SENIOR LIVING
A guide for staying healthy, safe and happy

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Finding a new strength

Regain your game after being cooped up for more than a year

BY JUDITH GRAHAM
Kaiser Health News

Alice Herb, 88, an intrepid New Yorker, is used to walking miles around Manhattan. But after this year of being shut inside, trying to avoid COVID-19, she’s noticed a big difference in how she feels.

“Physically, I’m out of shape,” she said. “The other day, I took the subway for the first time, and I was out of breath climbing two flights of stairs to the street. That’s just not me.”

Emotionally, Herb, a retired lawyer and journalist, is unusually hesitant about resuming activities even though she’s fully vaccinated.

“You wonder: What if something happens? Maybe I shouldn’t be doing that. Maybe that’s dangerous,” she said.

Millions of older Americans are similarly struggling with physical, emotional and cognitive challenges following a year of being cooped up inside, stopping usual activities and seeing few, if any, people.

If they don’t address issues that have arisen during the pandemic — muscle weakness, poor nutrition, disrupted sleep, anxiety, social isolation and more — these older adults face the prospect of poorer health and increased frailty, experts warn.

What should people do to address challenges of this kind?

Several experts share advice:

- Reconnect with your physician. Large numbers of older adults have delayed medical care over fear of COVID-19. Now that most seniors have been vaccinated, they should schedule visits with primary care physicians and preventive care screenings, such as mammograms, dental cleanings, eye exams and hearing checks, said Dr. Robert MacArthur, chief medical officer of the Commonwealth Care Alliance in Massachusetts.

- Have your functioning assessed. Primary care visits should include a basic assessment of how older patients are functioning physically, according to Dr. Jonathan Bean, an expert in geriatric rehabilitation and director of the New England Geriatric Research, Education and Clinical Center at the Veterans Affairs Boston Healthcare System.

At a minimum, doctors should ask, “Are you having difficulty walking a quarter-mile or climbing a flight of stairs? Have you changed the way you perform ordinary tasks such as getting dressed?” Bean suggested.

- Get a referral to therapy. If you’re having trouble moving around or doing things you used to do, get a referral to a physical or occupational therapist.

A physical therapist can work with you on strength, balance, range of motion and stamina. An occupational therapist can help you change the way you perform various tasks, as well as evaluate your home for safety and identify needed improvements, such as installing a second railing on a staircase.

Don’t wait for your doctor to take the initiative; too often, this doesn’t happen.

“Speak up and say: ‘Please, can you write me a referral?’ I think a skilled evaluation would be helpful,” said Dr. Nussbaum, director of post-acute services at Northwell Health, the largest health care system in New York.

And guess what? After being inactive for more than a year, they can’t,” said Dr. John Batsis, associate professor of geriatrics at the University of North Carolina at Chapel Hill.

“I’m a fan of start low, go slow,” Batsis said. “Be honest with yourself as to what you feel capable of doing and what you are afraid of doing. Identify your limitations. It’s probably going to take some time and adjustments along the way.”

Nina DePaola, vice president of post-acute services for Northwell Health, the largest health care system in New York, cautioned that getting back in shape may take time.

“ Pace yourself. Listen to your body. Don’t do anything that causes discomfort or pain,” she said. “Introduce yourself to new environments in a thoughtful and a measured fashion.”

- Be physically active.

Engaging regularly in physical activity of some kind — a walk in the park, chair exercises at home, video fitness programs — is the experts’ top recommendation.

The Go4Life program, sponsored by the National Institute on Aging, is a valuable resource for those getting started, and you can find videos of some sample exercise routines on YouTube. The YMCA has put exercise classes online, as have many senior centers. For veterans,
the U.S. Department of Veterans Affairs has Gerofit, a virtual group exercise program that’s worth checking out.

Bienvenido Manzano, 70, of Boston, who retired from the Coast Guard after 24 years and has significant lower back pain, attends Gerofit classes three times a week. “This program, it strengthens your muscles and involves every part of your body, and it’s a big help,” he said.

Have realistic expectations. If you’re afraid of getting started, try a bit of activity and see how you feel. Then try a little bit more and see if that’s OK.

This kind of repeated exposure is a good way to deal with residual fear and hesitation,” said Rachel Botkin, a physical therapist in Columbus, Ohio.

Understand that this has been a time of psychological trauma for many people, and it’s impacted the way we behave,” said Dr. Thomas Cudjoe, a geriatrician and assistant professor at Johns Hopkins Medicine in Baltimore, Maryland.

“We’re not going to go back to pre-pandemic activity and engagement like turning on a light switch. We need to respect what people’s limits are.”

Eat well. Make sure you’re eating a well-balanced diet that includes a good amount of protein. Adequate protein consumption is even more important for older adults during times of stress or when they’re sedentary and not getting much activity, noted a recent study on health aging during COVID-19.

Reestablish routines. “Having a structure to the day that involves social interactions, whether virtual or in person, and various activities, including some time outside when the weather is good, is important to older adults,” said Dr. Lauren Beth Gerlach, a geriatric psychiatrist and assistant professor of psychiatry at the University of Michigan.

Routines are especially important for older adults with cognitive impairment, who tend to do best when their days have a dependable structure and they know what to expect, she noted.

End-of-day routines are also useful in addressing sleep problems, which have become more common during the pandemic. In a University of Michigan poll from January, 19% of adults ages 50 to 80 reported sleeping worse than they did before the pandemic.

Reconnect socially. Mental health problems have also worsened for a segment of older adults, according to the University of Michigan poll that saw 19% reporting experiencing more sadness or depression and 28% reporting being more anxious or worried.

Social isolation and loneliness may be contributing, and it’s a good idea to start "shoring up social support” and seeing other people in person if seniors are vaccinated, Gerlach said.

Families have an important role to play in reengaging loved ones with the world around them, Batsis said. “You’ve had 15 months or so of only a few face-to-face interactions: Make it up now by visiting more often,” he said. “Make the effort.”

Laura Collins, 58, has been spending a lot of time this past month with her mother, Jane Collins, 92, since restrictions on visitation at Jane’s nursing home in Black Mountain, North Carolina, eased and both women were vaccinated. Over the past year, Jane’s dementia progressed rapidly and she became depressed, sobbing often to Laura on the phone. “She loves getting outside, and that has been wonderful,” Laura said. “Her mood immediately shifts when she gets out of the building: She’s just happy, almost childlike, like a kid going out for ice cream. And, in fact, that’s what we do — go out for ice cream.”
Fully vaccinated? Get ready to travel

The efforts of researchers and public health officials in developing safe and successful COVID-19 vaccines were nothing short of historic. Vaccines typically take years to develop, but a combination of factors enabled researchers to make the COVID-19 vaccines available to vulnerable populations by December 2020, or roughly nine months after the World Health Organization declared a global pandemic. Researchers had already conducted years’ worth of vaccine research on human coronaviruses, which the Centers for Disease Control and Prevention notes were first identified in the mid-1960s. That research proved invaluable as pharmaceutical companies raced to produce COVID-19 vaccines.

Vaccines are among the first groups to be given the COVID-19 vaccine. Many people within that group are retired and had looked forward to traveling, only to have those plans interrupted by the pandemic. Now that they’re fully vaccinated, seniors are setting their sights on travel once again. Though the COVID-19 vaccines have made vulnerable groups like seniors less likely to suffer severe illness from the virus, there’s still a few things adults over 65 should know when making travel plans.

The virus

Data from the CDC indicated that more than 140 million people in the United States had been fully vaccinated as of June 7. As of April 30, there were 10,262 breakthrough infections reported, and only 995 of those required hospitalization, with 289 being asymptomatic or in the hospital for a reason unrelated to COVID-19. Those are encouraging figures that illustrate just how effective the vaccines are at preventing infection and serious illness. Recognizing that efficacy may help calm any concerns fully vaccinated seniors have about traveling.

Restrictions

Though a significant portion of the eligible populations in the United States and Canada had been fully or partially vaccinated by mid-March, overseas travel restrictions may still be in place. Some countries, such as India, continue to confront devastating waves of the virus and may not be allowing overseas visitors anytime soon. In addition, the European Union is still working on its strategy to allow fully vaccinated foreign tourists to visit the continent, and different countries are adopting different rules. It’s important that seniors learn of any potential restrictions before booking trips.

Attractions

When planning a trip, seniors may want to look for areas with plenty of outdoor attractions. The CDC continues to recommend that people, even those who are fully vaccinated, gather outdoors, where the virus is less likely to be transmitted. When traveling, seniors may be spending time around people who have not yet been vaccinated, gather outdoors, where the virus may be more at risk of falling or getting sick, and some travelers. So choosing locales with plenty of outdoor attractions can be a great way to quell any travel-related concerns seniors may have.

Six tips for seniors to have a safe trip

One of the perks of getting older is having more time to devote to recreation and traveling.

According to the U.S. Census Bureau, there are roughly 52 million people who are age 65 or older in the United States. With a $1.6 trillion total net worth, seniors spend more on groceries, pharmaceutical items, and travel and leisure than any other demographic.

Age does not have to restrict one’s ability to travel, and with age comes experience and more opportunities to enjoy travel.

Before taking off for parts unknown, men and women over 50 can take steps to ensure their excursions are as safe as they are memorable.

1. Consider risk. The coronavirus pandemic of 2020 taught the world that situations can change rapidly.

Before booking any travel, weigh the risks and the benefits of a trip. Determine if COVID-19 is spreading where you live or at your destination. Older adults have a higher risk for severe illness caused by the virus. And if you are not vaccinated, it is best to wait to travel.

2. Use senior-friendly services. Seek out travel services that offer the best perks for older adults.

Many travel providers no longer offer senior discounts, but they may offer other benefits, such as early boarding or assistance with traveling from gates to baggage areas.

3. Get travel insurance.

According to Liz Dahl, co-founder of Boomer Travel Patrol, a website featuring expert advice geared toward the baby boomer demographic, travel insurance can be essential for older travelers. Older travelers may be more at risk of falling or getting sick, and some may need extra medication if travel is interrupted or delayed. Travel insurance can provide extra coverage for a relatively low price if something goes wrong.

4. Don’t advertise your absence. It may be tempting to upload photos of your beach-side vacation to social media as you are immersed in paradise. Unfortunately, seniors tend to be targets for thieves because they are seen as vulnerable.

Don’t make the job easier by advertising you are away from home. In addition, have a neighbor periodically pick up your mail and set lights on timers to give the impression you are home even when you’re not.

5. Share your itinerary.

Keep loved ones apprised of your general travel itinerary, especially if you are traveling solo. AARP recommends. Keep a mobile phone on you at all times.

6. Pack copies of important documents.

In the event paperwork is lost while traveling, request copies of prescriptions and/or statements of medical conditions from each physician and medical treatment center so you have a second set. Keep copies of your passport, driver’s license, insurance cards, travel tickets and other documents as well.
Adults confront various age-related side effects as they transition from middle age to their golden years. Skin may begin to wrinkle and hair may turn gray, but those are just the visible side effects of aging. Many additional effects are unseen, but these changes can have a profound outcome on adults’ quality of life.

According to the Mayo Clinic, various parts of the body are affected by aging. For example, the cardiovascular system changes as people grow older. Blood vessels and arteries stiffen as adults age, forcing the heart to work harder to pump blood through them. Though many changes are linked to aging, other changes commonly associated with aging, such as a decline in memory, reasoning and other thinking skills, are not natural.

The Alzheimer’s Association notes that dementia is not a normal part of aging. There are many different types of dementia, including Alzheimer’s disease, and these are the result of damage to brain cells that affect a person’s ability to communicate. That damage is not inevitable, even if it’s commonly associated with aging.

The Harvard Medical School notes that fleeting memory problems experienced with aging often reflect normal changes in the structure and function of the brain. But it’s important that those changes not be mistaken for dementia, and it’s equally important that adults recognize there are many ways they can protect and sharpen their minds as they age.

HMS notes that a higher level of education is associated with improved mental functioning in old age. The reasons for that are unknown, but experts theorize that advanced education compels people to remain mentally active, which in turn helps them maintain a strong memory. Even aging men and women who are still working in challenging fields can benefit from pursuing a new hobby or learning a new skill.

HMS reports that the more senses a person uses to learn something, the more his or her brain is involved in retaining a memory. HMS cites one study in which adults were shown a series of emotionally neutral images that were each presented along with a smell. Participants were not asked to recall what they saw, but were later shown a set of images and asked to indicate which they had previously seen. The participants had excellent recall for the odor-paired images, and researchers believe that’s because additional parts of the brain were activated when participants were asked to use more than one sense.

Memory loss is not an inevitable side effect of aging, especially for adults who take steps to maintain their memories as they age.
Shared experiences are ideal ways to make new friends or solidify established relationships. Bonds can be strengthened even further when those shared experiences include entertaining activities. This is a great reason for seniors to incorporate routine game nights into their social calendars.

Hosting a game night can be an ideal way to have fun at home without turning on the television. If an in-person get-together is not doable, have fun and get together with friends.

The following are a few things to consider when planning a game night.

**Go by the numbers**
How many people are invited to game night will determine the games that can be played. Game nights tend to be more successful with a guest list between four and eight players. Keeping people engaged in a game can be more challenging if there are more than eight individuals, and most games are designed for a maximum of eight players.

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When deciding on games, consider these criteria, courtesy of Game Night Gods, an online game night resource:

- The game should be easy to learn.
- The game should be relatively fast-moving.
- The game should pique interest and be strategic.

**Plan for finger foods**
Game night etiquette typically dictates that hosts will provide refreshments. In lieu of a sit-down meal, offer finger foods, which are easier to manage while engaged in game play.

Pre-made party platters are an option if you want to spend more time entertaining and less time preparing food. Guests also can be encouraged to bring small dishes, such as sandwiches, chips and dips or other snacks.

**Have options on hand**
Music or a sports game playing in the background also can be a way to keep guests entertained between turns.

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**Get out of your comfort zones**
Acting zany and engaging in games that push people out of their comfort zones can help guests get to know one another and laugh along the way. Games also are a perfect way to learn something new with little to no pressure.
The art of the obituary

Workshop challenges writers to express how they’d like to be remembered

BY DAVID OLSON
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Margo Steiner used to fear death.
The Marblehead resident remembers being creeped out way back in high school, when she was tasked to go to the local funeral home to borrow AstroTurf for use in the display for the senior prom, artificial grass being useful as a backdrop for many different rites of passage. The walk through the quiet parlor halls was unnerving, even for a teenager with a full, rich life waiting on the other side of graduation.

Fast forward a few decades (OK, maybe more than a few), and Steiner has met the promise of those high school years, with a long career as a writer and teacher and a civic-mindedness that includes a stint as president of the Marblehead Rotary Club.

Even today, at 71, she keeps a busy schedule as a book editor, writing coach and professional writing tutor at Beverly’s Endicott College. She also teaches a weekly writing class at the Marblehead Council on Aging.

And in her spare time, she helps people come to grips with their mortality. It’s not pitched that way, of course, but Steiner’s popular obituary-writing workshop, which has a new class starting this summer, has the same effect. And it is proving quite popular, even among those who have no plans to shuffle off this mortal coil any time soon.

“I was mostly interested because it sounded charming, a little ironic,” Marblehead resident Lisa Fowler said of Steiner’s two-session seminar, offered over Zoom.

Retired at 66 from the educational publishing business, Fowler “thought the class would give me a chance to practice a different kind of writing.”

What she learned was a revelation.

“Trying to sum up my life,” she said, “was one of the most startling experiences I ever had.”

She’s not alone.

As Steiner makes clear, crafting your own obituary helps you take stock of your life before it starts passing before your eyes. Most people are surprised by how much they’ve accomplished, how many lives they’ve touched. Others see something different.

Steiner likes to tell the story of Alfred Nobel, the arms dealer and explosives inventor who got a chance to read his own obituary when it was mistakenly published by a French newspaper. The obituary’s headline, “Le marchand de la mort est mort” (“The merchant of death is dead”) and lead sentence, “Dr. Alfred Nobel, who became rich by finding ways to kill more people faster than ever before, died yesterday,” are thought to have shocked Nobel into establishing the philanthropic prizes that bear his name today.

Changing times

Obituaries used to be prepared by funeral directors on behalf of grieving families, and they ran in newspapers for free. Almost without exception, they were buttoned-up affairs, a staid listing of schools, jobs, civic service and a long recitation of relatives from a many-branched family tree. Generations of women were remembered in print chiefly as “housewives,” and causes of death were rarely shared.

Now, in the era of the twin pandemics of COVID-19 and opioid addiction, families have become more open about how their loved ones died, more willing to brush aside stigma.

When newspapers started to charge for obituaries in the 1990s, they left it to friends and family members to decide what went into them, leading to classic lines such as: “Faced with the prospect of voting for either Donald Trump or Hillary Clinton, Mary Anne chose to pass into the eternal love of God”; “(Jan) loved (her family) more than anything else in the world ... except cold Budweiser, room temperature Budweiser, mopeds, fall foliage, the O.J. chase, and the O.J. trial”; and the two-word “Doug died.”

Sometimes, of course, attempts at humor fall flat. No one really knows if Doug, Jan or Mary Anne were in on the joke. And in the modern era of blended families, obituaries can become a point of argument and hurt feelings for surviving loved ones trying to decide whose name comes first and who gets left out.

“More and more people are putting in that their loved one died after a long struggle with addiction,” Steiner said. “They want to make a difference in the lives of others. There’s a lot more honesty in obituaries now than there used to be.”

As a result, self-written obituaries have become more popular, and more people have turned to empathetic, insightful instructors like Steiner, who begins with the history of the form and ends with participants writing their own obituaries — and sharing them with the rest of the class.

“It was interesting to learn what they considered important,” Judy Stover, 82, said of her classmates. “Some were much more psychological portraits, some were more perfunctory listings. Some were little literary masterpieces.”

It’s the human touch that Steiner tries to coax from her students.

“Many people start their day by reading the obituaries,” she said. “The better ones tell you more about the person as a person — She worked at the soup kitchen for 12 years.’ It makes you think, ‘I wish I had known this person, wasn’t he or she interesting.’”

To that end, Steiner asks her students to poll friends and family while writing their obituaries — but not to make sure they get names and dates right.

“Ask three or four people five ways they would describe you,” then listen to the answers, she said. “This is how they see you.”

The answers can be uplifting, as well as surprising. One student told Steiner, “I never knew people thought of me as generous.”

The class doesn’t just help its students prepare for the end. It can also be life-affirming.

“It helps you get more comfortable with the fact you aren’t going to be around forever,” Stover said. Her class obituary “left out a lot of facts about high school and college” and instead focused on “three different children and a whole bunch of grandchildren,” a fondness for travel and a love of life on the beach in Salem.

“It’s about what brought joy in your life,” she said.

Sheryl Levy said that the class “made me stop and think about what I wanted people to think about me.”

“I gave me a renewal on life,” the 57-year-old said. “I’m enjoying it more. Live it now, because you never know. What if it’s tomorrow? Margo made me stop and think about it.”

Those interested in taking a class with Margo Steiner can email her at margo.steiner@verizon.net.

Class fees are being used to establish a nonprofit to help provide free obituaries for homeless individuals, veterans and others in need.
How the pandemic has shaken up retirement

BY LIZ WESTON
NERDWMELL

Pandemic-related job losses forced many older Americans out of the workplace in the past year, perhaps permanently. But the COVID-19 crisis also seems to have delayed some retirements.

Remote work eliminated commutes and often allowed more flexible schedules with fewer interruptions. At the same time, the pandemic restricted many traditional retirement activities, including travel and visits with family. While some employed older workers look forward to retiring when restrictions ease, others say teleworking has made staying on the job more tenable.

Tax accountant Larry B. Harris of Asheville, North Carolina, found a lot to like about working from home, including more flexibility and less time in his car. “I’d never worked from home except in a snowstorm. I found that I loved it,” said Harris, 67. “I think it will keep me working longer.”

Uneven recovery, uneven retirement impact

Economists talk about a K-shaped recovery, where a portion of the nation’s industries and population bounce back quickly from recession while others stagnate or continue to sink. Something similar may be happening with baby boomer retirements, as better-off workers gain more options while those with fewer choices lose ground.

The pace of retirements among baby boomers, those born from 1946 to 1964, accelerated during the pandemic, a Pew Research Center analysis of monthly labor force data found. The number of boomers who reported that they were out of the labor force due to retirement grew 3.2 million in the third quarter of 2020 compared with the previous year. Before the pandemic, the number of retired boomers had been growing an average of 2 million each year since 2011, when the first boomer turned 65.

Some people retired to avoid COVID-19 exposure, while others may have been nudged to “seize the day” by the pandemic’s reminder of our mortality. But massive job losses may have forced many into early retirement.

One of certified financial planner Neal Van Zutphen’s clients, a woman in her late 50s, lost a well-paying job in the hospitality industry. Most people who lose a full-time job in their 50s never recover financially, according to research by nonprofit newsroom ProPublica and the Urban Institute, a nonprofit research organization.

“It’s difficult to find a new position of similar caliber,” Van Zutphen said. “She hopes to work part time at something.”

Pandemic recession hit older workers harder

Older workers lost jobs faster and returned to work slower last year than midcareer workers, according to a study by The New School’s Schwartz Center for Economic Policy Analysis that tracked unemployment from April through September last year. The study found that for the first time since 1973, workers 55 and older faced persistently higher unemployment rates than workers ages 35 to 54.

Certain older workers — women, Black people and those without college degrees — were even more likely to lose their jobs. And these workers tend to have less saved, so they are also more exposed to retirement risks such as downward mobility and poverty, the study said.

At the same time that the pandemic was pushing millions out of the workforce, lockdown orders gave millions of others a crash course in working from home. About 75% of federal

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government employees, for example, were working remotely in September, according to a survey conducted by the Government Business Council, a research group.

So it may not be a coincidence that far fewer federal employees retired in 2020 compared with the two previous years, according to an analysis of monthly data from the Office of Personnel Management by Federal News Network, a media outlet that covers the federal government. The analysis found that 92,008 federal employees retired in 2020, the fewest since 2010.

The office processed 101,580 retirements in 2019 and 107,612 in 2018.

A small delay can have a big effect

Employees don’t always get to decide when to retire, but delaying it, when possible, can help shore up finances. Early exits from the workforce can heighten the risk of long-term financial insecurity. Retirees may not have saved enough, and they might get lower payments if they start pensions or Social Security benefits earlier than planned.

Working an extra year or two allows people to save more for retirement and increase the amount of their Social Security benefits. It can also help with one of the most important retirement decisions: when to start taking Social Security benefits. Applying before full retirement age, which ranges from 66 to 67, permanently reduces the checks that comprise a big chunk of most people’s retirement income.

Some people have little choice, though, because they don’t have enough other income to live on while they wait, said John Boroff, director of retirement and income solutions for Fidelity Investments.

“If you’re still working, it’s an easier decision to put off Social Security,” Boroff said.

Some seniors who discovered this past year that they really enjoy working from home have decided to postpone retirement.
How to be a better long-distance caregiver

BY LIZ WESTON
NERDWALET

Long pandemic lockdowns forced many older adults to become comfortable with video calls to stay connected with family. That in turn means that long-distance caregivers have a better way to see how their loved ones are faring.

“You can’t tell on the phone that they’re wearing the same clothes every day, or they’re not bathing because they’re afraid they’ll fall in the shower,” said Amy Goyer, AARP’s national family and caregiving expert and the author of “Juggling Life, Work, and Caregiving.”

More than 1 in 10 caregivers look after family or friends from a distance, which can make the task much more difficult and expensive. A 2016 AARP survey found that caregivers in general incur an average of about $7,000 a year in out-of-pocket expenses. Long-distance caregivers — those who live at least an hour away from the care recipient — incur about $12,000 on average, according to the survey. Long-distance caregivers are more likely than local caregivers to hire help, take unpaid time off work and pay for travel, Goyer said.

Yet many distant caregivers worry they’re not doing enough and that a preventable crisis will develop because they weren’t on hand to spot the red flags.

“As caregivers, guilt is our constant companion,” Goyer said. “When you’re a long-distance caregiver, it’s even more so.”

AARP has numerous resources for caregivers, including a “Prepare to Care” planning guide and a financial workbook for estimating and tracking costs.

Goyer, who cared for her grandparents, parents and a sister from afar, suggests the following ideas to make long-distance caregiving more effective and manageable.

Assemble a team

If you can’t physically check in on your loved one regularly, enlist others who can, Goyer said. Those could include family members or friends who live closer, or even a friendly neighbor to whom you can give your contact information.

“You may say, ‘Hey, if you notice grass isn’t getting mowed, things around the house look like they’re not being kept up, will you let me know?’” Goyer suggests. If you have siblings, they can pitch in even if they’re long-distance, too, Goyer said. They can make daily check-in calls or handle tasks such as paying bills, making medical appointments and dealing with insurance companies.

If you have the means, consider hiring a geriatric care manager, also known as an aging life care professional, to help you evaluate your loved one’s caregiving needs, hire home health aides if necessary and step in if there’s a crisis. These professionals, who are often nurses or social workers, typically charge $75 to $200 an hour. An initial assessment may cost a few hundred dollars, but then the manager can be tapped as needed.

Maximize available resources

Your loved one may be eligible for public benefits that could help with caregiving tasks or costs. Start your search at www.benefits.gov. Resources for older Americans can also be found through the Eldercare Locator at https://eldercare.acl.gov.

Goyer’s father suffered from dementia for many years, but only during the last year of his life did she learn that he qualified for health care benefits from the Department of Veterans Affairs.

“I wish I’d gotten him into VA health care earlier, because they ended up covering incontinence supplies and medications and a lot of things that I had been paying for,” Goyer said.

The person you’re caregiving for may have other resources that can be tapped, such as long-term care insurance, savings or home equity. Talking about money can be difficult, but not doing so can be disastrous, Goyer said. She eventually filed for bankruptcy protection because of the credit card debt she incurred while caregiving.

If she had to do it again, Goyer said that she would consult with a financial adviser to better plan for the costs ahead.

“My biggest advice is to realize that this could go on for a long time and can have an impact on your own personal finances,” she said.
Benchmark Senior Living at Haverhill Crossings: Where Connections Make Life Special

As people age, their lives often change, and they require additional support. Sometimes that means physical care, but it often means establishing or strengthening connections with others that help us have a happier and more fulfilling life.

Benchmark Senior Living at Haverhill Crossings is one of several Benchmark assisted living and Mind & Memory Care communities in the Merrimack Valley and throughout the state. They are committed to helping seniors nurture their passions and their connections with others.

Since Margie LaCroix moved into Haverhill Crossings almost two and a half years ago, she’s reconnected with old friends and with the things she loves to do. She participates in daily Benchmark Strong exercise classes to help her arthritis and indulges her love of music with live entertainment.

“Living at Haverhill Crossings and being with other people is the best thing in the world for her,” said Karen Metzner, one of Margie’s three children who lives in Atkinson, NH. “They really know how to bring out the best in people.”

Margie moved into Haverhill Crossings from her condo, where she lived alone after her husband had passed. Karen began to grow concerned when Margie’s usual get-togethers with her longtime friends started to fade. “My mom was always a very social person and had a ton of friends that she would go out to dinner, play cards and laugh with,” said Karen. “But her arthritis progressed to a point where she had difficulty walking on her own and could no longer drive. Eventually, she wasn’t up to seeing her friends and was no longer behaving like the outgoing person we had known. We were worried.”

Margie and Karen both agreed it was time for a change and began looking at several senior living communities in the area. Karen quickly narrowed it down to Haverhill Crossings and another community closer to her home. When the pair visited Haverhill Crossings together, they knew they had found the one.

“One time I visited, and it was clear she was in a hurry for me to go, and it turned out she was anxious to get to an activity with a friend,” said Karen. “At Haverhill Crossings, there are always people around her, and she just loves them.”

Although Margie is physically independent, they both have peace of mind that if something should happen or if the time comes that she needs assistance with things like bathing or dressing, care is available.

“Living at Haverhill Crossings and being with other people is the best thing in the world for her,” said Karen. “They really know how to bring out the best in people.”

For more information about Benchmark Senior Living at Haverhill Crossings, call 978.647.3586 or visit HaverhillCrossings.com.
Nutrition is a popular topic of conversation, particularly among those embarking on a weight loss or maintenance plan. Individuals carefully study food macros and pore over various diets to get the most out of the foods they eat. When the end goal is simply looking good, it may be easy to forget about the other benefits of nutritious diets, including their link to overall health.

A close relationship exists between nutritional status and health. Experts at Tufts Health Plan recognize that good nutrition can help reduce the risk of developing many diseases, including heart disease, stroke, diabetes and some cancers. The notion of “you are what you eat” still rings true.

The World Health Organization indicates that better nutrition means stronger immune systems, fewer illnesses and better overall health. However, according to the National Resource Center on Nutrition, Physical Activity & Aging, 1 in 4 older Americans suffer from poor nutrition. And this situation is not exclusive to the elderly. A report examining the global burden of chronic disease published in The Lancet found poor diet contributed to 11 million deaths worldwide — roughly 22% of deaths among adults — and poor quality of life.

Low intake of fruits and whole grains and high intake of sodium are the leading risk factors for illness in many countries. Common nutrition problems can arise when one favors convenience and routine over balanced meals that truly fuel the body.

Guidelines regarding how many servings of each food group a person should have each day may vary slightly by country, but they share many similarities. The U.S. Department of Agriculture once followed a “food pyramid” guide, but has since switched to the MyPlate resource, which emphasizes how much of each food group should cover a standard 9-inch dinner plate.

Food groups include fruits, vegetables, grains, proteins and dairy. The USDA dietary guidelines were updated for its for 2020-2025 guide. Recommendations vary based on age and activity levels, but a person eating 2,000 calories a day should eat 2 cups of whole fruits; 2½ cups of colorful vegetables; 6 ounces of grains, with half of them being whole grains; 5½ ounces of protein, with a focus on lean proteins; and 3 cups of low-fat dairy.

People should limit their intake of sodium, added sugars and saturated fats. As a person ages, he or she generally needs fewer calories because of less activity. Children may need more calories because they are still growing and tend to be very active.

Those who are interested in preventing illness and significantly reducing premature mortality from leading diseases should carefully evaluate the foods they eat, choosing well-balanced, low-fat, nutritionally dense options.
Losing interest in an exercise regimen is a situation that many fitness enthusiasts have confronted at one point or another. Overcoming a stale workout routine can be simple for young athletes, whose bodies can typically handle a wide range of physical activities. That flexibility allows younger athletes the chance to pursue any number of physical activities when their existing fitness regimens grow stale.

But what about seniors who have grown tired of their workouts?

Even seniors who have lived active lifestyles since they were youngsters are likely to encounter certain physical limitations associated with aging. According to the Centers for Disease Control and Prevention, the likelihood of dealing with one or more physical limitations increases with age. CDC data indicates that 8% of adults between the ages of 50 and 59 have three or more physical limitations. That figure rises to 27% among adults age 80 and over.

Physical limitations may be a part of aging for many people, but such obstacles need not limit seniors looking to banish boredom from their workout routines. In fact, many seniors can successfully engage in a variety of exercises that benefit their bodies and are unlikely to grow stale.

**Water aerobics**

Sometimes referred to as “aqua aerobics,” water aerobics may involve jogging in the water, leg lifts, arm curls and other activities that can safely be performed in a pool.

The YMCA notes that water aerobics exercises are low impact, which can make them ideal for seniors with bone and joint issues like arthritis.

**Resistance band workouts**

Resistance band workouts can be especially useful for seniors who spend a lot of time at home. Resistance bands are inexpensive and don’t take up a lot of space, making them ideal for people who like to exercise at home but don’t have much space.

Resistance bands can be used to strengthen muscles in various parts of the body, including the legs, arms and back. Resistance bands can be pulled or pushed in any direction, which allows for more versatility in a workout than weight machines and dumbbells. That versatility allows seniors to spice up their workout regimens when things get a little stale.

**Pilates**

Pilates is another low-impact exercise that can be ideal for seniors with bone and joint issues.

According to SilverSneakers, a community fitness program for seniors that promotes living through physical and social engagement, Pilates can help seniors build overall strength, stability and coordination.

SilverSneakers even notes that seniors can experience improvements in strength and stability by committing to as little as 10 to 15 minutes of daily Pilates exercises.

**Strength training**

Seniors on the lookout for something more challenging than a daily walk around the neighborhood should not overlook the benefits of strength training.

The CDC notes that seniors who participate in strength training can stimulate the growth of muscle and bone, thereby reducing their risk for osteoporosis and frailty.

In fact, the CDC notes that people with health concerns like arthritis or heart disease often benefit the most from exercise regimens that include lifting weights a few times each week.

Lifting weights can help reduce the risk of osteoporosis and can also be beneficial to those with heart disease or arthritis.
Take the time to pamper yourself

Pampering means different things to different people. Pampering involves indulging in self-care strategies to improve mental, physical and emotional health.

Pampering can provide a respite from stress, enabling one to switch off his or her brain for a bit. Rest assured that pampering doesn’t have to involve big expenses, and many pampering sessions can take place right at home.

The following are five pampering ideas to explore.

■ 1. Take a nap.
   Getting enough restful sleep is essential for your overall health.

The Sleep Foundation notes that people who work multiple jobs or for extended hours may not have enough time for sufficient sleep, and the Centers for Disease Control and Prevention indicates that 1 in 3 American adults do not get enough sleep.

Getting seven or more hours of sleep per night is important, but you also can add to your sleep bank by taking short naps in the early afternoon. A nap can reduce stress and elevate the mood. Stick to a snooze of 30 minutes or less.

■ 2. Indulge in a luxurious practical item.
   Instead of splurging on something that is whimsical or unnecessary, allocate some disposable dollars to something functional — but put a luxurious spin on it.

Think of buying a set of silk bedsheets or indulge on a high-end cut of meat for a family dinner. You’ll feel rewarded without feeling guilty that you were wasteful.

■ 3. Schedule a salon service.
   Hair, nail or skin services enable you to get away from home for an hour or more and devote time all to yourself. Plus, you’ll have the benefit of walking out of the salon looking like the best version of yourself.

■ 4. Take a hot bath.
   People may be pressed for time when engaging in their daily beauty and grooming routines. A 10-minute shower before work might not provide the relaxation and sense of escape you need.

Set aside a time in the evening to soak in the tub and let stress, as well as aches and pains, melt away in the water. Scent the water with essential oils for a relaxing aromatherapy session.

■ 5. Find a simple pleasure.
   Pampering involves things like a high-end cut of meat or indulging in a luxurious spin on something functional — but put a luxurious spin on it.

Pampering comes in many shapes and forms and is an effective way to reduce stress.

Three strategies to protect mental health

Improving one’s overall health and maintaining that health over the long haul can have a profound impact on quality of life.

For example, the Harvard Medical School notes that regular exercise can slow the natural decline in physical performance that occurs as people age. That means routine exercise can serve as something like a fountain of youth that allows people to keep their cardiovascular fitness, metabolism and muscle function on par with their younger counterparts.

When attempting to improve long-term health, it’s important that people emphasize mental health as much as they do their physical health. The Anxiety & Depression Association of America notes the importance and effectiveness of preventive efforts in relation to depression and anxiety.

In regard to mental health, prevention efforts can function in much the same way that exercise serves physical health. Routine exercise helps people maintain healthy weights, reducing their risk for various conditions and diseases. Preventive efforts designed to improve mental health can significantly reduce a person’s risk for anxiety and depression.

Various techniques and strategies can be used to promote mental health, and these three are simple and highly effective.

■ 1. Get enough sleep.
   According to the Primary Care Collaborative, a not-for-profit member organization dedicated to advancing an effective and efficient health system, sleep and mental health are intimately related. Sleep loss can contribute to emotional instability.

   The amygdala is the part of the brain responsible for humans’ emotional responses. When an individual does not get enough sleep, his or her amygdala goes into overdrive, leading to more intense emotional reactions.

   The prefrontal cortex is another part of the brain that needs sufficient sleep to function properly. Without it, the prefrontal cortex, which is integral to impulse control, cannot function properly.

   Adults can speak with their physicians about how much sleep they should be getting each night. Those needs change as individuals age.

■ 2. Eat a balanced diet.
   A balanced, healthy diet doesn’t just benefit the waistline. According to the ADAA, a balanced diet that includes protein, healthy non-saturated fats, fiber and some simple carbohydrates can reduce the likelihood that mental health issues like fatigue, difficulty concentrating and irritability will arise during the day.

■ 3. Volunteer in your community.
   A 2020 study published in the Journal of Happiness Studies found that people who volunteered in the past were more satisfied with their lives and rated their overall health as much better than people who didn’t volunteer. Perhaps the most noteworthy finding in the study was that people who began volunteering with lower levels of well-being tended to get the biggest boost from volunteering.

   Volunteering provides opportunities to socialize, which can help ward off the loneliness that can sometimes contribute to anxiety and depression.
Humans’ desire to live independently begins in adolescence and continues into older adulthood. Though many seniors can handle the tasks of daily life on their own, others may need varying degrees of assistance.

Seniors have various options at their disposal in regard to finding help to get through daily life. Those who need around-the-clock help typically look to skilled nursing facilities, or SNFs, which are staffed with licensed nurses and therapists who are capable of providing a more advanced level of medical care than home health aides or assisted living facilities can offer.

Seniors who want to plan ahead can shop around for SNFs and make their preference known in their estate planning. When looking for an SNF, seniors and their loved ones can use these tips to find the right facility.

- **Speak with your health care team.** Seniors’ health care teams, including their general practitioners, as well as any doctors who may have treated them for specific diseases or conditions, can be great resources. For example, an oncology team may recommend a local SNF that has a strong track record in working with cancer survivors.

- **Inquire about certification.** According to AARP Medicare Plans, the difference between a skilled nursing facility and a nursing home comes down to the type of care each provides. Care at skilled nursing facilities is provided by trained registered nurses in a medical setting under the supervision of a doctor. AARP Medicare Plans describes this level of care as on par with the level of care patients would receive in a hospital.

- **Give location ample consideration.** When looking for an SNF, location should not be overlooked. The quality of care a facility can provide should be the utmost priority, but the value of choosing a facility that’s close to loved ones cannot be understated, especially for seniors who will be moving in for a lengthy period of time.

- **Visit facilities in person.** According to Commonwealh Medicine, there are more than 15,000 SNFs in the United States. These facilities care for nearly 1.5 million people. With so many facilities across the country, families can surely find one that’s nearby.

- **Online ratings can provide some insight, but nothing can replace the value of an in-person visit.** The American Health Care Association urges families to observe a facility in person so they can gauge its overall environment and whether or not it seems like a peaceful or chaotic place. Pay close attention to residents, and try to determine if they’re well-groomed. These are things that can only be noticed in person, which underscores the importance of these visits.

**WHAT’S THE DIFFERENCE?**

According to AARP Medicare Plans, the difference between a skilled nursing facility and a nursing home comes down to the type of care each provides. Care at skilled nursing facilities is provided by trained registered nurses in a medical setting under the supervision of a doctor. AARP Medicare Plans describes this level of care as on par with the level of care patients would receive in a hospital.

Nursing home care is provided largely by licensed practical nurses and nurse aides under the supervision of a registered nurse. Nursing home care tends to focus on custodial care, which emphasizes helping residents perform daily tasks like dressing, bathing and eating.

Some facilities may offer both skilled nursing care and nursing home care. They may separate patients who need such types of care by designating certain floors or sections.
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Can virtual reality be beneficial to older people? Study hopes to find out

BY TERRY SPENCER
ASSOCIATED PRESS

Terry Colli and three other residents of the John Knox Village senior community in Pompano Beach, Florida, got a trip via computer to the International Space Station in the kickoff to a Stanford University study on whether virtual reality can improve the emotional well-being of older people.

Donning 1-pound headsets with video and sound, the four could imagine floating weightless with astronauts and get a 360-degree tour of the station. In other programs, residents can take virtual visits to Paris, Venice, Egypt or elsewhere around the globe; attend a car rally; skydive; or go on a hike.

“I feel great. It is amazing. It is like you are really there,” said Colli, 73, a former spokesman for the Canadian embassy in Washington.

Stanford’s Virtual Human Interaction Lab is working with John Knox’s 1,200 residents, who will have ready access to the equipment under the supervision of staff members. The goal is to see whether virtual reality can improve their moods, strengthen their relationships with staff and make them more receptive to technology. Other senior communities in the United States and elsewhere will soon be added by the California university.

Virtual reality works by making what the person sees and hears track with what they are doing. In a VR trip to Paris, for example, a participant might turn to the left and see the Eiffel Tower with a musician playing in the foreground and then turn right and find two people conversing. If the participant moves toward one, that sound increases while the other diminishes.

“There is a fair amount of previously published research by academic labs around the world that shows VR, when administered properly, can help reduce anxiety, improve mood and reduce pain,” said Jeremy Bailenson, the Stanford lab’s founding director.

“This particular study is focused on how using VR might reduce the residents’ feelings of isolation from the outside world — all the more important after the isolation we all faced during the pandemic.”

During the June 1 demonstration at the suburban Fort Lauderdale community, Colli; Anne Selby, 77; Mark Levey, 64; and Hugh Root, 92, moved their heads from left to right and up and down as they got individual tours of the space station.

“It really felt like you were traveling — and not alone either. In some of the video, there are people,” said Levey, a former federal government worker.

Selby, an artist, said that she felt a bit nauseated as she moved through the space station because it was so realistic, but that she was able to cope by taking deep breaths.

“Regardless of my age, I was right in the middle of it,” she said.

Root, a retired insurance salesman, was blunt: “It blows my mind.”

Chris Brickler, CEO of MyndVR, the Dallas company that provided the equipment, said that volunteers are screened to assure they are mentally suitable for using virtual reality and each attendant has an abort button if the person becomes overwhelmed by the experience. John Knox’s residents include people and couples who live alone, in assisted living and with full-time nursing.

“As we age, we feel there is a disconnect sometimes that can happen when there is a lack of mobility,” Brickler said. “We can’t travel as much as we want, we can’t connect with nature as much as we want, can’t have connections with animals. All sorts of connections get lost, and our four walls start shrinking in. What we have tried to do is create a platform where we can bring the world back.”

Monica McAfee, John Knox’s chief marketing and innovation officer, said the community’s administrators believe VR helps residents — it’s been used on a limited basis there for three years — but Stanford’s study “will provide the empirical data.” For example, she said, they want to know if VR can help residents with dementia who suffer from “sundowning” — severe mood swings that begin at dusk.

“Is this a way to redirect them to enjoy something?” she said.

Northern Ohio University associate philosophy professor Erica Neely, who studies the ethics of technology, said it’s important that Stanford is getting fully informed consent, screening participants and making sure they aren’t using VR alone, especially at first. She is not involved in the study.

“We definitely don’t want anyone to get stuck in the experience if they become distressed and can’t figure out how to turn it off,” she said. “The fact that there is a companion/caretaker who can go with (the participant) is utter genius. ... The idea of, ‘Well, we don’t necessarily have people with diminished capacities wandering around by themselves through physical space — maybe we can do the same for virtual space’ was a really good one.”
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