long it takes for someone who's not in good shape to attain a healthier, active lifestyle depends on each person and whether there are confounding chronic conditions involved. "What we're finding is that somebody that participates in our strength therapy program will regain about 10 years of their strength in three to four months," Reilly said. "In terms of the recovering of function and basic strength, it's not a huge timeline of years of labor and intense activity to get back what they lost. They regain their strength pretty quickly."

Before people begin the ActiveRX program, they need their doctor's consent, as many people age 60 and older have multiple conditions and special needs. "Our

strength therapy is focused on a holistic, tough nose-to-toes strengthening program,"

Reilly said. "They do some weight lifting, but it's not what most people in their minds conjure as strength training in the sense of football players moving barbells around. It's nothing like that."

The facility has received positive response from doctors and caregivers. "They're thrilled (to see their patients engaged in physical activity)," Reilly said. So are Medicare and health care insurance providers. "They realize if they could get even a small proportion of their members to engage in what we're offering and what we can do to help them, that'll immeasurably improve their bottom line. So much is spent on these chronic conditions and end-stage care which really could be alleviated through pro-active programs like what we're doing."

— BY BRIAN GOSLOW



Reilly

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Read more at www.fiftyplusadvocate.com

Advertisers beginning to woo aging market

By Sondra Shapiro

Our parents looked forward to living their golden years, a stage of life defined as retirement and less responsibility.

When it comes to those who control advertising budgets, the term, "golden years" has a very different connotation when referring to us boomers. Our 78 million demographic is worth its weight in gold — \$15 trillion in global buying power by the end of this decade.



Just My Opinion

Traditionally, marketers have shied away from targeting older consumers, assuming the age group was brand loyal and unswayable by new products.

But the statistics are difficult for marketers to ignore. Baby boomers are just 44 percent of the population, but represent nearly 83 percent of consumer spending power in the United States. In less than five years, half of the nation's adult population will be 50 and older.

We spend money online and dominate in nearly all consumer product goods categories, according to marketingcharts.com.

According to *Bloomberg*, we watch 174 hours of television a month, 63 percent more than millennials, the 18-to-34 year-old age group. Yet for years advertisers have wooed the 18-49 age group.

And in 2011, the peak age of vehicle buyers shifted up from 35-44 to 55-64. More than half of us are on Facebook. So, there's a treasure trove of advertising potential here.

Boomers don't want to just spend money on the things they need; we have the dollars and the desire to splurge on the things we want, according to a report in *Bloomberg*.

We are different than our parents or at least we like to think we are different. Our demographic disdains the cookie cutter concept. We prefer to break the mold and have been doing so with each life stage. From our youth to adulthood and now to our "golden years," the only thing predictable about us is our unpredictability.

Tapping into our desires is especially challenging. Yet trying to understand us is the admirable goal of the Live Well Collaborative (LWC) — comprised of University of Cincinnati students and faculty and corporations. Boasting participants such as Procter and Gamble Co., General Mills, Boeing and Pfizer, LWC has been meeting since 2007 to research ideas and develop products for America's aging population.

LWC has completed dozens of studies that include airplane boarding and understanding the future traveler; geriatric medical form redesigns; hospital gown redesign; and how the physical infirmities of age make it difficult to handle various products.

So far the task is easier said than done, since not one new product has been commercially marketed. The big challenge?

The boomer demographic doesn't have a one-size-fits-all profile. Not to mention that our age-phobic proclivities make it difficult to sell us products that we may need but not want. After all, what boomer wants to be associated with adult diapers or false teeth adhesive? Contrary to traditional marketing assumptions about boomers, our interests transcend youth-enhancing products and services. We are not that one dimensional.

The "golden age" for us, is much different than that of our parents in every way possible.

We spend money differently. While our parents were more frugal, we are spend-thrifts.

While our parents spoiled their grandchildren, we indulge our pets.

We may need mobility aids and denture cream, but we require a different message when selling to us. While previous campaigns marketed to our parents embraced the morbid implications of aging, we need a positive spin to convince us.

While our parents are challenged and baffled by evolving technology, we boomers are technologically able and willing to buy the latest gadget. If there is any doubt, just ask my friends who couldn't wait to upload the newly-released system 7.0 to their iPhones and iPads. And, by the way, I'm not talking about younger boomers. This group is comprised of 60-year-olds..

While our parents prefer to shop brick and mortar, we eschew the mall for online shopping. Groupon, Gilt and Amazon are popular sites visited among my friends.

For the first time in recent memory, older folks' buying habits are more similar to those of their children than to their parents'.

Even the traditional preferred television demographic has been revised. As far back as 2003, more than 1,000 media professionals from ad agencies and buying firms participated in a study that found the preferred age demographic has inched up to 25-54.

The study, conducted by Insight Express in partnership with MediaPost, found that the 35-64 age demographic was tied with the 18-34 demographic in terms of advertiser appeal. Finally, a statistic that backs up the spending habits of this television-addicted boomer.

So while advertisers are starting to take a first look, they and product developers need to learn how to capture us. For a product to be successful, it must tap into our emotions in a positive way. It seems impossible to come up with a product or market plan that sells us something we need, without making us feel old about needing it. Yikes, it sounds impossible even to my baby boomer ears.

That's why LWC It is still looking for our sweet spot — discovering our unmet, unspoken needs. Compounding the challenge is marketing research is starting late in the game, so now it's playing catch up. The aging market was mostly stereotyped and ignored for years by youth-obsessed advertisers and product developers. Then one day this massive demographic became old and the same neglect and preconceived notions were applied to us as

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November 1, 2013 www.fiftyplusadvocate.com

Social Security helps keep the economy healthy and vibrant

By Michael E. Festa

There's been a lot of talk about Social Security, but one thing that hasn't come up in the conversation is the vital role it plays as an engine of the U.S. economy.

Social Security benefits keep millions of families afloat and help middle-class workers stay independent after decades of labor. But there's more: Those payments also fuel a vast amount of economic activity in Massachusetts and throughout the nation, providing a little-noted economic benefit that helps us all.

In fact, Social Security's \$762 billion



AARP and You

in benefits sparked almost \$1.4 trillion in total spending last year, according to a new analysis by AARP's Public Policy Institute — \$30.4 billion in Massachusetts alone. Individuals used their benefits on a wide range of goods and services, boosting sales for local retailers, small business and big corporations.

Social Security's economic contribution didn't end there.

After consumers spent their money, businesses spent it once again, using it to finance jobs and make purchases and investments. In other words, the cash continued to ripple through the economy in a tremendous 'multiplier effect' that enriched all kinds of enterprises.

Some of that revenue even paid for public services, in the form of local and state tax revenues — \$1.8 million in the commonwealth.

Overall, the AARP study found that each dollar in Social Security benefits generates about \$2 in spending. Social Security also helps younger people in ways that rarely get attention. For example, Social Security benefits support 190,000 jobs in the Bay State. At a time of weak job creation, that's an economic benefit worth applauding.

The fact is our nation needs a serious conversation about the future of Social Security — not just for today's retirees but also for generations to come. Social Security is more essential than ever, as a growing number of older Americans struggle to stay financially secure in a weak job market, with meager saving and no employer pension to help with the monthly bills.

We already knew that Social Security accounts for about half the income of typical seniors, and substantially more

than that for millions. But AARP's analysis shows that Social Security helps everyone, whether you personally get a benefit or do not — yet.

The numbers illustrate, dramatically, that cutbacks to the program could have negative consequences for individuals, businesses and the entire economy. They underscore the importance of decisions to be made in Washington about how best to address Social Security's finances and keep the program strong.

The critical value of Social Security to our economy is one more reason that AARP is calling for a national conversation on the future of this vital program. We urge members of Congress to keep these new economic findings in mind when they engage in this crucial debate.

The stakes are enormous — for all of us.

For more information, visit www.earnedasay.org or www.aarp.org/ma.

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, www.facebook.com/AARPMA and www.twitter.com/AARPMA.

Retirees are the big losers in debt ceiling debate

By Al Norman

Some members of Congress have been playing fast and loose with your money.

I'm not talking about lawmakers going on a spending spree. I'm referring to the debate over the federal debt ceiling — something that every retiree and near-retiree should be upset about.



Push Back

In late September, U.S. Treasury Secretary Jack Lew started warning the media that, "If we have insufficient cash on hand, it would be impossible for the United States of America to meet all of its obligations for the first time in our history."

Republicans in the U.S. House of Representatives were equally adamant that they would not vote to raise the

debt ceiling unless Congress defunded Obamacare — the only federal health law that protects Americans from being denied health insurance due to a pre-existing condition.

The U.S. Treasury processes about 80 million payments a month. Secretary Lew said that by mid-October, if Congress hadn't raised the borrowing limit, Treasury would not be able to pay the bills just with the cash it has on hand. Bills like IRS refunds, Social Security checks, Medicare payments, etc.

The Congressional Budget Office projected that the U.S. Treasury would run out of cash to pay its bills sometime between Oct. 22 and Oct. 31. How's that for a Halloween scare?

President Obama wanted the debt ceiling raised — not so that Congress could spend more — but so the nation could pay the bills it's already incurred, based on budgets already passed.

Republican Congressmen saw the debt ceiling debate as a political opportunity to bring down the ceiling on

Obamacare. But here's why every middle class American should have hit the ceiling when they saw this Republican gambit:

In August 2011, when Congress was in another debt ceiling face-off with the White House, Standard & Poor's downgraded America's credit rating. U.S. stocks slid by 6 percent that month alone. That's a financial hit for everyone investing in an IRA or for everyone relying on a mutual fund or annuity for his or her retirement. With employer pensions almost non-existent, millions of workers have had to turn to their own meager savings as their only add-on to Social Security. Anything that knowingly hurts such investments is an attack on retirees.

"The market is vulnerable to negative news," one stock analyst fretted. "You have the market watching dysfunction in Washington in real-time..." Investors start to pull back, nervous that Congress won't be able to cross the debt-ceiling divide, and will toss the U.S. government over the cliff.

People in retirement, or near retire-

ment, watch helplessly while their IRA monthly statement head south, costing them thousands of dollars in losses. All because some Congressmen want to cripple President Obama's legislative cornerstone.

Seniors have good reason to be seething over the House Republican strategy. Your retirement savings are being put on the line for members in Congress to score political points.

Clip this column and mail it to your Massachusetts Congressman and Sens. Markey and Warren. Let them know you're fed up with House Republicans savaging your personal savings with all this talk of defaulting on the federal debt — Because you know this is going to keep coming up year after year. Let your representatives know that it is middle class retirees who will pay the price financially for this political game of hostage.

Al Norman is the executive director of Mass Home Care. He can be reached at info@masshomecare.org or at 978-502-3794.

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► Advertisers

Cont. from page 8

they were to our parents' generation. Let's not even begin to talk about the ways in which our parents got short shrifted by Madison Avenue.

"I have been in meetings where I ask Fortune 500 CEOs what they would do about this market, and often their minds jump to assisted-living devices for dementia or grab bars for showers," said Ken Dychtwald, who runs a consultancy called Age Wave. "They don't think of Lexus convertibles. They don't think of Amazon. They should," he said in a Bloomberg report.

We have a complicated collective psy-

che that makes it difficult for companies to successfully meet our desires. Marketing to a stereotype doesn't cut it. It takes more. But we are more than worth it.

So as boomers have done with every phase of life, we are once again challenging the status quo, this time in terms of negative aging stereotypes. While brandishing our credit cards might not be the best way to change attitudes, if it takes spending a bit of gold to make them take us seriously, so be it.

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

Living room shows: An old idea is new again

By Colleen Newwine

Greg Ching met his wife, Deborah, listening to musicians play in a San Francisco living room. They bought their home near Nederland, Colo., with an eye toward hosting live musical performances.

Since then, Ching has become so committed to his 14-year-old series, Aspen Meadows House Concerts, that he welcomed one performer in September even as Colorado's flooding knocked out his phone and sent 8 inches of water into his basement.

Years before, he held another "living room show" while a wildfire burned nearby. And he spent about two years and \$20,000 in legal fees defending his right to organize private concerts; in 2008, Boulder County commissioners regulated home gatherings, limiting attendance, frequency and hours in response to concerns about running a business or creating noise.

"These living room shows are a way of bringing people together," Ching said, explaining why he didn't give up in the face of fire, flooding or government regulation.



A concert given by Your Own Home

"It's something about the human spirit. It's very healing."

Enjoying live music at home is nothing new. For some, it harks back to the humble notion of friends singing and playing instruments together before the days of recorded music and radio. For others, it calls to mind Europe's legendary salons, filled with writers, artists and musicians.

Today, the living room show lives on, and for many musicians, it's become an important way to connect with fans and supplement income. Hosts don't charge admission as a business would, but can suggest that guests make a donation of perhaps \$10 or \$15 to pay the musicians. Living room show hosts typically give all proceeds to the performers.

I got hooked on living room shows when my husband threw me a surprise 40th birthday party with a three-piece jazz band in our Brooklyn, N.Y., apartment. Since then, we've hosted or co-hosted a variety of performers, including Helen Gillet, a cellist and singer who describes house concerts as having an

SHOWS page 22

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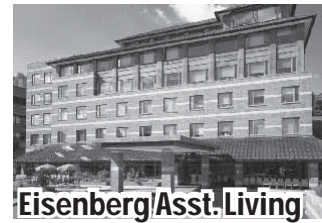
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Memory decline may be earliest sign of dementia

By Marilyn Marchione

Memory problems that are often dismissed as a normal part of aging may not be so harmless after all. Noticing you have had a decline beyond the occasional misplaced car keys or forgotten name could be the very earliest sign of Alzheimer's, several research teams are reporting.

Doctors often regard people who complain that their memory is slipping as "the worried well," but the new studies show they may well have reason to worry, said Maria Carrillo, a senior scientist at the Alzheimer's Association.

One study found that self-reported memory changes preceded broader mental decline by about six years. Another tied these changes to evidence on brain scans that dementia is setting in.

"Maybe these people know something about themselves" that their doctors don't, "and maybe we should pay attention to them," said Dorene Rentz, a Massachusetts General Hospital psychologist. She helped run one of the studies.

About 35 million people worldwide have dementia, and Alzheimer's disease is the most common type. It causes a slow decline in thinking and reasoning ability. Memory trouble that disrupts daily life is one symptom.

Don't panic, though: The researchers are not talking about "senior moments," those small, temporary lapses most everyone has, said Creighton Phelps, a neuroscientist with the U.S. National Institute on Aging. They are talking about real memory loss, in which the information doesn't come back to you later, not even when people remind you of what you forgot, he explained.

A true decline is a change in your normal pattern. "You're starting to forget things now that you normally didn't — doctor appointments, luncheon engagements, the kids are coming over ... things that a year or two ago you wouldn't," said Dr. Ronald Petersen, director of the Mayo Clinic's Alzheimer's Disease Research Center.

Pati Hoffman, of Carol Stream, Ill., near Chicago, used to design menus and organize events for restaurants but began

forgetting where she filed things in her computer.

"I really just kind of started struggling. Something wasn't right. I would have to bring my work home, spread it all over the floor, sort it and then try to get it done so that nobody at work would know I was having this difficulty," she said. Driving to familiar places, "I would think, 'I know where I am, but I don't know how to get out of here.'"

Two neurologists said it was just stress and anxiety, and one prescribed an antidepressant. A third finally diagnosed her with early-onset Alzheimer's disease four years ago. She was 56.

The new studies were on "subjective

cognitive decline" — when people first notice they are having trouble, even if they test normal on mental ability tests:

•Richard Kryscio at the University of Kentucky led a study of 531 people with an average age of 73. Those who reported a change in memory or thinking abilities since their last doctor visit were nearly twice as likely to be diagnosed with dementia or mild cognitive impairment about six to nine years later.

•Researchers from the French government's health agency and Brigham and Women's Hospital in Boston studied 3,861 nurses at least 70 years old who were asked

MEMORY page 12

How to tell signs of dementia from normal aging

By Marilyn Marchione

New studies suggest that noticing you are having memory or thinking problems could be the earliest sign of Alzheimer's disease. The Alzheimer's Association lists these 10 warning signs, plus advice on how to tell them from normal age-related changes:

•Memory changes that disrupt daily life. Forgetting important dates or events, asking for the same information over and over, relying more on reminder notes and other memory aids. Normal aging:

Sometimes forgetting names or appointments but remembering them later.

•Challenges in planning or solving problems. Changes in ability to work with numbers, follow a recipe, track bills. Normal aging: Occasional mistakes when balancing a checkbook.

•Difficulty completing familiar tasks. Trouble driving somewhere familiar, managing a budget at work, remembering rules of a game. Normal aging: Occasionally needing help with settings

SIGNS page 12

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Getting your eyes in better shape

By Dr. Jean E. Keamy

Laser-assisted in situ keratomileusis (LASIK) is the surgical procedure that uses a laser to reshape the corneas of individuals with refractive errors.

The cornea is targeted because it is the primary focusing structure of the eye. In nearsighted individuals, the cornea is too steeply curved or the eye is too long from front to back for an image to focus clearly on the retina. In farsighted patients, the cornea is too flat or the eye is too short for the image



Vision Quest

to focus clearly on the retina. Astigmatism refers to an ovoid shape of the cornea that distorts vision.

To correct these problems, LASIK involves making a thin, hinged flap to expose the second layer of the cornea. The latest technology involves using a femtosecond laser to create the flap. Beneath the flap, the excimer laser removes sufficient tissue or reshapes it to correct the refractive error. The flap is then set back into place so patients can recover quickly and enjoy corrected vision.

LASIK does not address the decreasing flexibility of the eye's lens that affects everyone as they age. LASIK cannot prevent the need for reading glasses in the future. Monovision LASIK can help some patients. It involves making one eye see near and the other distance. Many patients enjoy this option.

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. Archives of articles from previous issues can be read on fiftyplusadvocate.com.

► Memory

Cont. from page 10

about memory symptoms and periodically tested for them later. About 900 of them carried a gene that raises their risk for dementia. Among the gene carriers, worry about a single memory symptom predicted verbal memory decline on tests over the next six years. In the others without the gene, worry about three or more memory symptoms was linked to memory decline on tests.

•Rebecca Amariglio and other Harvard researchers found that complaints about memory decline matched how much sticky plaque researchers saw on brain scans of 189 people 65 and older. This confirms an earlier study of 131 people that tied memory complaints to these brain plaques, the hallmark of Alzheimer's disease.

•Reports of memory impairment were

closely tied to a decline later in the ability to recall events in a study of 2,230 people, average age 80, by researchers at the University of Bonn in Germany.

•Petersen said that a study he and others soon will report shows that complaints about memory predicted who would later develop mild cognitive impairment — what used to be called “pre-Alzheimer's” — in a random sample of 1,500 people in the community near the Mayo Clinic in Rochester, Minn.

“If you notice a change in your pattern of either yourself or a loved one, seek a health care professional's evaluation,” said Heather Snyder, the Alzheimer's Association's director of medical and scientific operations. “It could be a lack of sleep or nutritional, but it may be something more than that.”

But don't worry about small, common memory slips, said Dr. Reisa Sperling, director of the Alzheimer's center at

Brigham and Women's Hospital.

“Every time you forget someone's name,

you don't need to go running to the doctor,” she said. — AP

► Signs

Cont. from page 10

on a microwave or to record a TV show.

•Confusion with time or place. Losing track of dates or seasons; forgetting where they are or how they got there. Normal aging: Getting confused about the day of the week but figuring it out later.

•Trouble understanding visual images and spatial relationships. Difficulty reading, judging distance, determining color. Normal aging: Vision changes from cataracts.

•New problems with words in speaking or writing. Trouble following or joining a conversation, repeating themselves. Normal aging: Sometimes having trouble finding the right word.

•Misplacing things and losing the ability to retrace steps. Putting things in unusual places, losing things, accusing others of stealing. Normal aging: Occasionally misplacing things and retracing steps to find them.

•Decreased or poor judgment. Bad moves with money, less attention to grooming. Normal aging: Making a bad decision once in a while.

•Withdrawal from work or social activities. Normal aging: Sometimes feeling weary of work, family and social obligations.

•Changes in mood and personality. Becoming confused, suspicious, depressed, fearful or anxious. Normal aging: Developing specific ways of doing things and becoming irritable when a routine is disrupted. — AP

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By Victor Block

In Forge, PA — it is the fall of 1777, and General George Washington's army is reeling from a crushing defeat it suffered in Pennsylvania. Troops led by Sir William Howe, the commander of the British forces in North America, outmaneuvered Washington, won the Battles of Brandywine and Germantown, and occupied Philadelphia.

Seeking a winter haven for his disheartened soldiers, Washington settles on Whitemarsh, Pennsylvania. But because it is so close to Philadelphia, the troops are distracted and weakened by continual skirmishes.

Furthermore, the Pennsylvania colony's legislature has different ideas. It demands that the Continental Army wait out the frigid season in the countryside, yet close enough to Philadelphia to keep an eye on the enemy and be able to prevent a surprise attack.

Faced with this directive, Washington leads his ragtag troops to Valley Forge, an area of rolling meadows 18 miles from Philadelphia, which was named for an iron forge located along the banks of Valley Creek. As light snow falls on Dec. 19, what is left of the Continentals — 12,000 poorly fed, ill-equipped troops weary from battles and long marches — struggle to the place where they will spend the winter. Before the following spring, more than 2,000 of the soldiers will die.

No battles were fought at Valley Forge. Not a shot was fired at an enemy. Yet the 3,600-acre setting may be the best-known site associated with the Revolutionary War. The struggle for survival in the face of hunger, disease and the bitter winter cold dramatically conveys the combination of courage and endurance that characterized the Colonials' battle for freedom.

Today, that story is depicted at the site's visitor center and encampment store by means of exhibits and a free film. In addition, an exhibit named "Determined to Persevere" uses rare artifacts, weapons and documents to tell the story of the encampment at Valley Forge. A trolley tour or self-guided drive through the park provides a very personal introduction to major sites and monuments.

Reconstructed earthen embankments, called redoubts, mark the lines of defense that General Washington established around the area. Throughout the park are about 50 soldiers' log huts, reconstructed according to Washington's original plans and orders, which represent approximately 1,000 huts that were built during the encampment. Interpreters in period dress demonstrate the harsh living con-

Valley Forge: Victory over despair

ditions that claimed many lives.

The Isaac Potts house, a stone structure that belonged to the owner of a gristmill, served as Washington's headquarters. Nearby are reconstructions of huts that housed the 150 men assigned to guard the commander in chief.

Most cannons at Valley Forge were massed in Artillery Park. There they were stored, repaired and kept ready for immediate dispatch in case of an attack by the British.

The grounds also are dotted by countless memorials, monuments and historic markers. But more than such symbols of places and events, the real story of Valley Forge is brought to life in other, even more meaningful ways.

Artifacts and military paraphernalia recall the victory of spirit over adversity. Copies of correspondence between the brave men who endured such hardship and the loved ones they left at home put a very human face on the suffering.

Clothing was inadequate, shoes were hard to come by and much-needed blankets were even scarcer. The 1,000 rough log huts, hastily erected to provide shelter for the troops from the bitter winter cold, provided little shelter indeed.

They were damp and overcrowded. Soldiers slept as best they could in narrow bunks that were stacked three high, 12 to a hut.

With icy winds whipping through cracks in the structures, and the troops jammed into confined quarters, waves

of typhus, pneumonia and other diseases ravaged the ranks.

In this bleak picture, the first ray of hope arrived in February 1778 in the person of Baron Friedrich von Steuben. A former member of the elite general staff of Frederick the Great of Prussia, this exacting drillmaster offered his services to the cause of the patriots.



A George Washington interpreter speaks to visitors at replica soldier huts.

Because there was no standard training manual for the American troops, the Prussian officer wrote one in French, which his aides translated into English. He chose and trained a cadre of 100 men, whose growing prowess at marching, musketry and bayonet charges became the model for the entire army.

By spring, a new feeling of hope and pride had begun to replace the atmosphere of despair. Following announcement of the colonies' alliance with France, the British forces hastily left Philadelphia and moved toward New York. It was a very different American army that pursued them.

The soldiers under Washington's command would not celebrate their final victory over the Redcoats until 1781 in Yorktown, but they had won another important battle. They had overcome the anguish that accompanied them to Valley Forge. They themselves had been forged into a fighting force with new skills, and an increased sense of confidence and pride that eventually would prevail.

The story of this transformation comes alive at Valley Forge, a place that saw not a single military victory but rather a conquest over the lack of confidence, weariness and uncertainty that had accompanied George Washington's army there during the winter of 1777-1778.

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► Athletic

Cont. from page 6

gold medal in 1991 and prior to this summer's accident, had qualified for and won two handfuls of medals in all her events at the National Senior Games each year she competed. "I've got my eye on next year," she said confidently. "I can do the local meets and still break the record."

While she has been a trail setter in her own right — helping to establish girls high school track and field and then gymnastics on a statewide level in the late 1950s — she now finds inspiration in other athletes she's seen at the National Senior Games.

"I've met a 100-year-old hammer thrower from Texas; he does the discus and he does the hammer and every time he throws it, he breaks his own world record," Hicks said. "I've seen grandmothers pushing their walkers; they've got first place ribbons in swimming hanging off their baskets."

Many of the patients of Nathan Wei, MD, a board-certified rheumatologist with more than 30 years of practice and clinical research experience based in Frederick, Md., continue to participate in sports well into their 90s.

"Aside from the medical benefits related to the heart, lowering body fat, etc., regular exercise retards the progression of sarcopenia, the muscle wasting that accompanies aging," Wei said. "Sports and exercise also increase endorphin output, which can mitigate pain as well as help a person feel better in general."

Wei noted that sports activities should be approached with the idea that an indi-

vidual needs to be "in shape" to participate. "That means a regular routine of exercise that incorporates low impact cardio, resistances and stretching," he said.

"Obviously, as patients get older there is a need to warm up and stretch both before and after a workout. This warm up and stretch routine is critical to avoiding injury. As people get older, they should also lessen the amount of high impact activity they do in favor of more low impact activities," Wei said.

Hand cyclist Ayotte gave himself a great 60th birthday gift Oct. 12 when he finished the Hartford Marathon in 2 hours, 20 minutes and 24 seconds, earning him third place in the wheelchair division. To prepare, he had "climbed" the challenging Worcester Airport hill twice.

Ayotte was diagnosed with a tumor on his spinal cord in January 1988 and had surgery to have it removed. The tumor was benign but led to a weakness that has left him an incomplete paraplegic. He was depressed and found it unsatisfactory to use a cane for any distance, but his life changed for the better after his then 8-year-old son made a discovery in the window of a Worcester sporting goods store.

"He comes running out to the car, yelling, 'Dad, Dad, you've got to see this thing,'" Ayotte recalled. It was a black handcycle put on display by a local handicap organization. "I walk in, I check it out and say to the guy, 'I need to get one of these to better my life.'" The store manager first had him test a hand-powered racing cycle, which proved difficult to use in getting around for regular living. The manager then replaced the racing cycle with a black cycle that has



Hicks

become Ayotte's trademark.

Since that time, he's been a familiar sight at events throughout the area. "The disability changed my life and the bike changed my life again," Ayotte said. "It made me more active." Along with the Hartford race, he has participated in the New York City Marathon. "There are a lot of people my age out there right now; we're just smarter now about our bodies and nutrition and everything. I just naturally want to be constructively active."

His athletic feats don't end when the weather turns cold; he can regularly be found on the slopes at Wachusett Mountain. "Skiing is the most fabulous, fantastic thing I have ever done in my life," Ayotte said. "I was attending the Wachusett Blues Festival one day and the director of their adaptive skier program saw me on that black hand cycle and said to me, 'You look pretty strong, you ought to try skiing.'"

While initially looking at the director as if he were nuts, Ayotte was soon convinced that the adaptive equipment at the facility would allow him to fit into a ski chair. "I

had never skied in my life," he said. "I go up with steel toe boots and a hoodie and it's like 10 degrees on the Bunny Hill. They put me in this sit ski and kind of pushed me down the hill a little bit. As I was going down I thought, 'This is for me — I have to figure out how to do this.'"

Since 2005, he's conquered a number of mountains. "When you're up on top of Loon Mountain or Bretton Woods — and I've been to a dozen or more ski areas in New England and one in Colorado — it's breathtaking."

Whitewater rafter Riel was attracted by the excitement of paddling the rapids in her canoe after going on a rafting trip with her family. "My significant other, Rod, and I decided to try a whitewater tandem canoe instructional weekend sponsored by the Appalachian Mountain Club," she said. "We were hooked."

The year she turned 50, Riel started canoeing solo. "There is a fairly steep and interesting learning curve where you become more comfortable reading the river, catching eddies and maneuvering around the rocky rivers, and always practicing self-rescue," she said. "It's a challenge on a lot of different levels."

Riel and Rod have a loose organization of paddling friends — both canoe and kayak — in various online newsgroups where they can make plans to get together, discuss the latest equipment, talk about their favorite rivers and techniques, buy and sell equipment or warn people about river hazards. "There's really no criteria for joining other than an interest in the sport and a willingness to get out there and try new things," she said.

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Aging population drives demand for senior housing

By Chelsea Schneider Kirk

When Frances Wulf, 92, made the decision to stop driving and sell her car, she began to look for her next step.

Wulf, who moved to Valparaiso from Wisconsin to be near her kids about three years ago, had lived independently until the age of 91. One day, Wulf surprised her daughter by saying she wanted to look at the rooms at Rittenhouse Senior Living in Valparaiso.

Wulf moved last fall after picking the facility, because she said it felt like she was checking into a hotel and not a hospital.

"When I decided to sell my car, I thought it was time to quit driving. I was having difficulties — I had a thing with the eyes — and I thought before I got in trouble, I better stop," Wulf said.

Statewide, one in five Hoosiers will be older than 65 by 2030, and the number of seniors is expected to grow locally in the next 20 years as well.

In 2010, seniors comprised 13 percent of Lake County's population and 12 percent of Porter County's population. Those numbers jump to 20 percent for Lake County and 21 percent for Porter County by 2030, according to state estimates.

Aimed at responding to the growing demand, Northwest Indiana, specifically Lake County, has seen the construction of a number of senior housing developments.

Residences of Deer Creek on U.S. 30 in Schererville opened in January and offers independent living, assisted living and memory support apartments.

"It's nice," said Katharina Makara, 85, of Schererville, who moved into Deer Creek in March. "The atmosphere — you can joke. You can talk."

Bickford Senior Living in Crown Point is set to open in late summer. The 58-unit complex, which will offer memory care and assisted living, is near 15 percent capacity, director Anthony Ughetti said. In Lowell, Trilogy Health Services is proposing to build a nursing home and assisted living facility near East Commercial Avenue and Burr Street.

Bickford chose Crown Point because of its strong demographics and the need for a non-institutional type of facility that could offer assisted living and mem-

ory care, said Alan Fairbanks, an executive vice president with the company.

"In regards to the industry, there is still a tremendous demand that is needed and supply is not there," Fairbanks said.



"I think what's happened, there is a tremendous influx of supply on your primary, large markets and your big cities have a lot of supply. There is still a lot of pockets in and around the country where the demand far outpaces the supply."

Before the recession, a large share

of senior housing construction was in independent living, but now activity has shifted to assisted living facilities, according to Chris McGraw, a research analyst for the National Investment Center for the Seniors Housing and Care Industry. The nonprofit tracks construction of assisted living and independent living facilities across the nation.

Construction of assisted living facilities has returned to pre-recession levels, notching up activity for the overall industry, McGraw said. In the first three months of this year, construction of new units represented 2.5 percent of the existing inventory for senior housing. While the percentage is down from the pre-recession peak of 4.8 percent in 2008, it's up from the 2 percent recorded in early 2011.

Following the recession, the center is seeing fewer freestanding independent living properties break ground but instead more developments that bundle

AGING page 19



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Should children be forced to visit mom and dad?

By Marianne Delorey

China has enacted a law to help contend with the demands of caring for an aging population. Children are now required by law to visit their parents "frequently" and to provide monetary support.

Also in the news from China, stories of children fleeing abusive homes, being sold into slavery, forced to carry drugs and otherwise being treated like property instead of people.

Many, if not most, parents are good, if not great. Not all are the *Cleavers*, but they do the best they can. They feed, clothe and educate their children. They provide a moral compass, a helping hand and take care of them when they are sick.

And, to be fair, most children do take an interest in their aging parents. They visit, take them to doctor's appointments, balance the checkbook when eyesight becomes problematic and otherwise nurture those who nurtured them.



Housing Options

What of the exceptions pertaining to the China law? Would an abused child be forced to visit their abuser many years after they have finished therapy? Can exceptions be made if there are extenuating circumstances? Will children in bad situations have to divorce their parents in order to make the break clear?

What about monetary support? We get that China wants to get away from nursing home placements, but should a child be required to pay off gambling debts? What about multiple generations of support? With China's one child policy, adult couples could theoretically be the sole support for four parents and several surviving grandparents. Is this what China's law intended?

Let's face facts — there are bad kids, too. Some parents want nothing to do with children that did not turn out well. Should they be forced to visit with them to fulfill the child's legal obligations?

On the surface, this policy makes those of us in the elder field feel good. We have seen our share of sons who

are still financially supported by their mothers; daughters who never come by; and nieces and nephews who only care about the elder's will. But, I think this policy is flawed.

At some point, children need to grow up and take accountability for their lives. Whether they come from a bad home or not, they are expected to get a job, take care of themselves and be productive members of society.

The same is true for the elderly parents. At some point, they have to understand they are partially responsible for the children they raised. If those children did not turn out to like them, maybe there is a valid reason. No amount of nagging is going to make them want to come visit. No law should require children to provide comfort for parents that did not take care of them adequately.

In other words, you reap what you sow.

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.colonyretirement-homes.com. Archives of articles from previous issues can be read at www.fiftyplusadvocate.com

What is Alzheimer's Disease, and what causes it?

By Micha Shalev

Alzheimer's disease is a progressive neurologic disease of the brain. It leads to the irreversible loss of neurons and the loss of intellectual abilities, including memory and reasoning, which become severe enough to impede social or occupational functioning. Alzheimer's disease is also known simply as Alzheimer's, and Senile Dementia of the Alzheimer Type (SDAT).



Caregiving Tips

People who lead active lifestyles are more likely to slow down the progression of Alzheimer's disease, while active people who are Alzheimer's free have a lower risk of developing the disease or any kind of dementia, researchers from the University of California reported at the annual meeting of RSNA (the Radiological Society of North America) in November 2012.

Lifestyle factors that help ward off or slow down Alzheimer's include yard work, gardening, dancing, riding an exercise bike

and any type of aerobic exercise.

Aloysius Alzheimer was a German neuropathologist and psychiatrist. He is credited with identifying the first published case of "presenile dementia" in 1906, which Kraepelin later identified as Alzheimer's disease — naming it after his colleague.

In 1901, while he worked at the city mental asylum in Frankfurt am Main, Germany, Dr. Alzheimer had a 51-year-old patient called Mrs. Auguste Deter. The patient had distinct behavioral symptoms that did not fit any existing diagnoses — she had rapidly failing memory, disorientation, confusion, had trouble expressing her thoughts and was suspicious about her family members and the hospital staff. Her symptoms progressed relentlessly. Dr. Alzheimer wrote that she once said to him, "I have lost myself."

Along with two Italian doctors, Dr. Alzheimer performed an autopsy. The autopsy revealed that her brain had shrunk dramatically, but there was no evidence of atherosclerosis (thickening and hardening of the walls of the arteries). He used a silver staining technique he had learned from ex-colleague Franz Nissl that identified amyloid plaques and neurofibrillary tangles in the brain — two hallmarks of the disease.

Doctors say Alzheimer's disease can sometimes be tricky to diagnose because each patient has unique signs and symptoms. Several of the signs and symptoms present in Alzheimer's disease also exist in other conditions and diseases.

Alzheimer's disease is classified into several stages. Some doctors use a seven-stage framework, while others may use a four-, five- or six-stage one.

A common framework includes:

1. Pre-Dementia Stage.
2. Mild Alzheimer's Stage.
3. Moderate Alzheimer's Stage.
4. Severe Alzheimer's Stage.

The following describes the seven-stage framework:

Stage 1 — No impairment.

Stage 2 — Minimal impairment (very mild cognitive decline).

Stage 3 — Early confusion (mild cognitive decline). Duration is two to seven years.

Stage 4 — Moderate cognitive decline (mild or early stage Alzheimer's Disease). Duration is about two years.

Stage 5 — Moderately severe cognitive decline (moderate or mid-stage Alzheimer's Disease). Duration is about 18 months.

Stage 6 — Severe cognitive decline (moderately severe mid-stage Alzheimer's

Disease). Duration is about two-and-a-half years.

Stage 7 — Very severe cognitive decline (severe or late-stage Alzheimer's Disease). Duration is one- to two-and-a-half years.

Individuals don't usually die from Alzheimer's; rather their life expectancy is shortened from complications. As patients become less able to look after themselves, any illnesses they develop, such as an infection, are more likely to rapidly get worse.

Caregivers will find it difficult to identify complications because the patient becomes progressively less able to tell if he/she is unwell, uncomfortable or in pain. Pneumonia and pressure ulcers are examples of common complications that may lead to death for people with severe Alzheimer's disease.

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 well known speaker on Alzheimer's and Dementia training topics. He can be reached at 508-853-8180 or by e-mail at m.shalev@dodgepark.com or view more information online at www.dodgepark.com

► Aging

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together independent living, assisted living and memory care.

In Lowell's case, Trilogy approached the town to propose the development. Clerk-Treasurer Judy Walters said Lowell has a need for such housing, given that an existing nursing home in town recently expanded its building.

"It's just wonderful because it will be in town and you'll be able to have a loved one right here in town," Walters said of the Trilogy project.

A growing concern for serving the state's aging population is the decline in public funding available to support affordable housing for low- to moderate-income seniors.

U.S. Department of Housing and

Urban Development (HUD) funding for public housing has decreased, and tax credit financing for projects, a major originator for affordable housing for seniors, is now more competitive, Center on Aging and Community Director Philip Stafford said.

"It's an actual serious problem, given the changing demographics and in some ways declining wealth of the current generation of older adults, who took a real hit from the market and don't have the equity that they did in the past that might make it easier for them to relocate to some other housing or some other environment," Stafford said.

The Indiana Housing and Community Development Authority, which oversees the distribution of tax credits for new construction and remodeling of affordable rental housing, saw a high demand among senior projects

in its latest round of funding, authority spokeswoman Emily Duncan said.

Of the 20 projects that got such tax credits this year, 14 competed in the elderly category of housing developments serving residents 55 and older, Duncan said. A local project not to receive tax credit funding from the agency was a proposed senior housing facility in Robertsdale.

In trying to address needs, some communities have developed policies that privately developed housing must set aside a percentage of units that meet affordability standards, Stafford said.

A February report by the Bipartisan Policy Center found the United States is unprepared to handle the needs of seniors who want to "age in place" by staying in their own homes and communities. Among the commission's recommendations was better coordination of

federal programs, which deliver housing and health care services to seniors, according to an executive summary of the report.

Municipalities are increasingly dedicating HUD funds to help seniors who want to "age in place." In Hammond, the city uses some of its HUD funding to help residents install ramps and widen stairs to make them more accessible for walkers.

Seniors Helping Seniors, based in Porter and LaPorte counties, matches seniors to caregivers to help with cooking, cleaning, transportation and yard work. The business aims to bridge the gap between a senior choosing to remain at home and eventually moving to a care facility, owner Vickie Kelter said.

"Most people want to stay in their home," Kelter said. "That's the goal of most people." — AP

A push for harmony among workers, young and old

By Matt Sedensky

CHICAGO —

There's a sense of urgency to the quest for workplace harmony, as baby boomers delay retirement and work side-by-side with people young enough to be their children — or grandchildren.

Put people of widely different ages together and there are bound to be differences. Baby boomers, for example, may be workaholics, while younger workers may demand more of a work-life balance.

The solution for a growing number of companies: generational awareness training to help foster understanding and more effective communication among its workers.

Employees are taught about the characteristics that define each generation, from their core values to their childhood and adolescent experiences to the type of figures they regard as heroes. Then workshop leaders typically drill down into how those attributes play into the strengths and weaknesses each age group offers on the job.

The goal is that by learning why people of different generations act the way they do, companies can better emphasize their employees' strengths and find ways to overcome challenges.

"The Boomers say, 'Now I understand a little bit more of why they're always on their phones,'" said Juergen Deutzer, who leads

generational training at San Diego-based Scripps Health for about 200 employees a year. "Gen Y says, 'Maybe I need to be a little bit more understanding if someone doesn't get a grasp on technology.'"

Companies downplay friction between old and young workers as a reason for training. They say it's more a matter of helping people of different ages connect, which affects group cohesion, employee satisfaction and the overall quality of work.

"There was no animosity, no aggression, none of that," said Scott Redfearn, the top human resources executive at Protiviti, a global consulting firm based in Menlo Park, Calif., that began offering generational training earlier this year. "But you really need the team dynamic to work well because it's that collective genius of the team with all kinds of people, all kinds of backgrounds, all different generations."

Protiviti was seeing a higher turnover rate among its youngest employees, and an internal survey found those workers craved more guidance from their superiors. The

company revised its performance review system, started giving employees more feedback and changed the way it used social media. It also began putting executives and managers through training led by Chuck Underwood, an expert on generational differences. By next year, all new employees at Protiviti will go through a session, alongside more traditional training fare on topics such as sexual harassment, diversity and ethics.

Jennifer Luke, a 33-year-old Protiviti employee, attended two 90-minute sessions this summer and was struck by how closely the generational attributes she learned about applied to her and others in her life.

"It's an awareness tool. You think about it if you're going to send an email to a client, for example," she said. "You just take an extra minute or two as you're planning a project or communicating with a client to think about how you're structuring those communications."

Gen Xers prefer to work individually. Boomers and Millennials thrive in groups. The

oldest workers, from the Silent Generation, are known for loyalty and respect for authority; the youngest, from a yet-unnamed generation, are far more informal and global-minded. Language and cultural references, naturally, vary widely by age.

Ingrid Hassani, a 58-year-old patient care manager at Scripps, said learning about generational differences helped explain why older nurses might hesitate to approach doctors, viewing them "almost like God," while younger nurses are "very comfortable to go right up and talk to them." It also helped when she found her younger subordinates were cutting corners in the hospital's 18-step process for giving a patient medication as simple as Tylenol. Millennials tend to want explanations for everything they're told to do rather than just following orders, as older workers might.

"They want to know the why behind everything," Hassani said. "But once their questions are answered, they are fine."

When Lisa Williams, executive director of the University of Kentucky Institute for Workplace Innovation, held focus groups with local businesses to determine the most pressing issues of an aging workforce, generational differences dominated the discussion. Now she's working to get a generational training program started.



PUSH page 21

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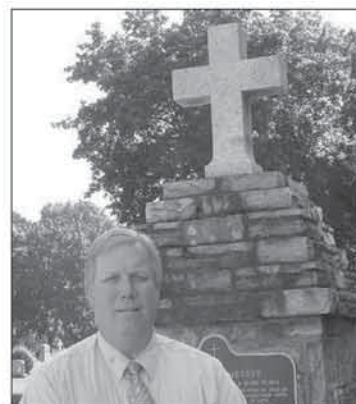


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Social Security raise to be among lowest in years

WASHINGTON —

For the second straight year, millions of Social Security recipients, disabled veterans and federal retirees can expect historically small increases in their benefits come January.

An Associated Press analysis of preliminary figures suggests a benefit increase of roughly 1.5 percent. That would be among the smallest raises since automatic increases were adopted in 1975.

Next year's raise will be small because



consumer prices, as measured by the government, haven't gone up much in the past year.

The size of the cost-of-living adjustment won't be known until the Labor Department releases the

inflation report for September. It was delayed because of the partial shutdown.

The Social Security Administration has given no indication that raises would be delayed because of the shutdown, but advocates for seniors say the uncertainty is unwelcome. — AP

► Push

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"Most of the time there was no conflict, but there were these islands of older workers and younger workers," she said, "and they're not able to understand the others, so there's a lot of judgment."

Underwood said he began getting a flood of calls from human resources departments in the mid-2000s as Millennials began their careers.

"Something's going on in our workplace that we don't understand," he remembered being told. "What was going on was the next American generation was entering adulthood, bringing very different core values, very different skills and very different weaknesses."

Training to bridge the generational divide is becoming more commonplace.

Brad Karsh, of JB Training Solutions, holds roughly 150 sessions a year, half focused on helping younger employees understand older ones, and the other half on helping older employees understand younger ones. A recent Chicago workshop falls in the latter group.

Millennials take a bit of a good-humored bruising during the discussion, for a perceived sense of entitlement, a constant desire for explanation and discontent with entry-level tasks. "I Love Millennials" buttons were given away, perhaps to soften the blow, and Karsh acknowledged that pointing out the flaws of a younger generation is "a time-honored tradition."

He urged participants to see beyond the stereotypes and note that each generation brings a particular skill set to work.

"They're not better, not worse, just different," he said. "What's important is understanding what those differences are." — AP

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Understanding a Medicare glitch can save money

By Linda T. Cammuso

When you are admitted to a hospital, you might naturally think that you are an inpatient. But, the hospital may have a different opinion and categorize your status as observation.

Did you know that under observation status you are deemed an outpatient? Adding insult to injury, did you know being categorized as observation status could result in your paying much more in out-of-pocket expenses than if you were classified as an inpatient?



Legal Briefs

Medicare patients need to understand how costly it can be if the hospital classifies your status as "Observation" rather than "Inpatient." Since observation status means you are an outpatient, Medicare will pay your benefits accordingly. Let's review how this could impact you:

- Rehabilitation or nursing home care: Assuming that you need rehabilitation following hospitalization, Medicare will only pay for care in a skilled facility after a three day consecutive stay — and only if you were classified as an inpatient.

You will not qualify for Medicare benefits if you need nursing home care and you have not been classified as an inpatient and you have not been hospitalized for three full days.

- What observation status means: While

you are hospitalized, you could incur unexpected costs (co-pays) for drugs, X-rays, labs and other hospital treatments.

- Notification: Surprisingly, most patients are not informed of their classification; if the status is observation, you have virtually no time to react. In some cases, when patients are notified, many do not fully understand the implications because they are receiving the same care as others; consequently, they do not challenge the classification.

The pressure is on for hospitals and physicians to classify many Medicare patients under observation status; often that pressure is so pervasive that even when a patient qualifies as an inpatient, the hospital chooses the observation classification to ensure they receive payment for your treatment. Additionally, when doctors classify someone as an inpatient, the hospital will often overrule them. And, the use of the observation

status is growing.

It is important that you, or a family member, ask about your admission status immediately when you are hospitalized and again during your stay at the hospital, because it can change from day-to-day. After all, your financial situation is at stake.

If your status is observation, ask the hospital doctor and case manager how they arrived at that classification and ask that it be changed

If they refuse, contact your personal physician and ask him/her to help.

If that fails, be sure to request a hearing with the relevant hospital committee

Bills have been filed in the House of Representatives (HR 1179) and in the Senate (S569) to amend title XVIII of the Social Security Act. If passed, this legislation would amend the Medicare Act's definition of "post hospital extended care services"

to clarify that time spent in the hospital in observation status counts toward the three-day prior hospital prerequisite for Medicare skilled nursing facility coverage.

But, until the bills are enacted into law, it remains important to be diligent about your, or a loved one's, hospital classification to avoid costly consequences. This can happen to you and I cannot emphasize enough how costly it will be for any Medicare recipient who is capriciously misclassified.

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 or by calling 508-751-5010. Archives of articles from previous issues may be read at www.fifty-plusadvocate.com.

Shows

Cont. from page 9

intimacy almost like family.

"There's something very gratifying and beautiful about that," she said. "The fans you make in a living room setting might go that extra mile for you, because you really connect."

After he played one living room show and wanted to do more, singer-songwriter Fran Snyder created ConcertsInYourHome.com to help musicians and hosts connect. He charges artists a membership fee and offers a database of performers that's searchable by

state, genre or instruments.

"There's a huge transformation going on in entertainment," Snyder said. Some venues have closed, some acts that used to draw 200 or 300 people struggle to get 50, and more musicians are hustling to support themselves rather than looking for a paycheck from record labels.

"We're literally building a new touring infrastructure," Snyder said.

From Pat DiNizio, lead singer of The Smithereens, doing all-request living room shows, to actress Sarah Jessica Parker hosting a living room fundraiser for President Barack Obama's re-election, this old idea seems new again.

In New York City, Marjorie Eliot has offered free Sunday "Parlor Jazz" concerts in her living room in Harlem for a decade. And the New York-based Undead Music Festival featured performances in homes in many cities as a companion to those in professional venues.

In Pittsburgh, five musicians created the Living Room Chamber Music Project to share classical music in a more relaxed environment.

"A house concert allows us to figuratively and literally close the distance with our audience," said one of them, oboist Lenny Young.

SHOWS page 23

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Fifty Plus Advocate sweeps national media awards

WORCESTER —

The Fifty Plus Advocate newspaper and its online partner, www.fifty-plusadvocate.com, was recognized for General Excellence among several

first place honors they received at the 2013 annual convention of the North American Mature Publishers Association (NAMPA) held in Buffalo, New York in late September.

In 11 competitive categories that the newspaper and website entered, they received 10 first place distinctions and one second place win.

The monthly newspaper, currently in its 39th year, was also recognized for Best of Show, for having the most winning entries, and Best Overall Design.

"This publication makes good use of its feature writing, columns and news articles to attract its audience," the judges noted. "Readers are certainly well-informed on a variety of topics."

Fifty Plus Advocate is published monthly by Fifty Plus Media, which is owned by Philip Davis, who founded the publication in 1975.

"To receive so many honors among your nationwide peers is positive reinforcement for all the hard work we have done," said Davis. "I thank all my co-workers for their dedication. Our print and online 50+ media is more of a service to older Americans than anything else and this proves we are doing a very good job."

Executive editor Sondra Shapiro came in first place in the Senior Issues category for her columns: "Long-term care can bankrupt Americans" and "Early feminism didn't prepare women for old age security."

Noting the paper's senior issues coverage, judges wrote, "A variety of voices on relevant topics such as health, well-being and money, as well as people-

driven features, make this publication stand out."

Staff reporter Brian Goslow was awarded first prize in the Feature Writing category for "Best Friends: What

generation gap?" which looked at how today's parents and children are closer than their predecessors; and in the Topical Issue category for "Foreclosures slam older Americans."

The newspaper's website, fiftyplusadvocate.com, won General Excellence honors for being "full of articles and helpful tips. ... The plentiful content will keep readers returning for more."

The publication's 14th annual Elder Care Resource Guide won Special Section honors for providing readers

with thorough listings of services for senior residents and articles that explore topics of high interest to older readers and their family members — selecting a nursing home, managing care from afar, veteran benefits for funeral costs and downsizing homes — and add considerable value for readers.

The newspaper's art director, Susan J. Clapham, received accolades for Best Overall Design and Best Single Ad in both the color and black & white divisions, with judges noting, "The visuals are nicely woven together" and "effective design and content."

NAMPA member publications were judged in various categories by an independent panel of experts from the University of Missouri School of Journalism generally considered one of the top journalism schools in the world.

NAMPA is composed of over 35 publications with a combined circulation of over two million readers in the United States and Canada. It is a non-profit association of publishers producing newspapers and magazines for the boomer and senior markets in the United States and Canada.



Fifty Plus Advocate owner and publisher, Philip Davis, with NAMPA president, Donna Anderson

► Shows

Cont. from page 22

"As working musicians, it's very important to us that if people aren't coming to concerts, we need to come to them."

Janet Hans co-hosts Urban Campfires: San Antonio House Concerts, a series that grew so big it began renting a recreation facility that holds 100 people. Organizers retain the living-room ethos by including a potluck dinner and giving all proceeds to the artist, whom they also put up for the night.

"We're not in the living room anymore but we still strive to have that community feeling," Hans said.

Pointers for hosts:

- Start with a small, weekday event. Before you know whether 15 or 50 of your friends will attend a live show, it's better for you and the performer to start with lower expectations.

- Embrace the space you have. Don't strip

your home of personal touches or feel you have to set up rows of folding chairs.

- Keep it private. Putting up fliers and advertising your shows — acting like a business instead of a private party — could get you in trouble with local government or your home insurance.

- Set a suggested donation from guests. Make it clear all proceeds are going to the musician.

- Invite your neighbors. If you don't want them annoyed by noise or traffic, make sure they are part of the fun.

Concerts In Your Home: www.concertsin-yourhome.com/CIYH_HouseConcertGuidex.pdf; *Aspen Meadows House Concerts:* www.meetup.com/AspenMeadowsHouseConcerts; *Living Room Chamber Music Project:* www.lrcmp.org; *Urban Campfires:* www.urban-campfires.com; *Pat DiNizio's living room shows:* www.patdinizio.com/lrc.php; *My Pinterest board about living room shows:* www.pinterest.com/colleennewvine/living-room-shows.

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E-cigarettes as good as nicotine patches

LONDON —

Electronic cigarettes worked just as well as nicotine patches to help smokers quit, according to the first study to compare them.

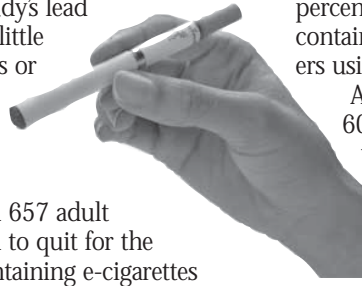
E-cigarettes are battery-operated products that look like real cigarettes and turn nicotine into a vapor inhaled by the user. Since the devices hit the market nearly a decade ago, sales have spiked so quickly some analysts predict they will outsell traditional cigarettes within a decade. E-cigarettes are often marketed as a less harmful alternative to traditional smokes and come in flavors including cinnamon, vanilla and cherry.

"This research provides an important benchmark for e-cigarettes," said Chris Bullen, director of the National Institute for Health Innovation at the University of

Auckland in New Zealand, the study's lead author. Until now, there has been little information about the effectiveness or safety of e-cigarettes. "We have now shown they are about as effective as a standard nicotine replacement product."

Bullen and colleagues recruited 657 adult smokers in Auckland who wanted to quit for the study. Nearly 300 got nicotine-containing e-cigarettes while roughly the same number got nicotine patches. Just over 70 people got placebo e-cigarettes without any nicotine. Each group used the e-cigarettes or patches for 13 weeks.

After six months, similar rates of smokers — 6 to 7



percent — managed to quit after using either the nicotine-containing e-cigarettes or patches. Only 4 percent of smokers using the placebo e-cigarettes successfully quit.

Among smokers who hadn't managed to quit, nearly 60 percent of those using e-cigarettes had cut down the number of cigarettes smoked by at least half versus 41 percent of those using nicotine patches. Smokers were also much bigger fans of the e-cigarettes; nearly 90 percent of users said they would recommend them to a friend compared to just over half of people who got patches.

Researchers also found similar rates of side effects in smokers that used the e-cigarettes and the patches. The most common side effect in all groups was breathing problems. — AP

World not ready for aging population

By Kristen Gelineau

The world is aging so fast that most countries are not prepared to support their swelling numbers of elderly people, according to a new global study by the United Nations and an elder rights group.

The report ranks the social and economic wellbeing of elders in 91 countries, with Sweden coming out on top and Afghanistan at the bottom.

It reflects what advocates for the old have been warning, with increasing urgency, for years: Nations are simply not working quickly enough to cope with a population graying faster than ever before. By the year 2050, for the first time

in history, seniors older than 60 will outnumber children younger than 15.

Truong Tien Thao, who runs a small teashop on the sidewalk near his home in Hanoi, Vietnam, is 65 and acutely aware that he, like millions of others, is plunging into old age without a safety net. He wishes he could retire, but he and his 61-year-old wife depend on the \$50 a month they earn from the shop. And so every day, Thao rises early to open the stall at 6 a.m. and works until 2 p.m., when his wife takes over until closing.

"People at my age should have a rest, but I still have to work to make our ends meet," he said, while waiting for customers at the shop, which sells green tea, cigarettes and chewing gum. "My wife and

I have no pension, no health insurance. I'm scared of thinking of being sick — I don't know how I can pay for the medical care."

Thao's story reflects a key point in the report: Aging is an issue across the world. Perhaps surprisingly, the report shows that the fastest aging countries are developing ones, such as Jordan, Laos, Mongolia, Nicaragua and Vietnam, where the number of older people will more than triple by 2050. All ranked in the bottom half of the index.

The Global AgeWatch Index was created by HelpAge International, an elder advocacy group and the U.N. Population Fund in part to address a lack of international data on the extent and impact of

global aging.

The index, released on the U.N.'s International Day of Older Persons, compiles data from the U.N., World Health Organization, World Bank and other global agencies, and analyzes income, health, education, employment and age-friendly environment in each country.

The index was welcomed by elder rights advocates, who have long complained that a lack of data has thwarted their attempts to raise the issue on government agendas.

"Unless you measure something, it doesn't really exist in the minds of decision-makers," said John Beard, Director

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Leasing solar, a cost-saving option for homeowners

By Carole Feldman

Ben Kunz wanted to do “the green thing” and save on his electric bill without paying a lot of money up front. So instead of buying a solar system for his house in Cheshire, Conn., he leased one.

Increasing numbers of U.S. homeowners are relying on the sun to meet much of their hot water and electricity needs. In fact, residential electricity produced by solar in the first quarter of 2013 was almost 10 times higher than that generated in 2008, according to the Solar Energy Industries Association.

But the potential for more is huge. Consider this: “The amount of solar energy falling on the United States in one hour of noontime summer sun is about equal to the annual U.S. electricity demand,” the Energy Department reported in its SunShot Vision Study.

A Gallup poll in March found that 76 percent of Americans thought the country should put more emphasis on producing domestic energy from solar power.

So what’s stopping more folks from going solar?

“We found that a lot of people were afraid to go solar because they were too afraid of what they didn’t know,” said Ketch Ryan, who had a solar energy system installed in her Chevy Chase, Md., house several years ago. The first thing is to get your roof assessed

to see whether it’s viable for solar. The roof’s condition, material and angle are among the considerations.

One misconception is that you need a south-facing roof.

While south is optimal, solar can be stalled on roofs facing east and west, too.

“Walk outside on a sunny day and look at the roof,” advises Rhone Resch, president and CEO of the Solar Energy Industries Association.

Is the roof covered with shade? If not, your house may be a good candidate for solar. Some solar companies use Google maps for a first look before sending out staff for a fuller assessment.

Homeowners also worry that solar may not be viable in northern states. California leads the nation in the capacity of installed residential solar units, with Arizona a distant second. But New Jersey comes in at No. 3 and Massachusetts is eighth, according to the association.

Kunz says he’s saving money. He now pays about \$140 or \$150 for electricity each month, down from about \$220. And

the total includes his \$115 lease payment to SolarCity, a California-based solar company that operates in 14 states.

Cost is another factor that holds people back.

Purchasing and installing a solar system can cost thousands of dollars, depending on how much electricity you want to generate.

“You’ll need to pay for it up front,” Resch said. Some people use home equity loans, or lines of credit or other means of financing.

Incentives like tax credits and rebates can bring down the cost. Homeowners who install solar electric or hot water systems could be eligible for a federal tax credit of 30 percent of the cost. States also have tax incentives. Check the database at www.dsireusa.org.

Want to go solar but don’t have the money to buy a system? Try leasing one.

Leasing has opened up solar to a whole new group of homeowners, said Jonathan Bass, SolarCity spokesman.

“We think of ourselves as an energy provider,” he said. “Installation is free and the

customer pays for electricity.”

Solar-generated electricity, that is, for a monthly fee. The cost is lower than if purchased through the electric company. But if you lease the system, you won’t get to take advantage of rebates and credits.

“We insure the system for the customer,” Bass said. “We provide monitoring service. We provide repair service... And we also guarantee the performance of the system.”

Jeff Hodgkinson of Mesa, Ariz., said it was that full-service option that prompted him to lease. He paid the full cost of the 20-year lease at the start and expects to begin realizing the savings in about five years.

The Energy Department’s Office of Energy Efficiency and Renewable Energy has a similar message. Sam Rashkin, chief architect in the agency’s Building Technologies Office, said people should consider solar “If it complements an energy-efficient house and can reduce their energy requirements.” He said other energy-efficient features include well-insulated walls, high-performance windows and energy efficient heating and air conditioning system.

If your options include solar, don’t think you can drop the electric company altogether, though. You’ll need it as a backup for those cloudy, rainy or snowy days when sun is at a minimum, or when you’re using more electricity than your solar system can produce. — AP



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World

Cont. from page 24

of Ageing and Life Course for the World Health Organization. “One of the challenges for population aging is that we don’t even collect the data, let alone start to analyze it. ... For example, we’ve been talking about how people are living longer, but I can’t tell you people are living longer and sicker, or longer in good health.”

The report fits into an increasingly complex picture of aging and what it means to the world. On the one hand, the fact that people are living longer is a testament to advances in health care and nutrition. And advocates emphasize that the elderly should be seen not as a burden but as a resource. On the other hand, many countries still lack a basic social protection floor that provides income, health care and housing for seniors.

Afghanistan, for example, offers no pension to those not in the government. Life expectancy is 59 years for men and 61 for women, compared to a global average of 68 for men and 72 for women, according to U.N. data.

That leaves Abdul Wasay struggling to survive. At 75, the former cook and blacksmith spends most of his day trying to sell toothbrushes and toothpaste on a busy street corner in Kabul’s main market. The job nets him just \$6 a day — barely enough to support his wife. He can only afford to buy meat twice a month; the family relies mainly on potatoes and curried vegetables.

“It’s difficult because my knees are weak and I can’t really stand for a long time,” he said. “But what can I do? It’s even harder in winter, but I can’t afford treatment.”

Although government hospitals are free, Wasay complains that they provide little treatment and hardly any medicine. He wants to stop working in three years, but is not sure his children can support him. He said many older people cannot find work because they are not strong enough to do day labor, and some resort to begging.

“You have to keep working no matter how old you are — no one is rich enough to stop,” he said. “Life is very difficult.”

Many governments have resisted tackling the issue partly because it is viewed as hugely complicated, negative and costly, which is not necessarily true, said Silvia Stefanoni, chief executive of HelpAge International. Japan and Germany, she said, have among the highest proportions of elders in the world, but also boast steady economies.

“There’s no evidence that an aging population is a population that is economically damaged,” she said.

Prosperity in itself does not guarantee protection for the old. The world’s rising economic powers — the so-called BRICS nations of Brazil, Russia, India, China and South Africa — rank lower in the index than some poorer countries such as Uruguay and Panama.

However, the report found, wealthy nations are in general better prepared for

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aging than poorer ones. Sweden, where the pension system is now 100 years old, makes the top of the list because of its social support, education and health coverage, followed by Norway, Germany, the Netherlands and Canada. The United States comes in eighth.

Sweden's health system earns praise from Marianne Blomberg, an 80-year-old Stockholm resident.

"The health care system, for me, has worked extraordinarily well," she said. "I suffer from atrial fibrillation and from the minute I call emergency until I am discharged, it is absolutely amazing. I can't complain about anything — even the food is good."

Still, even in an elder-friendly country like Sweden, aging is not without its challenges. The Swedish government has suggested people continue working beyond 65; a prospect Blomberg cautiously welcomes but warns should not be a requirement. Blomberg also criticized the nation's finance minister, Anders Borg, for



cutting taxes sharply for working Swedes but only marginally for retirees.

"I go to lectures and museums and the theater and those kinds of things, but I probably have to stop that soon because it gets terribly expensive," she said. "If you want to be active like me, it is hard. But to sit home and stare at the walls doesn't cost anything." — AP

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