Opioid addiction: A deadly epidemic, hidden among the senior population

By Constance Garcia-Barrio

Opioid addiction seems to have launched a stealth attack on seniors. Falls and forgetfulness, which are possible signs of addiction, may masquerade as normal issues of aging. Family and friends of an addicted person may chalk up his or her more negligent grooming and housekeeping to the decreased energy of advanced age. And a senior with an addiction may be seen as simply following the doctor’s orders by repeatedly refilling a prescription for pain medication.

“There was an 82-year-old man who’d been on oxycodone for 15 years,” said Sharon Matthew, clinical director of the Older Adult Program at the Caron Foundation, which provides treatment for addictions at facilities in Plymouth Meeting and Wernersville in Pennsylvania, as well as in Florida.

Opioid addiction has been dubbed “the hidden illness,” and the soaring number of affected seniors has led experts to call it an epidemic. The Substance Abuse and Mental Health Services Administration (SAMHSA) says that the number of elderly people who need substance abuse treatment will increase to 4.4 million by 2020, up from 1.7 million in 2003.

Pain may push seniors to use opioids, which include fentanyl, hydrocodone, codeine, morphine and methadone, as well as the illegal drug heroin, but other factors may lead to the abuse of the drugs, which reduce the perception of discomfort. “Older adults may attempt to self-medicate due to depression and isolation,” Matthew said, “or the person may feel at loose ends after retirement. Opioids seem like a temporary solution, but before people know it, they’re dealing with full-blown addiction.”

The risk of addiction

Al Meyer, 75, agrees that it’s all too easy to slip into addiction. Meyer is a counselor at Gaudenzia, a Philadelphia-based drug and alcohol rehabilitation center with 90 facilities in Pennsylvania, Maryland and Delaware that treat people with co-occurring substance abuse and mental illness. “I was prescribed Vicodin, which contains an opioid, after having dental surgery,” said Meyer, who teaches addiction studies at the Community College of

By Marcia Z. Siegal

Horticulture provides joyful, leafy therapy

Flowers bloom year-round at the Cathedral Village continuing care retirement community in Roxborough. And for many residents, joy blossoms with the tomatoes, herbs, cacti and other plants they help to cultivate.

More than 300 people live in the community, which offers independent living, assisted living, skilled nursing and short-term rehabilitation. Many of them participate in horticultural activities, which are known to be good for mind, body and spirit, residents say.
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The right diet can benefit brain

It’s often been said that “you are what you eat.” Increasingly, research links that adage to brain health. “A poor diet can increase the risk of developing hypertension, cardiovascular disease, obesity and diabetes, which in turn can end up compromising an individual’s cognitive function … A good diet reduces the risk of chronic illness and is beneficial to the brain,” reported Judith Graham in Kaiser Health News. “Diets designed to boost brain health, targeted largely at older adults, are a new, noteworthy development in the field of nutrition.”

According to the Cleveland Clinic, research shows that a Mediterranean-style diet rich in fish, whole grains, green leafy vegetables, olives and nuts helps maintain brain health and may reduce the risk of Alzheimer’s disease. The Mediterranean diet emphasizes fresh fruits and vegetables and whole grains, with olive oil as the primary source of fat. The beneficial effect of the diet on cognition likely stems from the abundance of antioxidants and anti-inflammatory agents that the foods provide, researchers say.

At Rotman Research Institute (RRI), an international center for the study of human brain function located in Toronto, Canada, scientists developed the Canadian ”Brain Health Food Guide” to help adults 50-plus preserve their thinking and memory skills as they age.

Carol Greenwood, Ph.D., RRI senior scientist and co-author of the guide with Matthew Parrott, Ph.D., notes that “the traditional high fat, low fiber, low fruit and vegetable North American diet is not good for our brains.” She advises that “there is increasing evidence in scientific literature that healthy eating is associated with retention of cognitive function, but there is also a lot of misinformation out there such as promotion of ‘superfoods’.”

In the guide, Greenwood advises that people focus on an overall pattern of healthy eating, not one specific “superfood,” for brain health. (For instance, older adults are encouraged to eat berries or cruciferous vegetables, such as cauliflower, cabbage and Brussels sprouts, rather than a specific type of berry or vegetable.)

She suggests:

- Eat fish, beans and nuts several times a week
- Include healthy fats from olive oil, nuts and fish in your diet
- Add beans or legumes to soups, stews and stir-fried foods
- Embrace balance, moderation and variety
- Choose whole grains rather than refined grains
- Use low-fat milk, yogurt and cheese
- Use extra-virgin olive oil as your main culinary oil for cooking, salad dressings, and an additive to bread and foods
- For more information:
  - “Brain Health Food Guide”: Go to baycrest.org and type “Brain Health Food Guide” in the search window.
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While suicide is often thought to be most common among teens and young adults, it is actually higher in the elderly. At a point in life when older people might think about what it means to live and what footprint they will leave on this planet, many of them think about killing themselves, said Patrick Arbore, Ed.D., founder and director of the Institute on Aging’s (IOA’s) Center for Elderly Suicide Prevention and Grief Related Services (CESP).

“In our culture, we often combine aging with depression instead of separating those things out,” Arbore said. Many people assume it is natural for the elderly to be depressed, and many older adults are reticent to seek help due to the stigma long associated with mental illness, including depression, but depressed older adults often respond positively to intervention, he noted. “In most cases, their depression can be treated,” he said.

According to the American Association of Suicidology, the latest data (from 2015) shows that the suicide rate for people 65-plus is 16.6 suicides per 100,000 individuals compared to a rate of 13.8 for all ages and 12.5 for people age 15 to 24. One elderly suicide occurs every 80 minutes. People 85-plus commit suicide at a rate of 19.4 per 100,000, just behind people 45 to 64, whose rate is 19.6.

At risk for depression

Physical health status, especially if it impairs function, is the most consistently reported risk factor for the onset and persistence of depression in later life, Arbore said. Often accustomed to being independent, older people may experience a loss of autonomy and dignity as they age. Nearly half suffer from one or more chronic diseases, and deteriorating health may cause them to become dependent on others. Some fear mental deterioration and becoming incapacitated, especially if they have received a diagnosis such as Alzheimer’s disease, and may view suicide as a way to avoid such a fate. In the face of such challenges, they may perceive themselves as burdens, rather than as complete human beings, resulting in feelings of hopelessness and low self-esteem.

“Is there a time in our lives when it’s okay to be dependent? That’s a challenge in a society that values independence and productivity,” Arbore said. Ageism, the systematic stereotyping of and discrimination against people because they are old, is prevalent in American society and often adds to depression in the senior years, he pointed out. “Many people feel that the worst thing to be is old,” he said, “so they fight aging instead of embracing it as a part of life.”

Situational factors can also trigger depression as people age, such as the loss of loved ones, financial stress, retirement and social isolation, Arbore said. A number of older adults “self-medicate” through substance abuse to alleviate their emotional pain, he added.

An overlooked epidemic

The abuse of alcohol and drugs among the elderly has been called an invisible epidemic. It affects up to 17 percent of older adults but is often overlooked or misdiagnosed by family and health care providers because its symptoms, such as memory loss, confusion and shakiness, can mimic other aging-related problems.

Arbore calls the relationship among depression, substance abuse and suicide “the deadly triangle” because they often occur in tandem. Substance abuse can precipitate suicidal thoughts or acts by loosening inhibitions, increasing impulsiveness and impairing judgement. It can also lead to poorer health, physical and mental impairment, and decreased quality of life, causing or exacerbating depression and increasing the risk of suicide, Arbore said.

While older adults are more likely to commit suicide compared to the general population, they represent only a small percentage of calls to suicide hotlines, he noted. Arbore founded the Friendship Line – 800-971-0016 – in 1973 as part of CESP to change that. Accredited by the American Association of Suicidology, this national hotline serves people 60-plus, their caregivers and adults living with disabilities who may be lonely, isolated

Suicide prevention resources

If you or you or someone you know is in immediate danger because of thoughts of suicide, call 911 immediately.

Other 24/7 resources:
• Suicide Crisis and Intervention Hotline (Philadelphia Department of Behavioral Health and Intellectual Disability Services): 215-686-4420
• Friendship Line (Institute on Aging’s Center for Elderly Suicide Prevention): 800-971-0016
• National Suicide Prevention Lifeline: 800-273-TALK (8255)
• Military Veterans Suicide Hotline: 800-273-TALK (Press 1)
• Suicide Hotline – in Spanish: 800-273-TALK (Press 2)
bereaved, depressed, anxious and/or thinking about death or suicide. It offers crisis intervention, counseling, emotional support, well-being telephone checks and medication reminders from Friendship Line staff and volunteers, and information and referral. An average of 14,000 people call the Friendship Line each month, including a substantial proportion from the Philadelphia area, Arbore said.

“Older adults ‘cry for help’ in markedly different ways than teens, because depression looks different when we age,” IOA notes on its website. “Depressed older adults are more likely to be irritable than sad, and to complain about physical ailments that their doctor can’t find a reason for. When young people talk about suicide or say, ‘I want to die,’ older adults are more likely to say, ‘There’s no place for me’ or ‘I don’t want to be a burden.’”

Intervention by family members and professionals seeking to help older adults in this situation consists of two phases, Arbore said: first, crisis intervention to protect the person during a time of significant suicidal risk; and second, treatment of any underlying problems, such as a depressive disorder, alcohol abuse, bereavement, or adjustment to a chronic or terminal illness. It is important to inquire about any suicidal thoughts the person expresses, he said.

Among the practical prevention measures Arbore advises:

- Listen to the cry for help when someone talks about suicide or exhibits warning signs. (See box below.) Talking openly about the person’s suicidal thoughts and feelings may save a life.
- Involve others in seeking solutions. If the person says he is considering suicide, enlist professional help such as a family doctor, a mental health professional, a 24-hour crisis line or even a hospital emergency room if the person is imminently at risk. It is also important to enlist familial, friendship and social supports. If the person is at immediate risk of harming himself, do not leave him alone until he has been assessed and received help from a competent professional or until another trustworthy adult arrives to stay with him.
- Help the person find a viable answer to his problem(s): Refer the person to a suicide prevention hotline (see box on page 4) for advice and connection to mental health resources. If the person is suffering from substance abuse, a suicide prevention hotline or mental health professional can provide referrals to appropriate resources.

By paying attention to warning signs and seeking help when appropriate, you may be able to save a life.

Contact Marcia Z. Siegal at msiegel@pcaphl.org.

Take note: Warning signs of suicide risk

The following warning signs can help to identify risk of suicide in older adults, according to the American Association for Marriage and Family Therapy.

- Loss of interest in activities that are usually found enjoyable
- Cutting back social interaction, self-care and grooming
- Breaking medical regimens (such as by going off diets or prescriptions)
- Experiencing or expecting a significant personal loss (such as the death of a spouse)
- Feeling hopeless or worthless
- Putting affairs in order, giving things away or making changes in wills
- Stockpiling medication or obtaining other means of ending one’s life

Other clues are a preoccupation with death or a lack of concern about personal safety. Remarks such as “This is the last time that you’ll see me” or “I won’t be needing any more appointments” should raise concern. The most significant indicator is an expression of suicidal intent.
By Barbara Sherf

In 2012, Kyle Tevlin had been to several “ho hum” funerals and decided to plan her funeral and add some fun to it. The idea morphed, and her business, I Want a Fun Funeral, was launched.

Tevlin, 57, still works as a graphic artist while building the cottage company she feels so passionate about.

“We tend to follow the traditional funeral home model of a viewing, service, burial and meal, but I believe there can be so much more than that,” Tevlin said. “Death is not a failure; it’s a normal part of life. It can be so much better to inject happiness and laughter into this final farewell.”

In an October course she taught through Mt. Airy Learning Tree, Tevlin helped participants understand their funerals while gaining ideas about how they could inject more of their personalities into their goodbye parties.

“People put a lot of energy and creativity into fun birthdays, weddings and retirement celebrations, so why not do something inspiring at the end of life?” Tevlin asked.

She cited the example of a cat lover who wants her friends to skip a formal service and spend the day playing with the cats at a shelter and perhaps adopting one in her honor. Then there is the connoisseur of low-priced “value wines” who wants his friends to open his bottles and gather to lift a glass in his memory.

“People are taking their life celebrations to the ballpark, beaches, bars, parks, amusement parks. Whatever location has the most meaning for them,” Tevlin said. “You need to plan it ahead of time and give your loved ones permission to carry out a non-traditional funeral, or chances are it won’t happen.”

Tevlin has her plans in place. She is donating her body to science through Humanity Gifts Registry (hgrpa.org) at Jefferson Hospital. As for the fun part of it?

“My family likes games, and I like crafts, so I’m asking them to get a miniature coffin and spend an afternoon decorating it and tossing in notes or memories while sharing stories and laughs,” she said. “My playlist, which I’m always adding to, can be playing in the background.” Because fun has been a big part of her life, Tevlin feels confident her goodbye will be lighthearted. And all of her “stuff” will be disposed of via a silent auction, with the proceeds going to The Hunger Project.

A member of the nonprofit Funeral Consumers Alliance, Tevlin also educates consumers about hosting home funerals, what to do with ashes or cremains, and green burials.

“I know somebody who has asked that his ashes be put into 18 separate bags and sprinkled at the 18 holes of his favorite golf course,” Tevlin noted. “Others have let Monarch butterflies loose at their backyard service. People don’t realize how many options are out there.”

Tevlin likes the idea of having a trivia contest about the deceased with appropriate prizes and prayer cards with a photo and favorite saying, poem or quote. She knows of a writer who wants a personalized bookmark created and given away, a gardener who would like her seed collection distributed, and a cook who would like recipe cards handed down.

“For foodies, is there a favorite restaurant and specialty item you would like family and friends to gather at and try? Or maybe a more intimate potluck at someone’s home? How about an ice cream sundae party? One woman was adamant about having a sit-down dinner versus a buffet,” Tevlin said. “She simply hated buffets.”

Tevlin has heard of everything from motorcycles to convertibles and from tractors to horses pulling a casket.

She believes pets can play an important role in a funeral.

“I know an animal lover of the highest order who said if it were up to her she’d only have animals at her funeral but has opted to defer to her family on that one,” she said. “If you don’t know what you want regarding any of the planning, you can always put DTF or Defer to Family on the checklist,” said Tevlin, who provides workshop participants with a checklist for planning their funerals.

Tevlin believes there is no idea that is "too out there."

“If you Google it, it’s probably been done,” she said.

“Fun funeral” planner Kyle Tevlin holds a decorated Grim Reaper scythe during a funeral planning workshop.

Tevlin is available to host fun funeral planning parties. For more information, go to Iwantafunfuneral.com.

Barbara Sherf captures the stories of individuals in print, audio and video. She can be reached at CaptureLifeStories@gmail.com or 215-990-9317.
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Resilience and reinvention: Meet self-made videographer Gerald Kolpan

By Sally Friedman

Growing up as one of three very different brothers in New Rochelle, New York, Gerald Kolpan had to discover his own unique destiny. Kolpan was the youngest of the siblings; his oldest brother had taken the tough-guy spot, while his middle brother occupied the scholar-athlete position. So this youngest brother settled on the hippie/radical identity, combining that with “family artist.”

“Six colleges rejected me, and I ended up briefly in a rock and roll band singing and playing guitar,” he says. And in his case, life itself can be fluid and that one thing can lead to another,” he says. And in his case, that’s precisely what happened.

An unexpected turn

Expertise in illustration led to Kolpan’s working with various media, including newspapers and magazines, in a world of deadlines and, too often, little money.

“And then one day I heard National Public Radio’s ‘All Things Considered,’ and I became a regular contributor doing commentaries,” he says.

The turn was unexpected, not scrupulously planned. But for Kolpan, that connection was the start of a new and deeply fulfilling chapter. Not averse to trying new things, Kolpan started chatting up celebs like performer Uncle Floyd and investigating establishments like the famous Levis’ Hot Dogs & Sandwiches – people and places that intrigued him, and also, as it turned out, intrigued others.

A huge life change came when Kolpan married Joan Weiner, a Philadelphia public school librarian and the woman he calls “my Jewish saint,” in 1982. The family happily expanded when a son and daughter were born.

Kolpan’s ability to remain open to new possibilities was called upon next in 1987 when he received an invitation to continue his on-air work. And then came the life-changer. Kolpan decided to launch his own nonprofit devoted to visually telling the stories of those other nonprofits in hopes of giving them visibility and viability in a world in which for-profits have huge budgets and support.

“You reach a point in life when you seriously want to do some good, and yes, give back. I was there,” he says.

Kolpan would learn that his tech-savvy colleagues would be happy to tutor him. “Interestingly, when it was my time to help others, others were willing to help me,” he says. “That’s a very nice balance.”

The learning curve was steep, but so was Kolpan’s motivation. And thus was born The Philo Project, a non profit created and run by this former on-camera TV personality. The name is primarily an homage to Philo T. Farnsworth, the man who invented television.

Kolpan makes videos for little-known nonprofits with budgets of less than $1 million.

• continued on page 22
The aging brain: Myth versus fact

Science has proven that brain health can be cultivated and nurtured over a lifetime and is not limited by age. Leading a mentally active lifestyle, which promotes brain resilience and encourages emotional, cognitive, spiritual and relational health, can keep your brain functioning well throughout your lifetime. Learning about the difference between myth and fact when it comes to your brain’s functions and health will help to dispel the rumors and put your mind at ease.

<table>
<thead>
<tr>
<th>MYTH</th>
<th>FACT</th>
</tr>
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<tbody>
<tr>
<td>Your brain stays fully vibrant and active until old age, when you start to suddenly become forgetful.</td>
<td>The human brain begins to age in a person’s 20s. This aging process continues gradually over a lifetime.</td>
</tr>
<tr>
<td>There’s nothing you can do to slow the brain’s aging process, or dementia.</td>
<td>Research shows that eating well, limiting stress, staying engaged with others and stimulating your brain can slow brain aging and disease progression.</td>
</tr>
<tr>
<td>Crossword puzzles will help keep your mind active.</td>
<td>Doing the same thing repeatedly won’t boost brain power. You need to engage in new activities that are challenging.</td>
</tr>
<tr>
<td>Computerized “brain games” can make you smarter.</td>
<td>In 2014, 70 of the world’s leading brain scientists released a statement rejecting the notion that computerized brain “training” can improve cognition. Proven brain boosters include meditation and socialization.</td>
</tr>
<tr>
<td>Old age should be a time of purely relaxation and enjoyment.</td>
<td>A sense of purpose preserves cognition and reduces the risk of dementia.</td>
</tr>
<tr>
<td>Older people aren’t as affected by stress.</td>
<td>Chronic stress has a worse effect on the minds and bodies of people 60-plus than on younger people. Stress can cause anxiety and depression, as well as impair memory.</td>
</tr>
<tr>
<td>Once you get to a certain age, you can eat whatever you want.</td>
<td>Healthy eating is a key component of vascular and brain health. A diet rich in whole grains and fresh produce but low in meats and sugar can promote healthy blood flow to the brain and cut your risk of dementia in half.</td>
</tr>
<tr>
<td>Older people have earned the right to be sedentary.</td>
<td>The brain’s vitality depends on a healthy circulatory system, which is supported by exercise. Conditions such as diabetes, hypertension, high cholesterol and obesity can contribute to cognitive decline. Brain damage caused by poor cardiovascular health contributes to the risk of stroke and dementia.</td>
</tr>
<tr>
<td>Older people cannot learn new things.</td>
<td>The ability to create new memories may be diminished with age, which makes it harder to learn. But if an older person takes time to focus and concentrate, he or she will remember new information as well as a younger person.</td>
</tr>
<tr>
<td>The older brain slows, and people forget prior knowledge.</td>
<td>A person’s skills are at their finest after they have been refined over a lifetime. Research suggests that a slowing in mental processing reflects the wealth of information an older brain has stored.</td>
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Brain/Mental Health

New book offers overview of medical, behavioral symptoms in Alzheimer’s patients, gives advice

By Constance Garcia-Barrio

An Alzheimer’s diagnosis may leave a family stunned and silent. Then comes a flood of questions: What is Alzheimer’s disease? How will it progress? What will our loved one need?

“The Alzheimer’s Medical Advisor: A Caregiver’s Guide to Common Medical and Behavioral Signs and Symptoms in Persons with Dementia,” published earlier this year, provides a wealth of answers. Edited by geriatrician Philip D. Sloane, M.D., M.P.H., this book emphasizes the medical challenges that may arise when one is caring for an Alzheimer’s patient. “Most books on Alzheimer’s disease focus on behavioral issues,” said Sloane, 65, a professor of family medicine at the University of North Carolina at Chapel Hill who has managed and researched aging-related issues for 35 years. “The typical family caregiver has to handle medical issues, too. Our research shows that over a six-month period, the average family caregiver must decide what to do about seven new or worsening problems.”

The book’s main chapter covers 54 conditions Alzheimer’s patients may experience, along with ways to decide whether the situation merits a trip to the emergency room. Sloane chose the most common conditions in senior patients, their most frequent complaints to caregivers, and problems that most often lead to emergency room visits or hospitalizations. The issues range from burns to changes in sexual behavior. The discussion of each situation runs two pages and includes basic facts, signs of a possible emergency – for instance, facial swelling in the case of dental problems – and tips on providing relief at home. Most discussions have a sidebar on how caregivers can handle their own stress and safety, in addition to a separate chapter on how caregivers can take care of themselves.

Other chapters cover medication management, the health care system, hiring help, and hospice care.

The book uses clear language, charts and sidebars that make the information easy to understand. Photos and quotes from caregivers help create a sense of community. The book also includes loads of practical tips, such as listing developments with the patient on a bulletin board to keep all caregivers up-to-date.

“The Alzheimer’s Medical Advisor” stands out in spotlighting medical issues and its visual appeal and superb organization.

Sloane’s experience includes caring for his late mother. “She died at age 98 and had cognitive problems late in life,” he said. In addition, “my stepfather was managed at home with dementia for years.” He offers three tips for caregivers:

• Be proud of what you’re doing.
• Keep a positive attitude. Remember things you’re grateful for, and try to keep your sense of humor.
• Don’t be afraid to ask for help. Caregivers need care, too.

Constance Garcia-Barrio is a freelance writer and author of a novel about African-American history in Philadelphia.

Federal Trade Commission tips: 10 things you can do to avoid fraud

Crooks use clever schemes to defraud millions of people every year. They often combine new technology with old tricks to get people to send money or give out personal information. Here are some practical tips to help you stay a step ahead of fraud.

Spot imposters.

Scammers often pretend to be someone you trust, like a government official, family member, charity or company you do business with. Don’t send money or give out personal information in response to an unexpected request – whether it comes as a text, phone call or email.

Do online searches.

Type a company or product name into your favorite search engine with words like “review,” “complaint” or “scam.” Or search for a phrase that describes your situation, like “IRS call.” You can even search for phone numbers to see if other people have reported them as being linked to scams.

Don’t believe your caller ID.

Technology makes it easy for scammers to fake caller ID information, so the name and number you see aren’t always real. If someone calls asking for money or personal information, hang up. If the caller purports to be a person or business you know, call them at a number you know is genuine.

Don’t pay up-front for a promise.

Someone might ask you to pay in advance for things like debt relief, credit and loan offers, mortgage assistance or a job. They might even say you’ve won a prize, but first you have to pay taxes or fees. If you do, they will probably take the money and disappear.

Consider how you pay.

Credit cards have significant fraud protection built in, but some payment methods don’t. Wiring money through services, like Western Union or MoneyGram, is risky because it’s nearly impossible to get your money back. That’s also true for reloadable cards, like MoneyPak, Reloadit or Vanilla. Government offices and honest companies won’t require you to use these payment methods.

Talk to someone.

Before you give up your money or personal information, talk to someone you trust. Con artists want you to make decisions in a hurry. They might even threaten you. Slow down, check out the story, do an online search, consult an expert – or just tell a friend.

Hang up on robocalls.

If you answer the phone and hear a recorded sales pitch, hang up and report it to the FTC. These calls are illegal, and often the products are bogus. Don’t press 1 to speak to a person or to be taken off the list. That could lead to more calls.

Be skeptical about free trial offers.

Some companies use free trials to sign you up for products and bill you every month until you cancel. Before you agree to a free trial, research the company and read the cancellation policy. And always review your monthly statements for charges you don’t recognize.

Don’t deposit a check and wire money back to anyone.

By law, banks must make funds from deposited checks available within days, but uncovering a fake check can take weeks. If a check you deposit turns out to be a fake, you’re responsible for repaying the bank.

Sign up for free scam alerts from the FTC.

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If you spot a scam, report it at ftc.gov/complaint. Your reports help the FTC and other law enforcement investigate scams and bring crooks to justice.

Information provided by the Federal Trade Commission
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注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-877-381-3765 (TTY: 1-800-361-2629)。

Y0069_18_1310 Accepted
• Lung and Pancreatic Cancer Awareness Month
• National Alzheimer’s Disease Awareness Month
• National Family Caregivers Month

Milestones

Events that are free may request a
A New View of Funerals.
Options & alternatives for “life celebra-
2:30 p.m. The Rock School for Dance Education

SATURDAY

3

Broadway Philadelphia Presents “Finding
Nedavick” 1-2 p.m. at the Academy of
Magnet Theater. 215-569-8080.

24

Thanskgiving Outdoor Markets

Fall Market & Craft Bazaar. 9 a.m. to
2 p.m. Gloria Del Norte. 215-728-0300.

10

Veterans Day (Observed)

10

Philadelphia Chamber Music Society Presents
Soprano Barbara.
Phila. Chamber Music Society Presents
Pianist Benjamin Grosvener. 8 p.m.
Kimmel Center. 215-546-8800.

9

Great American SNOOKER
Christmas Banquet. Gifts, food, jewelry,
dishes, pantry. 10 a.m. - 2 p.m. Hart
Marais Retirement Home. 483-1575.

15

Managing Fibroids.

26

What’s the Deal with Online Shopping?
Learn how to take advantage of the best
deals. Bring credit or debit card if you
plan to make purchases. 10 a.m. Center
in the Park. 215-486-7722.

28

Yoga in the Galleries. 7 p.m. Philadelphia
Space limited. Check-in at visitor services
desk. Presented by Diligent Yoga.

29

Future of Conversation. Leading
thinkers, including National Interest
editor Jackson Marshall & New York
Times writer Sam Tanenhaus, discuss what it means to be a citizen in the
21st century. 7 p.m. Athenaeum.
(notes: 20-21).

30

Veterics Day Information Session.
Options for weight that threatens health.
8:30-9 p.m. Nazareth Hospital. Room 247.
557-7682.

1

Bariatrics Information Session.
Options for weight that threatens health.

2

LGBT Elder Initiative Coffee Chat.
Hopscotch. Options for end-of-life care.
11 a.m. Williams Roy Community Center.

9

SUNDAY

DAYLIGHT SAVING TIME ENDS

SUNDAY on Stage: Thunderbird Amer-
Indian Dancers. Dance of various
North American nations, accompanied
by song & drumming. Doors 1:30 p.m.;
show 2 p.m. Pabst Center. Public.

5

Philadelphia Choral Society Presents
works by Poll, Metheny.
Works by Puccini, Momenta Quartet.
Phila. Chamber Music Society Presents
works by Schumann, Brahms.
Phila. Chamber Music Society Presents
works by Hummel & Naumann.

20

Recent Cancer Support Group.
12:30 p.m. Center in the Park. Public.

20

Philadelphia Chamber Music Society
Presents soprano Barbara.
Hannigan & Pianist Brandon de Leuw.
Works by Satie. 8 p.m. Kimmel Center.

21

Laptop Lab & Computer Help.
Work-skills classes with tutoring &
instruction. The lab can accommodate
up to 20 students. Register in advance.

21

Second Senior FITPAK Class.
30 min. held inside by an experienced
volunteer guide. 1 p.m. Center. Register.

22

First Senior FITPAK Class.
30 min. held inside by an experienced
volunteer guide. 1 p.m. Center in the Park.

22

Loathe & Flume. Plays “Blink,”
& movie screening “Full Metal Jacket.”
10 a.m. Manor Luther King Adult
Center. 215-566-0605.

14

Antal Aziz Concert. Discover the
music of promising young classical
musicians. Double-bass sensation Xavier Folié
& pianist Juno Kerr. 1 p.m. Kimmel Center.

13

Camping County. How to Marci-
2:30 p.m. Center in the Park. Public.

13


12

Philadelphia Chamber Music Society
Presents violinist Stefan Jackiw & pianist Anna
Fernandez. Works by Schubert. Kuhlen
& Fulmer. 3 p.m. Kimmel Center, Perel-
man Theater. 215-569-8080.

11

Bread Pumpernicking Seminar.
9 a.m. to 11 a.m. Center in the Park. 215-246-
5879.

15

World Diabetes Day

8

World Diabetes Day

Philadelphia Bazaar.
10 a.m. - 2 p.m. Harmony Place.

16

Philadelphia Chamber Music Society
Presents soprano Barbara.
Hannigan & Pianist Brandon de Leuw.
Works by Satie. 8 p.m. Kimmel Center.

21

Future Senior FITPAK Class.
20 min. held inside by an experienced
volunteer guide. 1 p.m. Center in the Park.

22

Donuts that end with a S require an
entrance fee or admission ticket purchase.
Donuts that are free may request a
donation or an exact change for sale.
Please call the number listed for pricing
or other information about the event.
Send your calendar items to:
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PCA Communications Department
443 North Broad Street
Philadelphia, PA 19130-3409.
Phone: 215-546-8800, ext. 5054.
Fax: 215-546-9006.
Email: milestonemenu@pcacomm.org.

26

Winter Wellness Walk. Walk until
frozen paths led by an experienced
volunteer guide. 1 p.m. Center. Register.

26

WEDNESDAY

Rubber Stamping Club & Card Making
Class. 2:30-4:30 p.m. Center in the Park.
215-486-7722.

1

THURSDAY

A New View of Funerals.
Options & alternatives for “life celebra-
2:30 p.m. Temple Emanuel. Sectional.
215-546-1106.

2

Smoke Education. Class to guide
pupils through recovery & reduce risk
factors 2:30-3 p.m. office blogs. Phila. Hospital. 215-
744-5952.

3

Bariatrics Information Session.
Options for weight that threatens health.
11 a.m. Nazareth Hospital. Room 247.
557-7682.

1

Saturday: Senior Expo & Health Fair.
Drive throu & giveaways. 10 a.m. to 1 p.m.

16

MARIAN’S DAY

14

Sundays on Stage: Thunderbird Amer-
Indian Dancers. Dance of various
North American nations, accompanied
by song & drumming. Doors 1:30 p.m.;
show 2 p.m. Pabst Center. Public.

5

Philadelphia Chamber Music Society
Presents violinist Stefan Jackiw & pianist Anna
Fernandez. Works by Schubert. Kuhlen
& Fulmer. 3 p.m. Kimmel Center, Perel-
man Theater. 215-569-8080.

12

Camping County. How to Marci-
2:30 p.m. Center in the Park. Public.

13


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Space limited. Check-in at visitor services
desk. Presented by Diligent Yoga.

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Future of Conversation. Leading
thinkers, including National Interest
editor Jackson Marshall & New York
Times writer Sam Tanenhaus, discuss what it means to be a citizen in the
21st century. 7 p.m. Athenaeum.
(notes: 20-21).

30

The Rock School for Dance Education
Presents “Nutzation 1724.” A 70-minute
ballet featuring rising stars from around
the world in a high-energy adaption of
the holiday classic. 7 p.m. Merriam
Center. (notes: 20-21).

24

Tellurion 2017: Transformation –
Stories of Magic, Chaos, Renewal.
2 p.m. Church of St. Martin in the
Fields. Presented by Patchwork Story-
telling Guild. patchworkstorytelling.org.

18

Veterics Day Information Session.
Options for weight that threatens health.
8:30-9 p.m. Nazareth Hospital. Room 247.
557-7682.

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Bariatrics Information Session.
Options for weight that threatens health.
11 a.m. Nazareth Hospital. Room 247.
557-7682.
Philadelphia. "It was for far more pills than I needed. The dentist just wanted to make sure that I didn’t have pain. But I’m a recovering alcoholic, so I’m very aware of the possible effects of opioids. I have an addictive background, so I discarded what I didn’t need."

Andrew Rosenzweig, M.D., chief of the division of geriatric medicine at Einstein Medical Center, has seen many similar situations. "The problem creeps in when people get too much medication for too long," he said. "Opioids are to be used in acute cases – for instance, to ease pain from a broken bone or in cases of cancer."

John, 87 (who gave no last name), spoke on a Fox 29 segment available on YouTube about becoming hooked on Oxycodone. He began taking the drug while recovering from back surgery. "My doctor of 40 years prescribed the medication for pain," he said. "I’m not going to give up the pills now. I’m doing the best I can."

Problems sometimes have arisen when doctors have prescribed opioids inappropriately, said psychiatrist David Gastfriend, M.D., a consultant for the American Society of Addiction Medicine in Philadelphia. "Big pharma players such as Purdue, developer of Oxycontin, marketed drugs that were meant for terminal cancer pain as suitable for mild to moderate pain and then induced doctors to seek the elimination of pain completely," he said. "But pain is a natural, valuable phenomenon that shouldn’t be chemically eliminated. It’s the body’s way of telling the brain to protect the body and foster healing." This strategy sold billions in these drugs (and ultimately put some of the pharmaceutical executives in jail).

Seniors may be at risk of an opioid overdose, and also of a toxic cocktail of opioids and other medications. "Some medicines in combination with opioids can lead to decreased breathing – in other words, problems from a lack of oxygen," Rosenzweig said. "In addition, if a person drinks even moderately, it can have an ill effect."

A growing demand

More and more seniors are seeking treatment for opioid addiction. In fact, the Caron Foundation will open another unit for older adults next year to meet the growing demand, Matthew noted. She pointed out that seniors face a longer road to recovery than their younger counterparts. "You have to go slower with older people," Matthew said. She noted that withdrawal can be managed with massage therapy, hydrotherapy, mind-body therapy and other approaches.

While seniors can recover from opioid addiction, the best defense is a good offense: avoiding addiction in the first place. Seniors may want to ask questions about situations that might involve pain, Rosenzweig said, such as by asking about non-opioid pain killers. He also suggested that one’s family or other loved ones get involved. A family member or friend can accompany a senior to the doctor to ask questions about how pain will be managed and how prescription pain medications will be tapered down. Family and friends can also keep an eye out for falls, confusion, isolation, lax grooming and other signs that may indicate addiction.

Gaudenzia’s Meyer had other suggestions. "You have to be careful not to take more medication than you need or for a longer time than you need," he said. "Don’t borrow other people’s medication – not your wife’s, not your friend’s. We seniors ourselves and our communities can make a big difference."

If you suspect opioid addiction in a friend or family member, experts suggest the following steps:

• Talk with the prescribing physician about the signs you see. Ask the doctor for help.
• Check to see if the person is taking the medication as prescribed. Sometimes patients take more medication than the doctor has indicated.
• See a pain management specialist about alternatives.
• Look into facilities that treat addiction in older adults. Senior centers and hospitals may be able to offer guidance.

"Opioid Addiction and Older Adults – What You Should Know" will be presented by Ryan Burke, M.D., an emergency medicine doctor at Chestnut Hill Hospital, from 12:30 to 1:30 p.m. Nov. 20 at Center on the Hill, 8855 Germantown Ave. It’s free, but registration is required at 215-753-2000.

Constance Garcia-Barrio is a freelance writer and author of a novel about African-American history in Philadelphia.
Don’t be left in the cold this winter: Resources available to lower utility bills, help with costs

By Alicia M. Colombo

Winter can be harsh on your wallet, as well as your body. Don’t let high utility bills cause a crisis. Several discount and assistance programs are available to people who are older, low-income and/or living with disabilities. Here’s a roundup of tips and resources to help you weather the season safely and comfortably.

Conservation

The first step to reducing your utility bills is to reduce usage. Use a digital thermostat to regulate your home’s temperature, or lower it manually when you are not going to be home. If you have leaky faucets or toilets, have them repaired or replaced. Seal or replace any drafty windows or doors. Are there rooms in your home that are not used regularly? Close the heating vents.

Through conservation, weatherization and home repairs, you may be able to significantly reduce the energy you use and lower your bills. The Energy Coordinating Agency (ECA) provides a wide range of energy-related services to low-income Philadelphia residents. There are 14 Neighborhood Energy Centers (NECs) throughout the city where you can get one-stop access to comprehensive energy services, including bill payment assistance; budget counseling; conservation education; and weatherization, heating services and home repairs.

The ECA also manages the Heater Hotline at 215-568-7190, which deploys crews to repair the heating systems of low-income Philadelphia residents. Through the Low Income Home Energy Assistance Program (LIHEAP) Crisis Interface Program, the ECA repairs and replaces inoperable heating systems for low-income homeowners and renters in Philadelphia. For more information, call the ECA at 215-609-1000 or go online to ECAsavesenergy.org.

Utility company programs

Many utility companies offer savings programs or reduced rates for seniors and low-income customers. Additional options include budget billing, discounts for receiving electronic statements, and a reduced fee for paying automatically with a credit card or bank account. Read the information included with your bill to learn about programs that you may qualify for, or call the company to inquire. Here are some programs that may be available:

• Philadelphia Water Department (PWD) offers a senior citizen discount on water and sewer bills for customers 65-plus who are low-income: 215-686-6880 or phila.gov/ revenue.

• PECO offers several energy assistance programs, including credits based on income and energy use, energy efficiency and weatherization help, and grants: 800-774-7040 or PECO.com/help.

• Philadelphia Gas Works (PGW) has several programs to assist income-eligible customers with paying their bills: 215-235-1000 or PGWworks.com.

Assistance programs

LIHEAP

Most low-income seniors and anyone receiving public assistance such as subsidized housing, Supplemental Security Income (SSI) or benefits through the Supplemental Nutrition Assistance Program (SNAP) will qualify for utility assistance from the Low Income Home Energy Assistance Program (LIHEAP). This federally funded program provides cash grants of $200 to $1,000 to help low-income people manage their energy costs and ensure service during the winter. LIHEAP opened for the 2017-2018 heating season Nov. 1 and will accept applications through March, depending on the availability of funds.

Annual household income limits to qualify for LIHEAP start at $18,090 for one person

continued on page 18
New ‘app’ helps get seniors online easily – it’s simple, fast and free

By Marcia Z. Siegal

Generations on Line (GoL), a nonprofit dedicated to helping seniors tackle the digital divide, has launched a free application, or “app,” that’s designed to get older adults online more easily by using small, portable computer “tablets.”

The app, called Easy Tablet Help for Seniors, “walks a novice or older technophobe step-by-step through the basics of using a tablet device to do things like use email, search the web, view videos and take pictures,” said Tobey Dichter, GoL founder and CEO. “Instructions display in large type and familiar, age-friendly language.” Easy Tablet Help for Seniors can be downloaded for free on Apple iPads and Android tablets. (While it will work on a smartphone, the screen is too small to be practical, Dichter says.)

Carolyn Walker participated in a recent training series for the new app held at Ralston Center, a West Philadelphia organization providing social services and support for older adults. In these “Sip & Swipe Café” sessions, which were equipped with tablets for participants’ use, Walker overcame her trepidation about the new technology. “When I first started, I was so afraid of the computer. I felt like it was going to bite me,” she said. “The instructors are very patient. Through the app, I learned how to use the computer and how to go online, and I am enjoying it. It has opened up a whole new world for me.”

Easy to use

Easy Tablet Help for Seniors is the first public launch of GoL’s tablet tutorial app. The organization piloted the app in 2014 at workshops coached by volunteer peer instructors at five senior centers in Philadelphia, in collaboration with Philadelphia Corporation for Aging (PCA), and at 10 others throughout the state. The new app reflects feedback and experience gained from those workshops and is also easy for seniors to use on their own at home if they prefer.

“We made changes to make the program less dependent on a formal coach or instructor,” Dichter said. For a senior who wants to learn at home, she recommends that a family member familiar with computers, like a senior’s child or grandchild, download the app and be available to help with initial learning efforts. “Since the instructions are interactive and always on the tablet screen, a family member avoids playing teacher, but rather becomes a motivator,” she said, noting that the app comes with a coaching guide. “With someone there to assist and encourage, a senior can learn the basics of using a tablet in as little as 45 minutes,” she said.

A $25,000 community grant from Philadelphia’s Digital Literacy Alliance for 2017-18 will enable GoL, in collaboration with PCA, to introduce Easy Tablet Help for Seniors to thousands more of the city’s older adults. GoL is continuing to partner with senior centers and expanding to partner with houses of worship, senior housing facilities and other senior-serving organizations for this initiative.

GoL has pioneered computer training for older adults since its founding 17 years ago, initially with an interactive software program for personal computers. Designed for use in institutions serving seniors nationwide, that program is available in more than 2,000 libraries, senior centers, retirement homes and low-income housing facilities. More than 100,000 seniors across the country have learned how to use a computer through this program.

When lower-cost tablet computers became available in 2013, GoL created an app and brought tablet training to older adults through Sip & Swipe Cafes at sites where seniors congregate. In these congenial coffee-and-learning sessions, seniors train with a volunteer coach.

After becoming knowledgeable about using a tablet, seniors learn how to create an email account and use it; how to text; how to use video chatting with families and friends; how to take pictures with their tablet device; and much more.

Through existing Sip & Swipe Cafes and other trainings being launched at additional sites through the grant, seniors will have the opportunity to become computer literate using GoL’s new app. (See information at the end of this article.)

GoL hopes to help an additional 100,000 seniors nationwide get online over the next three years, Dichter said. Easy Tablet Help for Seniors advances GoL’s mission by making computer literacy training even simpler, more convenient and readily available.

Getting seniors online is vital, Dichter said. Governments, businesses and media tend to assume everyone is online and able to access their resources for free via the web, but that is not so – especially for seniors, she points out. Empowering older adults to master computer technology, and to connect electronically with others and access resources through the web, is truly life changing. She said, “It expands their horizons, renews their talents and gives them a sense of purpose.”

For more information, including on Sip & Swipe Cafes: call 215-222-6400, email KBurke.GoL@comcast.net or go to generationsonline.com

Contact Marcia Z. Siegal at msiegel@pcaphl.org.

Cover photo: Josie Fletcher pauses after sending her first text to her granddaughter. (Courtesy of Surrey Services for Seniors)
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Call 267-765-1530 for more information
By M. L. Polak

The 2013 release “The Sea” is an exquisite, delicately nuanced tapestry of a film about memory, grief, loss, bereavement, transcendence and the healing power of the ocean. John Banville crafted the subtle script, adapting it from his prestigious Man Booker Prize winning novel. I promise it will stay with you for days, nagging you to pay attention like a pebble in your shoe.

After his adored photographer wife (Sinead Cusack) dies, art historian Max Morden, played by compellingly gruff Irish actor Ciaran Hinds, returns against the advice of his grown daughter to the pleasant seaside town where he spent a complicated summer during his boyhood.

Bereaved, the middle-aged widower stays in a lovely guest house run by an enigmatic innkeeper (Charlotte Rampling with a ubiquitous cigarette-holder). Checking into his room, he unpacks a photograph of his dead wife and a copy of the persistently unfinished book on the painter Bonnard that he’s trying to complete.

Immediately, Max heads for the beach, where he’s assailed by memories from his past there. We see Max as he was, a socially ambitious only child of parents of ordinary means. His family had stayed in a chalet in what was called “the huts” – simple rooms populated by lower-class visitors – while young Max had been fascinated by the vaguely glamorous Graces, the posh family in the big house by the beach.

The converted guest house had been a mansion once belonging to the alluring Graces, the upper-class family with peculiar panache: the slightly churlish philanderer Carlo (the perpetually odd Rufus Sewell), his mesmerizing wife Connie (Natascha McElhone, who gives a dazzling rendition of the woman Max was irresistibly drawn to as a young boy), and their set of constantly scrapping twins.

As Max’s awareness zig-zags back and forth from present to past, we become aware that the twins form the centerpiece of a still vaguely unresolved, mysterious tragedy, and with it Max’s possible complicity, marking him with trauma for life.

Returning to that long-ago summer, Max reignites his first whiff of love. Finally, he gains perspective on where life has taken him, and maybe even why.

Writer/filmmaker M. L. Polak, who runs a discussion group for seniors about aging, is certified in mental health first aid, mindful meditation, reiki and therapeutic touch for animals.

‘The Sea’ is nuanced film about past, present and healing

Critics’ Corner

‘The Sea’ is nuanced film about past, present and healing

Utility resources

• continued from page 15

and increase by $6,270 for each additional household member.

Households experiencing a heating emergency also may be eligible for benefits offered through the LIHEAP Crisis Program. Emergency situations include the depletion of fuel or having less than a 15-day supply, broken heating equipment or leaking lines, an inoperable main or secondary heating source, and utility termination or a 60-day shutoff notice.

It can take up to 30 days for a response, so don’t wait until you are unable to pay your bill to apply. You will receive a written notice explaining the amount of assistance that will be sent to your utility company or fuel dealer to be credited to your account.

For information or to apply for LIHEAP, call 866-857-7095 (TDD 1-800-451-5886) or 215-560-1583, visit compass.state.pa.us, or apply in person at the Philadelphia LIHEAP office, 1348 W. Sedgley Ave.

UESF

The Utility Emergency Services Fund (UESF) has assistance programs for low-income Philadelphia residents who have impending or existing utility terminations. These programs offer up to 100 gallons of oil once every 12 months; matching grants totaling up to $2,000 with PECO, PGW and PWD; and plumbing repairs or modifications to stop excessive water usage. For information, call 215-972-5170 or visit UESFacts.org.

Contact Alicia Colombo at acolombo@pcaphl.org.

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Perceptions of aging: The persistent stereotypes that color our views

By Katie Young

I was 19 when I started my first job working with older adults. My entire perception of aging and older adults was based on the media. I believed that aging was something to be avoided; old people were rigid in their beliefs, often confused, and always frail.

I had two grandparents who were living in Florida, happily and healthily golfing their retirement away, just as I thought all grandparents did – that is, until they became old and frail. I spent very little time thinking about the aging experience until I walked into an assisted living facility during my junior year of college.

I had applied to work in the dining room, but the facility didn’t have a designated wait-staff. So I became a nursing assistant, helping with the residents’ personal care needs. At the outset, I did not want a career working with old people. (I wanted to be a pediatric occupational therapist.) But I took the job; it would look good on my grad school applications. How quickly my world was rocked!

I spent the next few months learning so much from the residents: the ups and downs of the aging experience; that individuals with dementia are not as scary as I had thought, and they need love and human interaction just as we all do; and mostly that society has it all wrong! Older adults can be fun, funny, interesting, honest and so much more dynamic than I had ever imagined. My plans changed. I would seek a graduate degree in gerontology.

When I teach classes on aging for undergraduates, I try to remember the naïve young woman I once was. At the beginning of each semester, I ask my students to vocalize their beliefs about older adults. I have heard many of the same tropes again and again. Old people are depressed and isolated; the elderly are frail; old people are bad at technology; they can’t learn and won’t change. When students talk about people they know, some of their statements are intended to be positive but fall short: He’s still quick as a whip; she’s still active for her age. Why do we presume that all older people have dementia or are frail?

Many adults feel similarly about their aging parents: “Mom just doesn’t understand that she can’t clean the windows anymore” or “Dad just needs to realize that he can’t walk to the grocery store anymore, and I will have to do his shopping for him.” Why do otherwise intelligent adults fail to perceive their aging parents as people capable of managing their own lives? At what magic age is someone who has successfully navigated the world for decades no longer able to do so independently?

To be clear, I am not talking about people who show signs of cognitive loss or who have other ailments that interfere with their functioning, just those who are, simply, aging. Our love for the people in our lives and our desire to protect and help them can affect our attitudes. Another problem is the deeply engrained societal view that old people become childlike again. While working in a variety of care settings, I often heard terms like “sweetie,” “honey” and “young lady.” While these terms are meant to be caring, older adults often do not like to be addressed this way by professionals.

Language evolves. These days, the preferred terms in gerontological circles are “older adult” or “elder,” based on feedback from older adults themselves. Some disciplines continue to use “senior.” What is no longer widely accepted is “elderly” or “senior citizen,” due to the connotation of frailty. Unfortunately, what hasn’t seemed to evolve is the belief of the young: that the old are incompetent, debilitated and dependent. Experience has taught me that those stereotypes are false, the associated language is hurtful, and older people deserve to be respected. But the beliefs and platitudes are deeply ingrained, and many of us return to them unconsciously.

Unfortunately, the young people who believe the negative messages about aging grow old still believing those messages. There is good news, though: We can change our perceptions.

The next time your knees creak or you have a memory slip, don’t blame it on age. Remember that you spent years in the garden working those knees and that stress, anxiety and distractions impact our memory at all ages. And above all, make friends with those who are older and younger than you so you can learn from each other’s experiences and perspectives.

Katie Young, MSG, is a planner for policy and program development at PCA.
Leafy therapy  
• continued from page 1

“I am so proud of what we do here,” said Susan Sauerman, who had little luck cultivating houseplants in her former home. Since moving to Cathedral Village several years ago, she has been drawn to the 2,800-square-foot greenhouse and the workshops that horticultural therapists hold for residents year-round.

Sauerman was curious about growing succulents – fleshy plants such as cacti that store water in their leaves. Over the past few years, she has learned to confidently cultivate these plants and also has undertaken more ambitious projects like growing narcissus and amaryllis. Her apartment is now home to an array of cheerful flowers and greenery.

Some residents are lifelong gardeners who continue to indulge their passion. Others are new to horticulture and avidly embrace the opportunities the community offers. Horticulture offers something for everyone, even those who have physical or cognitive limitations, said Ruth MacCarthy, one of Cathedral Village’s two horticultural therapists.

According to the American Horticultural Therapy Association (AHTA), there is an increasing interest in therapeutic gardens like the accessible gardens that surround the greenhouse and outdoor gardens at Cathedral Village. AHTA defines a therapeutic garden as a garden “designed for use as a component” of a treatment, rehabilitation or vocational program. A garden can be described as being therapeutic in nature when it has been designed to meet the needs of a specific user or population. It is designed to accommodate participants’ goals and to facilitate people-plant interactions.” It notes that “interactions can be passive or active depending on the garden design and users’ needs.” According to the association, “the basic features of a therapeutic garden can include wide and gently graded accessible entrances and paths; raised planting beds and containers; and a sensory-oriented plant selection focused on color, texture, and fragrance.”

‘Something healing’

While residents like Sauerman pursue horticulture for pleasure, its therapeutic value is widely recognized. Horticultural therapy has been found to help reduce depression, an increased risk for older people who often experience aches and pains, physical disability and the loss of loved ones. It can also support physical and occupational therapy by incorporating prescribed exercises, like stretching or reaching. Plus, it provides mental stimulation and promotes physical activity and social interaction. In addition, there is something healing about putting your hands in the dirt, MacCarthy said.

When residents are unable to get out to an outdoor garden or the greenhouse, horticultural therapy comes to them. The therapists can bring supplies for growing flowers to the Health Center, Cathedral Village’s skilled nursing facility, and work with residents there. We take it step by step,” MacCarthy said. “Put the soil in. Tamp it down. Count two seeds. Put the seeds in. We do this again and again. After a while, some of the participants might start to do it on their own.”

It’s a joy for Health Center participants to see their plants grow. “They can see results and show [the plants] to their family,” Cathedral Village psychologist Talya Escogido said. “They can see results and show [the plants] to their family,” Cathedral Village psychologist Talya Escogido said.

Escogido works with residents experiencing mental health issues. “Many of them are reluctant to talk about their problems, but one thing they will talk about is how important their horticultural projects are to them,” she said, noting that she can never schedule an appointment that conflicts with a horticulture activity.

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“They take it step by step,” MacCarthy said. “Put the soil in. Tamp it down. Count two seeds. Put the seeds in. We do this again and again. After a while, some of the participants might start to do it on their own.”

If their projects give them a reason to get up in the morning and are the highlight of their week,” Escogido said. “There are people in the Health Center who are completely dependent on others for their daily needs, but they can still have pride at what they are able to accomplish in this program. It gives them a sense of purpose.”

Earlier this fall, Cathedral Village residents readied the annual butterfly garden, one of the highlights of the campus. The garden contains milkweed essential for caterpillars and an assortment of plants that provide shelter and nectar to adult monarch butterflies. Adults lay eggs on the milkweed that hatch into caterpillars. The caterpillars feed on the milkweed and then develop into chrysalises. “We’ll have monarchs next spring,” Sauerman said.

In addition to its inspiring butterfly garden, Cathedral Village also features other outdoor gardens, including a lushly planted sensory and healing garden and a meditation garden. The gardens offer residents a place to walk or be transported in wheelchairs down winding paths and sit under shaded trees to relax. There are also individual garden plots in which residents can cultivate flowers and vegetables.

For indoor growing, there’s the greenhouse. “It’s great having a greenhouse on our campus. It’s warm, full of light and lush with growth,” said Brenda Sullivan, Cathedral Village horticultural therapist. “Some of the plants were grown from seed and nurtured by our residents. They can see the results. It’s very rewarding.”

Many of the flowers and other plants residents grow decorate the public spaces of the residential buildings. Others are used for fundraising to benefit the Alzheimer’s Association. Tomatoes, green peppers and other produce, along with herbs grown on-site, are used by the kitchen staff to prepare residents’ meals. “Horticulture connects the whole community – everybody benefits,” MacCarthy said.

For more information:
• American Horticultural Therapy Association: 888-294-8527
• Cathedral Village: 215-487-1300; presbyterianseniorliving.org/cathedral-village
• Pennsylvania Horticultural Society offers a variety of gardening, greening and learning programs: 215-988-8800; phbsonline.org

Contact Marcia Z. Siegal at msegal@pcaphl.org.

Crossword puzzle solution
(See page 23 for clues.)
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Robust Chicken Soup
(Servings: 6)

Ingredients:
- 2 cups cooked cannellini beans, or 1 (15-oz.) can, rinsed
- Freshly squeezed lemon juice
- Sea salt
- 2 tbsp. extra-virgin olive oil
- 1 yellow onion, finely diced
- 2 fennel bulbs, finely diced
- 2 large carrots, peeled and finely diced
- 4 stalks celery, finely chopped
- 2 cloves garlic, minced
- ¼ tsp. chopped fresh sage, or ¼ teaspoon dried
- 1 tbsp. fresh thyme leaves, or ¼ teaspoon dried
- 6 cups organic chicken stock
- 2 cups sliced cooked organic chicken
- 1 tsp. lemon zest
- 2 tbsp. arugula leaves
- 2 tbsp. finely chopped parsley
- 2 tbsp. finely chopped basil

Directions:
In a bowl, stir together the beans with a spritz of lemon juice and a pinch of salt. Set aside.

Heat the olive oil in a soup pot over medium heat, then add the onion, fennel, carrots, celery, and ¼ teaspoon of salt, and sauté until golden, about 15 minutes. Stir in the garlic, sage, and thyme and cook for another minute.

Pour in ½ cup of the stock to deglaze the pot, stirring to loosen any bits stuck to the pot, and cook until the liquid is reduced by half.

Add the remaining 5½ cups of stock and the beans. Bring to a boil over medium heat, then lower the heat and simmer until the vegetables are tender, about 8 minutes. Stir in the cooked chicken, zest, 1 tbsp. of lemon juice, arugula, parsley, basil, and another ¼ tsp. of salt, and serve right away.

Variation: Spinach or kale cut into bite-size pieces can be substituted for the arugula.
If using raw chicken (pieces), add with the beans and vegetables and simmer until cooked through.

Source: The Healthy Mind Cookbook

Flavorful chicken soup makes an easy one-dish meal. Packed with protein, vitamins and minerals, it’s guaranteed to fortify you during the cold-weather season. Scientific evidence is accumulating that chicken soup may actually help you fight colds, too. According to the University of Pittsburgh Medical Center, research suggests that chicken soup slows white blood cells from gathering in the lungs, therefore slowing the progress of the irritating side effects of a cold, like coughing; sneezing; and having a stuffy, runny nose. Chicken soup also helps you stay hydrated, which is important anytime but crucial when you’re feeling under the weather. This recipe features items known to be good for brain health, like olive oil, vegetables, beans and poultry.

Videographer
• continued from page 8
He had no trouble finding them through his old contacts and networks and by just keeping his eyes and ears open.

The causes this videographer/filmmaker has helped are diverse. He has made more than 70 videos and counting in the first four years of his business.

Among the organization he has encapsulated visually are the Philadelphia Environmental Film Festival, Choral Arts Philadelphia, American Historical Theatre and Kulu Mele African Dance & Drum. Then there’s Linda Creed Breast Cancer Foundation, Pegasus Therapeutic Riding Center, Rolling Harvest Food Rescue, and West Philly Tool Library.

In a city chock full of arts and history and quirky, innovative projects, Gerald Kolpan is in creative heaven.

One of his favorite projects was capturing the look, feel and content of the historic Wagner Free Institute of Science of Philadelphia, a century-old treasure trove of natural history that allowed him to introduce special effects into his visuals. “I’m finding just how creative technology can allow us to be, and I’m loving it,” he says.

It has helped that The Philo Project has been taken under the fiscal wings of the Greater Philadelphia Film Office through its Greater Philadelphia Filmmakers Program. Vital earlier support also came from Culture Trust Greater Philadelphia.

Summing up his experience, Kolpan turns wryly to an old saying he has found to be erroneous: “You can’t teach an old dog new tricks.”

“I can tell you that if the dog is ready and determined, you definitely can teach him,” he says.

* * *

For more information about The Philo Project, visit philoproject.org.

Sally Friedman is a freelance writer and essayist. She can be reached at pinegander@aol.com.
Don's Column

Observations on the humorous habits of pets, relative merits of the press

By Don Harrison

The kids were delegated the naming of the puppy, and they chose “Lucky.”

The kids grew up and scattered, but Lucky lasted for 14 years. Part beagle, part heaven knows what, he was a good-natured, smart and loving mutt.

His favorite pastime was lying on the window sill and barking at passersby. Since the vast majority of passersby did actually pass by, his success must have been very gratifying.

His joys are more subtle than Lucky’s. Like Lucky, he sits on the window sill, occasionally uttering a quiet meow, but soon gives up and returns to other pursuits – usually involving sleep. Being a cat, he couldn’t care less who’s passing by – or much else that concerns us mere humans.

The front page

For decades, I was a reporter, writer and editor for daily, weekly and monthly newspapers. So I object to the villainizing of the news media, not only by the White House but, increasingly, by the general public.

To begin with, The Press – as a single monolith – doesn’t really exist. It’s a multitude of publications and online outlets, each operating on a profit-and-loss basis in a highly competitive forum. The bosses usually have little or no interest in promoting their views, just in issuing information for which customers pay.

There are exceptions, of course, particularly online, where some channels promote a party line, but by and large, the press is made up of information organizations. And, although old-timers may disagree, they do their job as well or better than ever. Today’s newspaper people are better educated and as dedicated to objectivity and inclusivity as ever. Thanks to graphic design developments, today’s newspapers are more attractive and more readable.

Not all, of course. Journalists can be egotistical and prone to exaggeration and sensationalism; good editors root this out when they can. And cost-cutting (business has not been good) leads to errors (which are freely admitted). But flaws are probably no more common than in any other profession.
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