



OLLI AT FSU'S MONTHLY NEWSMAGAZINE

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JULY 2021

OLLI TIMES SEEKS NEW EDITOR

“The December 2021 edition will be my last,” Waas says

George Waas will be leaving as editor of the OLLI Times in December of this year.

“After four years, it’s time for a change. I’ve taken the OLLI Times from a newsletter—publishing articles limited to OLLI itself—to a news magazine that includes articles on subjects of general interest to our seniors; articles from the Internet, as well as from the Pepper Center, the Institute for Successful Longevity, The Pepper Institute, the Colleges of Medicine and Criminology and Criminal Justice, and the Florida State University News. There is an expanding world out there of important information for our seniors.

It’s time for someone else to take the OLLI Times to the next level,” Waas said.

In December of 2017, OLLI Executive Director Debra Herman told George at the end of class one day of her vision for a periodic publication that would provide information to the membership. “Debra asked me to think it over, and the following month, the OLLI Times was launched as an online-only publication,” he said.

“I believed at the beginning that it should be a monthly publication. I also believed that it shouldn’t duplicate the Course and Activities Catalog or weekly mailouts during each semester;

it should be a stand-alone publication,” he added.

“From my perspective, being editor requires attentiveness to articles of interest to seniors that you come across just from reading newspapers and magazines, to using the Internet in a creative manner. For example, I might do a Google search on ‘seniors and scams’ or ‘seniors and a healthy diet.’ It’s amazing what you’ll find with a little bit of effort. Other sources that I bookmarked and got on their mailing lists include the National Institutes of Health, National Institute on Aging, AARP and other sites specifically targeted to seniors.

“As I collected articles, I assigned them space in advance, so I would have the Special to the Times section completed months in advance. Then, as each month’s publication drew near, I would simply add the articles I received before deadline to what I had already included, and if I found

other articles of interest, I would simply add them to what I had already had. Putting out a monthly news magazine of 50+ pages isn’t rocket science, but it does take planning and discipline. This is not a job for someone who puts things off to the last minute.

“I am not very proficient when it comes to computer technology, but I can copy, cut and paste quite efficiently. And Harriet is always available when I need a more experienced, tech-savvy hand.

“Being editor has been a challenging and rewarding experience. I started my FSU career as Flambeau editor over 50 years ago, so, in a sense, I’ve gone full circle. Not everyone gets a chance to create a publication, and I will be ever grateful to Debra for giving me this opportunity. But after four years of monthly publications, it’s simply time for new leadership,” Waas said. If you’re interested in taking over as editor, please let Debra Herman know.

SENIORS BEWARE: SENIOR CITIZENS LOST ALMOST \$1 BILLION IN SCAMS IN 2020: FBI

The highest numbers of scams were in California, Florida and Texas.

From ABC News

Senior citizens lost almost \$1 billion in scams in 2020, according to an FBI

report released the week of June 15, 2021

A total of 105,301 people over the age of 65 were scammed, with an average loss of \$9,175, and almost 2,000 older Americans lost more than \$100,000, the report said.

By far, the elderly were being extorted the most, with just over 23,000 victims, the FBI found. The highest number of fraud cases occurred in California, Florida and Texas.

“Each year, millions of elderly Americans fall victim to some type of financial fraud or internet scheme, such as romance scams, tech support fraud, and [lottery](#) or sweepstake scams. Criminals gain their targets’ trust or use tactics of intimidation and threats to take advantage of their victims,” said Calvin Shivers, assistant director of the FBI’s criminal division. “Once successful, scammers are likely to keep a scheme going because of the prospect of significant financial gain.”

The FBI found that confidence fraud and romance scams netted over \$281

million in losses.

"Romance scams occur when a criminal adopts a fake online identity to gain a victim’s affection and confidence," the FBI said. "Often, the scammer will utilize religion to garner trust with the victim. The scammer uses the illusion of a romantic or close relationship to manipulate and/or steal from the victim. The criminals who carry out Romance scams are experts at what they do and will seem genuine, caring, and believable."

This past June, the Justice Department recognized Elder Fraud Awareness Day.

“These matters underscore the importance of World Elder Abuse Awareness Day and the continuing threat posed by all forms of elder abuse, including elder fraud schemes that bilk seniors of their life savings,” said Deputy Assistant Attorney General Michael D. Granston of the Justice Department’s Civil Division.

THE DEFINITIVE GUIDE TO REDUCING ROBOCALLS

Follow these steps to cut back on calls everybody loves to hate

From **AARP**, 2021

You've had it with relentless robocalls, the automated messages that at best are telemarketing and at worst are pitches from criminals who want to steal your cash or your identity. Enough is enough with the deluge of unsolicited

voicemails and the calls from phone numbers that look like they're from friends but are “spoofed” — or disguised — by crooks who claim to be with the IRS, your bank or the police.

You've tried blocking numbers, to no avail. You've signed up on the National Do Not Call Registry. No difference. You've complained to the Federal Trade Commission (FTC), the Federal Communications Commission (FCC). Nada.

Despite your frustration, you might want to step up your game since there's been a regrettable resurgence in robocalls.

Call volume came crashing down

"When the pandemic hit about a year ago, we saw the first major drop in robocalls because call centers were closed, but now robocalls are exploding," says Alex Quilici, CEO of YouMail, which develops robocall-blocking software.

Robocall volume in the U.S. hit an estimated 5.5 billion calls — an all-time high — in October 2019, then sank to about 2.8 billion calls a month when the pandemic erupted last spring, he says.

Lately these calls, many from scammers, have climbed to about 5 billion a month. "Having computers dialing a bunch of numbers is a fast, efficient and extremely cheap way to get to as many people as possible," according to Quilici, who says scammers need only a small portion of call recipients to take their bait.

Some robocalls are legal

Amid the din, some robocalls are legitimate: the American Red Cross can ask for blood donations just as your doctor's office can remind you of an appointment.

But when it comes to bad actors, keep in mind that mobile apps can beat them back. Also, importantly, the FCC will require voice service providers by June 30 to implement call-authentication technology on the Internet Protocol (IP) portions of their networks. As explained here, the James Bond-sounding "STIR/SHAKEN" authentication enables providers to verify the Caller ID information transmitted matches the caller's real phone number. Already some carriers have implemented this anti-spoofing technology. It was mandated in AARP-endorsed legislation signed into law at the end of 2019. The measure is the TRACED Act, which stands for Telephone Robocall Abuse Criminal Enforcement and Deterrence.

A united front

What's more, USTelecom, a trade group, has established the Industry Traceback Group to battle illegal robocalls by identifying the source of the calls and "coordinating with governments and industry to help prevent those calls, and bring to justice individuals and entities responsible,"

says Patrick Halley, the trade group's senior vice president of policy and advocacy. The source of an illegal robocall — even one from outside the U.S. — often can be identified in 24 hours, he says.

Illegal, unwanted calls still run into the billions, but the calls reaching consumers are fewer thanks to call-authentication, call blocking and labeling tools that designate incoming calls as spam, Halley says.

AT&T, for example, the largest U.S. carrier, says it has blocked or labeled more than 16 billion robocalls since 2016, including 6 billion last year.

Best practices for consumers

To join in the fight, consumers are urged to:

- Download a call blocker. First, try a free solution to see if it does the trick. No-cost services from firms such as YouMail and Nomorobo are carrier-agnostic. (Nomorobo is free for landlines but \$1.99 a month for cellphones.) Your mobile carrier has free tools, too.
- Experiment with call-blocking tools, apps and options to strike the right balance between the calls you want — and those you don't. It may take trial and error to avoid a “false positive,” the term for a

legitimate call that is stopped.

- Let a call go to voicemail if it gets through a robocall app and you don't recognize the caller. If the caller claims to be, say, from Citibank, don't call back a phone number left on voicemail. Use a number you know is legitimate, such as one on a statement or credit card.
- Hang up if it's a live person calling, as computer-based robocall systems allow. Do. Not. Engage.
- Learn more from the major providers: at AT&T's Cyber Aware, at T-Mobile and at Verizon.
- Heed the latest advice from the FTC and the FCC.

Help for Consumers

Companies have an arsenal of free and for-a-fee technology to limit robocalls. Here are some offerings.

AT&T

It says its ActiveArmor protects users on a few levels. “We automatically give our wireless customers essential security features, including network-based, automatic fraud call-blocking and suspected spam risk alerts,” says Adam Panagia, director of global fraud management. Wireless customers may

download the free AT&T Call Protect app to customize robocall protection and create a personal block list.

Customers may upgrade to Call Protect Plus for \$3.99 a month for features including reverse number lookup for U.S. numbers and custom controls to block additional unwanted call categories. Call Protect Plus is free on AT&T Unlimited Elite and Extra plans, and also includes AT&T Mobile Security, another suite of tools that includes device security and data breach alerts.

T-Mobile

Customers have access to a free, powerful solution, says Kathleen Foster, director of core network engineering and services. ScamShield is an advanced scam-blocking protection with integrated tools, such as Scam ID warnings, Scam Block and Caller ID. It also supports Sprint customers since the firms merged.

For an extra charge, Scam Shield Premium adds more control over your calls, including sending entire categories of calls directly to voicemail (such as telemarketers or fundraisers), a reverse number lookup for unknown callers, and the option to

create “Always Block” lists that live on the network, not just your contact list, so your preferences remain even if you get a new device. Scam Shield Premium costs \$4 per line per month, but are automatically included in Magenta MAX plans.

Verizon

Call Filter lets wireless customers block many robocalls at no cost, says Todd Oberstein, executive director of consumer mobile products. An incoming call may be flagged as “Potential Spam” or stopped from reaching you altogether.

“We have also created lines across our network, called ‘honeypots,’ to identify and observe illegal robocall campaigns, and work with USTelecom’s Industry Traceback Group and other carriers to trace them back to the source and notify law enforcement,” says Oberstein. “We have expanded these numbers in every U.S. state, which has helped punish those who would seek to profit from fraudulent or illegal robocall scams.”

Call Filter Plus (\$2.99 monthly for one line; \$7.99 for three or more) also includes Caller ID, spam look-up, a personal block list and spam risk meter, he says.

TRAVELERS BEWARE!!

TRAVEL IS BACK—AND SO ARE TRAVEL SCAMS

As seniors join others in preparing to travel again, it's vital that we remain vigilant and avoid scams. Beware.

From CNN Travel 2021

With more widespread vaccinations and relaxed travel restrictions, many people are making long-awaited vacation plans. But scammers are making plans of their own to separate eager travelers from their money via too-good-to-be-true vacation packages, fake airfare deals and other shady schemes.

Consumer advocacy organizations such as Better Business Bureau are issuing warnings about an increase in incidents involving scammers who often pose as airline ticket brokers and travel agents via telemarketing calls.

Another common tactic is imposter or "spoofed" websites that mimic legitimate booking platforms for airfare, hotels or rental cars -- but do not deliver the product as promised.

These kinds of scams are surging as leisure travel re-emerges -- and are likely to remain a hassle for the near future. According to data from RoboKiller, a spam call and text

blocker app, the estimated number of automated, unsolicited telemarketing calls (or robocalls) with a travel focus -- for example, promising a free hotel stay or a deeply discounted booking -- will grow to a staggering 4.9 billion in the United States in 2021, representing an 80% increase from last year.

"Scammers do tend to follow what people are doing, because people are susceptible to scams that are believable and relevant to their daily life," says Giulia Porter, vice president of marketing at TelTech, the mobile communications company that owns RoboKiller.

"During Covid, we saw a lot of PPE and contact tracing scams, because that was what was going on in the world. Now we're seeing travel scams because everyone is getting vaccinated and they want to travel again."

Porter says one recent scamming strategy is using a pre-recorded, unauthorized introduction from a well-

known travel brand -- Delta, Booking.com and Marriott have been popular choices within the last month - - as a way to build trust with potential targets.

Spam texts promising a free cruise or other vacation deal also are on the rise, with RoboKiller projecting 2.25 billion travel-related messages sent in 2021, a 300% increase from last year.

Whatever their form, travel-centric schemes rely on a different type of psychology than other common types of scams, such as a caller demanding your credit card info to correct a problem with your Social Security number or that you owe taxes to the IRS -- often with the threat of jail time if you don't pay up.

"The end goal is the same: to get your personal and financial information so that they can then use that however they want," Porter explains. "That comes in two different forms: more financial-based scams are using fear ... whereas travel scams are more getting people to sign up for offers that are possibly too good to be true.

"If it's truly a scammer, they're trying to get your credit card information to use it however they'd like."

The financial fallout can be disastrous. According to data from the Federal Trade Commission, \$26 million was lost to travel, timeshare and vacation rental fraud from January to March 2021, with a median reported loss of approximately \$1,100 per incident.

Scams are on the rise elsewhere, too. In the UK and other parts of Europe where pandemic restrictions are relaxing, authorities are warning travelers planning summer holidays to be aware of bogus lodging offers, fake vaccine passports and other schemes circulating online and on social media.

Decreasing deals and pent-up demand

One factor likely playing a role in the current spate of travel scams is that many consumers are still looking to score rock-bottom deals on airfare, hotel rooms and rental cars that were commonplace during the pandemic.

But now that demand is back, prices have rebounded, especially in the car rental industry, where widespread shortages have spiked rates in many markets, especially warm-weather destinations like Florida and Hawaii.

As a result, many consumers still determined to get a deal then explore alternate or unfamiliar companies they would normally overlook, creating a "perfect storm" for scammers to swoop in with deals and offers that seem too good to pass up, explains Charlie Leocha, chairman of Travelers United, a traveler advocacy nonprofit based in Washington, D.C.

"It's becoming prime time for scammers because the scammer can come in with lower airfare or a lower total price of a package," Leocha told CNN. "When people don't know what

they're buying, this is when they really become victims."

Scammers have become increasingly tech-savvy as well. In addition to "spoofing" official websites with fraudulent ones, they're acutely aware of consumers' purchasing patterns and how to create ads or sponsored links that pop up during a web search for keywords like "cheap car rentals" along with a desired destination.

"They can target these things in a very specific, narrow way, where they only want people who are searching for car rentals in Maui to see this ad," explains Scott Keyes, founder of Scott's Cheap Flights, an airfare deal site. "Try to ignore those ads in general, but even if you click them, if you come [to a website] from an ad you need to have your guard up. Even if they claim to be Avis or Alamo, the service number they provide might not be the actual one."

Then, there's the very powerful driver of wanderlust. As travel evolves from virtual to actual, many people with unspent vacation funds burning a hole in their pocket can get caught up in the excitement of actually planning a trip again -- which may make them more vulnerable to unscrupulous schemes (or even just not reading the fine print).

"You've been cooped up, you want to go somewhere, and you've got the money, and when you're a little flush with money, you're more likely to make a dumb decision, sending money

to maybe somebody who is not reputable, or not understanding what the refund policies are or what happens with trip cancellations," explains Dave Seminara, author of "Mad Travelers: A Tale of Wanderlust, Greed & the Quest to Reach the Ends of the Earth," which tells the true story of a young British con artist who scammed many of the world's most traveled people. "When you're dreaming of a trip and dreaming of travel, you're not thinking about negative scenarios like that."

Fighting back against fraud

Some politicians are calling on government to take more action against travel-focused scams. Sen. Amy Klobuchar (D) MN and Sen. Steve Daines (R) MT, wrote a May 13 letter to the FTC asking the agency to provide more information about how it's addressed such fraud and how it plans to prevent it moving forward, noting in their letter that some 67% of Americans say they have plans to travel this summer.

Big-name travel brands are fighting back, too.

On May 19, Marriott filed a federal lawsuit against the unknown perpetrators, or "John Does," that the hotel giant claims have been illegally misrepresenting themselves as Marriott agents or representatives in millions of robocalls to consumers. According to a Marriott release, these

calls increased dramatically to a peak of seven million a month in 2020.

On an individual level, consumers also can take several steps to keep themselves safe. For starters, BBB recommends researching any company that sounds unfamiliar before making any purchases.

Pay particular attention to the URL, making sure it's correct before entering any personal or payment information, as it can be easy to click on a sponsored ad or a spoofed website without noticing. (Secure links, the BBB notes, start with "https://" and include a lock icon on the purchase page.) Misspelled words and pixelated images are also possible signs of a scammer.

Porter also points out that even something as seemingly harmless as sharing your phone number or email address on a web form can put you on the radar of scammers, who are known to share contact information of possible targets.

"Always do your research before you sign up for anything travel-wise online," Porter says. "To our knowledge, a lot of instances of these

online scams is that even if you're just submitting for more information, you're giving them your phone number or your email address, so your information is feeding into this list of phone numbers that is then fueling phone scams, text scams."

When you do book that trip, be sure to use a credit card instead of a prepaid gift or debit card, cryptocurrency or wire transfer, as most credit card companies can help fight fraudulent charges. It also bears repeating that suspicious or "unknown" phone calls should go unanswered, and if you do pick up, hang up right away and resist the temptation to press a number to opt out -- which usually just confirms to the spammers that it's a live number.

Finally, don't expect scammers to go away anytime soon.

"They'll stop at nothing," Porter says. "Covid didn't stop them, natural disasters -- we've seen scammers impersonate FEMA (Federal Emergency Management Agency) officials and trying to steal from people that way. It's like, people want to go on vacation. Just give them a break."

THE PRESIDENT'S PAGE

Harriet Waas
President, OLLI Advisory Council



We have just finished our classes for the new, extended summer term, but WAIT - there are special lectures and additional activities in July. Our July Lecture Series includes the following:

Imports and the American Economy
July Lecture Series
(Wednesday 7/7, 1:00pm - 3:00pm ET)

Low Value Care: What Is It? How do I know If I'm Getting It? How Can I Avoid It?

July Lecture Series (Monday 7/12, 1:00pm - 3:00pm ET)

Operation Freedom: The Berlin Airlift

July Lecture Series (Thursday 7/8, 1:00pm - 3:00pm ET)

The Nines Lives of Benjamin Franklin

July Lecture Series (Thursday 7/15, 1:00pm - 2:00pm ET)

It Looks Like There's a Ray of Sunshine: What Now? Finding Your Way in a Brightening Pandemic World

July Lecture Series (Wednesdays 7/21 and 7/28, 1:00pm - 3:00pm ET)

Check out the OLLI webpage to find out more!

This Summer term has given us longer classes and additional choices of class length. We have been privileged to have instructors from our own backyard and around the globe. The pandemic has forced a change in the

way we structured our organization, but has also brought us new and interesting avenues of learning and staying connected.

As we move toward the future, I believe that we will find several options for classes. FSU is exploring additional on-campus attendance and OLLI will follow their direction. We will also explore the possibility of keeping some Zoom classes taught by instructors from other parts of the country or world. And for the Fall Semester, we will have face-to-face classes on Wednesday. Stay tuned for upcoming changes!

As for travel, our study-abroad trip to Greece was rescheduled to 2022 beginning in May. The Travel Club is also planning a 2022 springtime river cruise to the Netherlands and exploring domestic travel options for 2022 or 2023. So many of us are ready to travel again. If you are interested, join the Travel Club to receive new

information as travel is planned.

Most of the OLLI clubs will continue to meet throughout the summer, so check out the OLLI website for more information! Please remember that to join a club, you must sign up on the OLLI website AND contact the club Chair to request email updates.

As we move toward a more normal way of operation, please consider becoming an OLLI volunteer and join an OLLI committee, or create a new club in your area of interest. You might be surprised at the number of OLLI members who share those same interests. If you would like to volunteer, please contact me at waas01@comcast.net.

We have a bright, active future in the months ahead and much to which we can look forward. Throughout the summer, please take care of yourself, stay healthy and continue to stay active and involved, I look forward to seeing you soon!

WEDNESDAY BOOK CLUB SETS PROGRAMS FOR FALL, SPRING SEMESTERS

By Susan Barnes
Chair

The Wednesday Book Club concluded its meetings for the 2020-21 OLLI year and is looking forward to meeting at Westminster Oaks starting in September.

The book schedule is noted below if you'd like to get started on your summer reading:

September 8- **The Dutch House** by Ann Patchet

October 13 – **The Boy in the Field** by
Margot Livesay
November 10 - **The Book of Lost
Names** by Kristen Harmel
December 8 - **News of the World** by
Paulete Jiles
January 12 - **Anxious People** by
Fredrik Backman
February 9 - **Celestial Bodies** by Jokha
Alharthi
March 9 - **Buried Seeds** by Donna

Meredith
April 13 - **The Four Winds** by Kristen
Hannah
May 11 - **Lost Roses** by Martha Hall
Kelly
June 8 - **The Plague of Doves** by
Louise Erdrich

Laurie Svec will be taking over as
chair of the club in July with Denise
Vandiver as co-chair.

SPECIAL TO THE TIMES **CHALLENGES FACING THE ELDERLY**

FROM LUMEN “AGING AND THE ELDERLY” 2012

Aging comes with many challenges. The loss of independence is one potential part of the process, as are diminished physical ability and age discrimination.

The term senescence refers to the aging process, including biological, emotional, intellectual, social, and spiritual changes. This section discusses some of the challenges we encounter during this process.

As already observed, many older adults remain highly self-sufficient. Others require more care. Because the elderly typically no longer hold jobs, finances can be a challenge. And due to cultural misconceptions, older people can be targets of ridicule and

stereotypes. The elderly face many challenges in later life, but they do not have to enter old age without dignity.

Poverty

For many people in the United States, growing older once meant living with less income. In 1960, almost 35 percent of the elderly existed on poverty-level incomes. A generation ago, the nation’s oldest populations had the highest risk of living in poverty.

At the start of the twenty-first century, the older population was putting an end to that trend. Among people over sixty-five years old, the poverty rate

fell from 30 percent in 1967 to 9.7 percent in 2008, well below the national average of 13.2 percent (U.S. Census Bureau 2009). However, given the subsequent recession, which severely reduced the retirement savings of many while taxing public support systems, how are the elderly affected? According to the Kaiser Commission on Medicaid and the Uninsured, the national poverty rate among the elderly had risen to 14 percent by 2010 (Urban Institute and Kaiser Commission 2010).

Before the recession hit, what had changed to cause a reduction in poverty among the elderly? What social patterns contributed to the shift? For several decades, a greater number of women joined the workforce. More married couples earned double incomes during their working years and saved more money for their retirement. Private employers and governments began offering better retirement programs. By 1990, senior citizens reported earning 36 percent more income on average than they did in 1980; that was five times the rate of increase for people under age thirty-five (U.S. Census Bureau 2009).

In addition, many people were gaining access to better healthcare. New trends encouraged people to live more healthful lifestyles by placing an emphasis on exercise and nutrition. There was also greater access to information about the health risks of behaviors such as cigarette smoking,

alcohol consumption, and drug use. Because they were healthier, many older people continue to work past the typical retirement age and provide more opportunity to save for retirement. Will these patterns return once the recession ends? Sociologists will be watching to see. In the meantime, they are realizing the immediate impact of the recession on elderly poverty.

During the recession, older people lost some of the financial advantages that they'd gained in the 1980s and 1990s. From October 2007 to October 2009 the values of retirement accounts for people over age fifty lost 18 percent of their value. The sharp decline in the stock market also forced many to delay their retirement (Administration on Aging 2009).

Ageism

Driving to the grocery store, Peter, twenty-three years old, got stuck behind a car on a four-lane main artery through his city's business district. The speed limit was thirty-five miles per

hour, and while most drivers sped along at forty to forty-five mph, the driver in front of him was going the minimum speed. Peter tapped on his horn. He tailgated the driver. Finally, Peter had a chance to pass the car. He glanced over. Sure enough, Peter thought, a gray-haired old man guilty of "DWE," driving while elderly.

At the grocery store, Peter waited in the checkout line behind an older woman. She paid for her groceries, lifted her bags of food into her cart, and toddled toward the exit. Peter, guessing her to be about eighty years old, was reminded of his grandmother. He paid for his groceries and caught up with her. "Can I help you with your cart?" he asked. "No, thank you. I can get it myself," she said and marched off toward her car.

Peter's responses to both older people, the driver and the shopper, were prejudiced. In both cases, he made unfair assumptions. He assumed the driver drove cautiously simply because the man was a senior citizen, and he assumed the shopper needed help carrying her groceries just because she was an older woman.

Responses like Peter's toward older people are fairly common. He didn't intend to treat people differently based on personal or cultural biases, but he did. Ageism is discrimination (when someone acts on a prejudice) based on age. Dr. Robert Butler coined the term in 1968, noting that ageism exists in all cultures (Brownell). Ageist attitudes and biases based on stereotypes reduce elderly people to inferior or limited positions.

Ageism can vary in severity. Peter's attitudes are probably seen as fairly mild, but relating to the elderly in ways that are patronizing can be offensive. When ageism is reflected in the

workplace, in healthcare, and in assisted-living facilities, the effects of discrimination can be more severe. Ageism can make older people fear losing a job, feel dismissed by a doctor, or feel a lack of power and control in their daily living situations.

In early societies, the elderly were respected and revered. Many preindustrial societies observed **gerontocracy**, a type of social structure wherein the power is held by a society's oldest members. In some countries today, the elderly still have influence and power and their vast knowledge is respected. Reverence for the elderly is still a part of some cultures, but it has changed in many places because of social factors.

In many modern nations, however, industrialization contributed to the diminished social standing of the elderly. Today wealth, power, and prestige are also held by those in younger age brackets. The average age of corporate executives was fifty-nine years old in 1980. In 2008, the average age had lowered to fifty-four years old (Stuart 2008). Some older members of the workforce felt threatened by this trend and grew concerned that younger employees in higher level positions would push them out of the job market. Rapid advancements in technology and media have required new skill sets that older members of the workforce are less likely to have.

Changes happened not only in the workplace but also at home. In agrarian societies, a married couple cared for their aging parents. The oldest members of the family contributed to the household by doing chores, cooking, and helping with child care. As economies shifted from agrarian to industrial, younger generations moved to cities to work in factories. The elderly began to be seen as an expensive burden. They did not have the strength and stamina to work outside the home. What began during industrialization, a trend toward older people living apart from their grown children, has become commonplace.

Mistreatment and Abuse

Mistreatment and abuse of the elderly is a major social problem. As expected, with the biology of aging, the elderly sometimes become physically frail. This frailty renders them dependent on others for care—sometimes for small needs like household tasks, and sometimes for assistance with basic functions like eating and toileting. Unlike a child, who also is dependent on another for care, an elder is an adult with a lifetime of experience, knowledge, and opinions—a more fully developed person. This makes the care-providing situation more complex.

Elder abuse occurs when a caretaker intentionally deprives an older person of care or harms the person in his or her

charge. Caregivers may be family members, relatives, friends, health professionals, or employees of senior housing or nursing care. The elderly may be subject to many different types of abuse.

In a 2009 study on the topic led by Dr. Ron Acierno, the team of researchers identified five major categories of elder abuse: 1) physical abuse, such as hitting or shaking, 2) sexual abuse, including rape and coerced nudity, 3) psychological or emotional abuse, such as verbal harassment or humiliation, 4) neglect or failure to provide adequate care, and 5) financial abuse or exploitation (Acierno 2010). The National Center on Elder Abuse (NCEA), a division of the U.S. Administration on Aging, also identifies abandonment and self-neglect as types of abuse.

How prevalent is elder abuse? Two recent U.S. studies found that roughly one in ten elderly people surveyed had suffered at least one form of elder abuse. Some social researchers believe elder abuse is underreported and that the number may be higher. The risk of abuse also increases in people with health issues such as dementia (Kohn and Verhoek-Oftedahl 2011). Older women were found to be victims of verbal abuse more often than their male counterparts.

In Acierno's study, which included a sample of 5,777 respondents age sixty

and older, 5.2 percent of respondents reported financial abuse, 5.1 percent said they'd been neglected, and 4.6 endured emotional abuse (Acierno 2010). The prevalence of physical and sexual abuse was lower at 1.6 and 0.6 percent, respectively (Acierno 2010).

Other studies have focused on the caregivers to the elderly in an attempt to discover the causes of elder abuse. Researchers identified factors that increased the likelihood of caregivers perpetrating abuse against those in their care. Those factors include inexperience, having other demands such as jobs (for those who weren't professionally employed as caregivers), caring for children, living full-time with the dependent elder, and experiencing high stress, isolation, and lack of support (Kohn and Verhoek-Oftedahl 2011).

A history of depression in the caregiver was also found to increase the likelihood of elder abuse. Neglect was more likely when care was provided by paid caregivers. Many of the caregivers who physically abused

elders were themselves abused—in many cases, when they were children. Family members with some sort of dependency on the elder in their care were more likely to physically abuse that elder. For example, an adult child caring for an elderly parent while at the same time depending on some form of income from that parent, is considered more likely to perpetrate physical abuse (Kohn and Verhoek-Oftedahl 2011).

A survey in Florida found that 60.1 percent of caregivers reported verbal aggression as a style of conflict resolution. Paid caregivers in nursing homes were at a high risk of becoming abusive if they had low job satisfaction, treated the elderly like children, or felt burnt out (Kohn and Verhoek-Oftedahl 2011). Caregivers who tended to be verbally abusive were found to have had less training, lower education, and higher likelihood of depression or other psychiatric disorders. Based on the results of these studies, many housing facilities for seniors have increased their screening procedures for caregiver applicants.

TRAVELLING AGAIN? HERE ARE TIPS FOR GETTING TO YOUR AIPLANE

From AARP Magazine 2021

(Ed. Note: Travel conditions are fluid; it's always best to check with your travel agent or your airline to

get the latest information. What appears below are recommendations as of the

April/May edition of the AARP Magazine.)

Booking your trip. Research whether you'll have to provide proof of a negative COVID-19 test prior to arrival at your destination. Go to covid19.state.gov, then click on Country Specific information. (Ed. Note: You might also research whether proof of vaccination will suffice.)

Many countries have not been admitting travelers from the U.S. Info on those restrictions is also available on this site.

Checking in from home. Print your boarding pass at home or download it to your smartphone to avoid touching airport kiosks.

Setting a schedule. Leave extra time for coronavirus safety procedures and screenings at airports. Allow a minimum of two hours for a domestic flight, and plan for three hours if you're going on an international trip.

Riding to the airport. If you can, take a taxi or a ride-booking service

such as Uber or Lyft—so you won't have to use the multi-passenger shuttle bus from the parking lot to the terminal.

Entering the terminal. Put on your mask. Passengers are required to wear one except when eating or drinking.

Reaching the line. Scan your own boarding pass at security checkpoints and show it the TSA officer for visual inspection, instead of handing it over. Place personal items in your carry-on bag, rather than in a plastic bin.

Making it through security. Remove food from carry-ons and put into a separate plastic bin for screening. Liquid restrictions have been easing for hand sanitizer (you can bring up to 12 ounces); remove it from your bag for separate screening.

Boarding the plane. Show your proof of a negative COVID-19 test, if needed. (Ed. Note: You may also need to show proof of vaccination.)

Taking your seat. Sanitize the tray table and armrests.

GROWING OLDER: WHAT AGE IS CONSIDERED ELDERLY?

by Elizz Wellness 2020

Ask ten different people at what age someone is considered an "old" person or a senior citizen, and you'll receive

ten different answers. Do a quick Google search, and you'll have hundreds of thousands of differing

opinions. The fact is, what age is considered elderly can be a very subjective topic.

Some people consider a 60-year-old person to be a senior, while some would argue that that person is still very young. While one baby boomer (someone born between 1946 and 1964) might think of themselves as a middle-aged adult, others may consider themselves senior citizens.

As the caregiver for your parent, you might be faced with important questions about old age: At what point is your parent considered a senior citizen? When does a middle-aged person transition into old age? And how should you refer to your parent (besides just saying “Mom” or “Dad”) in a way that isn’t condescending or derogatory?

Let’s take a look at some age-related terms and dive deeper into the ultimate question: At what age is someone considered a senior?

Understanding age terminology

There are all sorts of words and terms floating around that are used to describe older people. Sometimes these words are used interchangeably when they shouldn’t be. Some words have certain connotations that aren’t always appropriate, depending on the circumstances, while others are generally accepted.

Below you’ll find some of the most common terms used to describe older adults.

Senior

Generally, the word “senior” on its own is a good way to describe an older adult. The word itself carries positive connotations. After all, the senior employee at a company or the senior-most player on a sports team are seen as experienced and respected. But you should be careful not to assume any older adult is a senior — someone on the younger end of older age may not think of themselves as senior at all.

Senior citizen

The term “senior citizen” typically refers to someone who is retired and above the age of 60 or 65. That may be because in most industrialized Western nations, around 60 or 65 is usually the age at which an older adult can start receiving social assistance programs based on their age — Old Age Security in Canada, for example. But be aware that while the term “senior citizen” is commonly used to describe older adults, some find it patronizing.

Elderly

When someone is in an advanced stage of life that is well past middle age, they might be referred to as “elderly.” This term often carries negative

connotations and might suggest that someone is frail or in poor health. We're willing to bet that your mom or dad wouldn't appreciate being called an elderly person — the same is true for most older adults. In fact, while the term "elderly" is still commonly used, many experts consider it to be an outdated term, and maybe even ageist.

Old

Simply describing someone as "old" is, of course, subjective. An 18-year-old person might seem old to a six-year-old, even though the 18-year-old is still in their youth. Calling a senior person "old" is generally considered rude, but referring to someone as "older" is more neutral. "Older" implies a progression of age without the negative connotations — that's why you've seen the term "older adult" appear commonly throughout this article.

Geriatric

Geriatric care is a branch of medicine focusing on older adults and the health care needs of aging people. This can include nursing care, end-of-life care (hospice), and much more. The term might be used commonly in the world of medical care, but it isn't generally used outside of that context. It carries connotations of the person being worn out, senile, or having a low life

expectancy.

As you can see, there are many terms out there to describe an older adult. Some of them carry negative undertones while some are more neutral in nature. But we're still faced with the question: What age is considered elderly? Is there a specific time when old age begins, or a cut-off between middle age and old age?

When is someone considered a senior?

There are different ways to approach the subject of what age a person is considered a senior. It varies widely depending on geographical location and social context, but the field of gerontology — the scientific study of aging — gives us a few commonly accepted ways to define what "old age" is.

Chronological age

Defining age by chronology means considering the number of years that have elapsed since a person's birth. Of course, the numbers themselves are subjective. Senior citizen discounts might be given at age 50, or at age 65. Retirement age might be 50 in one country, but above 70 in another. So defining old age by years of age can be tricky, as we've already seen.

Social role

When you define old age by someone's social role, you're considering factors like when someone retires from the workforce, when the person starts receiving forms of social assistance, or when the person's own children have children of their own. Again, these factors are not set in stone — retirement age can vary widely, and people can become grandparents at younger and older ages.

Physical health or appearance

Defining someone's age by their physical health or appearance means that you might consider them a senior when they get grey hair and wrinkles, or start to experience physical or cognitive declines usually related to older age, like Alzheimer's disease. This is, of course, a slippery slope toward ageism — you don't want to assume that someone is old just because of their appearance, or that their health status is a direct result of advanced age.

It's also important to consider that the age someone is considered a senior has changed drastically in a historical context. People today are living much longer than they did hundreds of years ago, and even only a few decades ago.

In Canada, the average life expectancy for males born in 1990 is 74, and 81 for females. By comparison, the life expectancy for those born in

2012 increased to 80 years of age for men and 84 for females.

What's more, according to the Canadian census, the number of people aged 85 and older grew by 19.4% from 2011 to 2016, which is nearly four times the rate for the overall Canadian population. As people live longer, the threshold for what age is considered elderly is shifting.

If you look back in time, someone who was only 45 years old may have been considered a senior, but today that person is thought of as middle-aged. The point is this: Whether it's in a historical context, or judged by chronological age, social role, or physical health, age is subjective and means different things to different people.

The bottom line: What age is considered elderly?

It's clear that no single definition can capture what older age really is. Your parent might be a resident in a retirement home but still feel young at heart. Mom or Dad might be just reaching retirement age but be plagued by health problems usually experienced by much older people. It all depends on the circumstances at hand.

In most industrialized Western nations, someone is considered a

senior by the age of 65 or so. But remember: That number is based primarily on retirement age and the age at which social benefits kick in. Many people would not consider someone a

senior until they're at least over the age of 70. It's simply a subjective matter. For your parent, what is considered "old" is entirely up to them. We all have to define it for ourselves.

60 WAYS TO LIVE LONGER, STRONGER AND BETTER

How to replace pandemic bad habits and get healthier now

From AARP 2021

Automated behaviors — making the coffee, reading the news, playing a game on a phone, checking email — account for nearly half of the average person's daily activities, according to research by Wendy Wood, a psychology professor at the University of Southern California and author of *Good Habits, Bad Habits*. "We do the same thing in the same context almost every day," she says. "And we do it without thinking about it." Intentionally or not, you've spent the past year or so creating new, often unhealthy habits.

But as we strive to get back to normal, we're presented with an unusual opportunity to reset our patterns. Here are 60 ideas from health experts. Just remember: Your brain requires up to three months of daily repetition to develop the neural pathway that automates a behavior. "But the biggest gain comes during that first month,"

Wood says. "So, it's important to stick with it initially." Be persistent: The habits you set now may be the habits you stick with for life.

Boost Your Brain Health

1. Make weekly exercise dates. You can easily talk yourself out of a workout, but it's more difficult to do when you have a standing commitment to work out with a friend. Overall, aim for 150-plus minutes of weekly moderate-intensity aerobic exercise. Exercisers are 45 percent less likely to develop Alzheimer's disease, the Alzheimer's Drug Discovery Foundation reports.

2. Eat a daily salad. Just one serving of leafy greens a day was associated with slower cognitive decline, a 2017 study by Rush University Medical Center showed.

3. Have a superberry dessert. Dark-colored berries like blueberries and blackberries contain compounds that fight inflammation and help protect your brain. One cup of blueberries consumed daily for six months can also lower your risk of cardiovascular disease by 12 to 15 percent, according to 2019 research in the *American Journal of Clinical Nutrition*. Try berries and plain yogurt as your go-to after-dinner treat.

4. Develop a green tea habit. Especially if your favorite drink is soda. Researchers have found that people who consumed sweetened beverages were more likely to develop Alzheimer's, while some studies suggest green tea might promote cognitive functions.

5. Join a book club. Those who engage their mind most often through intellectual activities such as playing games or reading were 29 percent less likely to develop dementia during a five-year follow-up period, reports a 2018 Hong Kong study of adults 65 and older that was published in *JAMA Psychiatry*.

6. Once a week, try something new. Listen to new music, learn some words in another language or sign up for a lecture. Lifelong learning is associated with improved brain health, and staying mentally active is linked to delayed onset of cognitive decline.

Go to Sleep Easier

7. Make your bed each morning. According to a survey by the National Sleep Foundation, those who make their bed nearly every day were more likely to report getting a good night's sleep.

8. Change your bedsheets every Sunday. Allergens can disrupt sleep. To cut down on buildup, wash your sheets weekly. Also replace pillows at least every two years and mattresses every 10, both for hygiene and for comfort (they can break down over time).

9. Face your alarm clock toward the wall. And place your cellphone facedown. Artificial light disrupts sleep. Instead of night-lights, keep a flashlight next to your bed to use when needed.

10. Turn the fan on when the lights go off. Or invest in a sound machine. Snoring partners, traffic and other ambient noise can cause you to wake during the night and experience more daytime sleepiness and fatigue. A source of white noise, like a fan, can help modulate that problem.

11. Enjoy some chamomile tea at bedtime. In a randomized, double-blind study from the University of Michigan, those taking a chamomile extract twice a day zonked out 16 minutes faster, on average.

Pump Up Your Heart Health

12. Brush and floss regularly. Swollen or bleeding gums caused by bad oral health may lead to microorganisms traveling into the bloodstream, which could cause inflammation and heart damage. Older adults who skimped on oral hygiene were 20 to 35 percent more likely to die during a 17-year study done by University of Southern California researchers.

13. Try doing 10 minutes of resistance training every morning. That adds up to a truly healthy week of muscle strengthening. In research published in 2017 in the Journal of the American Heart Association, women (average age 62) who did just 20 to 59 minutes of muscle-strengthening exercises each week were 29 percent less likely to die during the 12-year study than those who did none. Low muscle strength is associated with an elevated risk of death in people 50 and older, regardless of general health levels. Even cardio exercise doesn't appear to protect you if you allow your strength levels to deteriorate.

14. Be an avocado sneak. Replace half the butter in your baking recipes with mashed avocado, and sneak this source of healthy monounsaturated fatty acids (MUFAs) into smoothies and spreads whenever you can.

Replacing saturated fats with MUFAs can help lower LDL (bad) cholesterol.

15. Walk off your cravings. Smoking puts you at a higher risk for heart disease and stroke. When a craving hits, try lacing up your shoes and heading out for a quick walk and breath of fresh air. Who knows? You might just want to keep going!

16. Put a banana on it. A diet rich in potassium can help offset some of sodium's harmful effects on blood pressure. Add bananas to everything from breakfast cereal to nighttime desserts to PB&J sandwiches. While you're at it, squeeze in more sweet potatoes, tomatoes and oranges.

Shake Off Stress

17. Organize one thing each day—your handbag, a bedside table, a drawer. You'll feel one chore is behind you, which is helpful in feeling less pressured in general.

18. Take a daily “do not disturb” break. Whether at your desk, in your kitchen or on a deck outside, close your eyes and do not open them for anyone. Even five minutes will feel wonderful!

19. Have a go-to ritual that you look forward to when the anxiety is too much. Do something simple like calling a friend, having a cup of tea, playing a song on the piano or

sneaking away to read a few pages of a novel.

20. Enjoy a daily “play snack.” Remember what you used to enjoy doing as a kid, and go do that. Play with a yo-yo or Rubik's Cube. Go outside and skip rope or swing a golf club. Doodle, build a tower with toy building blocks, fold origami, draw with colored markers. Inject fun in five- to 10-minute chunks during your day as a way to let your brain relax.

Clean Up Your Diet

21. Bribe yourself into eating vegetables. Find a salad dressing or dip you love; you'll be more inclined to eat veggies dipped in it.

22. Store fruit at front of the fridge. When you bring fruit home, immediately wash and put in a bowl at the front of the top shelf rather than in a drawer. The minute you open the fridge, it will prompt you to eat some.

23. Portion out nuts. In a study that appeared in BMC Medicine in 2013 of adults ages 55 to 80 at high cardiovascular risk, those who ate more than three servings of nuts per week were 39 percent less likely to die of any cause over the next five years of the study. The problem is that people often overindulge and eat them straight out of a large bag or can. Prepack them into individual serving sizes in zip-

close bags so you have just one serving, not five.

24. Decorate healthfully. If chocolates are on the table, you'll eat them. Hide the less-healthy snacks and put fruit and nuts on the table within reach.

25. Snack before you shop. Going to the grocery store on an empty stomach — even if it's a digital store — can lead to unhealthy impulse buys. Have a bite to eat, and while you're eating, write out a shopping list and stick to it.

26 Drink your fiber. Throw some fruit into the blender right before it goes bad. Try blending a banana, an orange and spinach; throw in some walnuts for even more fiber and omega-3 fatty acids.

Get Back In Shape

27. “Commute” even if you work from home. For many of us, COVID means no commuting to and from the office — which means no moving, either. Use that gift of time for a walk, bike ride or jog. In a study, older women who averaged 4,400 steps per day (compared with just 2,700 steps) were 41 percent less likely to die during a follow-up of 4.3 years.

28. Set a “stretch timer.” Use the timer to prompt you to stand up and get your blood flowing and muscles moving once every hour. Your brain

needs oxygen to be productive — so if that's how you can persuade yourself to get up and move, then do so!

29. Take your phone calls standing or walking. They're called “mobile phones” for a reason. Each time yours rings, stand up or go for a walk. It's an easy way to decrease the amount of time you are sedentary.

Set Boundaries With Technology

30. Turn off all phone notifications. Americans are already checking their phones an average of 96 times a day, according to research from 2019, so you're not going to miss anything.

31. Establish no-phone zones, starting with no phones at dinner and in the bedroom. One review of 290 studies by a Swedish university researcher that was published in 2018 found an association between frequent mobile phone use and depressive symptoms and sleep problems.

32. When you wake up, don't reach for your phone. Do something you love instead: Journal, stretch, make coffee or read one book chapter. Get an alarm clock so you won't need to rely on your phone to wake up.

33. Go screen-free one day a week. “My family and I have turned off all screens for one full day each week for 11 years, and we spend the

day doing things we love. It's our favorite day of the week,” says author Tiffany Shlain.

Improve Your Relationships

34. Do the dishwasher boogie. Pick a chore you both hate, and turn it into a nightly dance party. Dancing together in the kitchen or anywhere in your house will remind you of how much fun you both are.

35. Make eye contact over dinner. Hold each other's gaze for 60 seconds. It will help you find the grace, beauty or soul in each other's eyes!

36. Give Friday night thanks. Share three things you're grateful for every Friday night over dinner (or any other night of the week). This is a terrific habit that will give you a new perspective on your family members.

Conquer Loneliness

37. Keep your list of loved ones close. Write three to five names on a Post-it note and stick it on your fridge or near the computer, or post their photos. Typically, we're happier if we feel deeply connected to a few relationships we want to prioritize rather than trying to stay in touch with everyone.

38. And make short, regular check-ins to loved ones. A study showed that even a few 10-minute phone calls each

week can reduce loneliness by 20 percent.

39. Call one long-lost friend every week. We often talk ourselves out of reaching out, thinking we'd be interrupting them or they won't welcome hearing from us. But being the one who initiates contact can be a great gift — and another way to cure loneliness. In a study published in 2020 in the journal *Heart*, male and female cardiac patients who reported feeling lonely were two and three times more likely to die, respectively, a year after their hospital discharge.

40. Give little gifts. A handwritten card, flowers, an act of service or a texted photo are examples of how we can bring joy to both ourselves and those who may be lonely or anxious.

Become More Resilient

41. Spend 20 minutes among the trees. That's exactly how much time you need in nature to reduce your level of stress hormones significantly, according to a 2019 study. Additional time reduces it more, but not dramatically, researchers found.

42. Ask what you can do to help. Make a habit of asking others if you can be of service. The more connected you are with your community, the more support you will receive during difficult times.

43. Keep a “no regrets checklist.” Write down a list of all the things you've had to put off over the years because of work or raising a family. Then make a timeline for how you'll revisit these goals. Regret is largely avoidable with a little reflection and mindful focus.

44. Journal a little each day. Keeping a daily gratitude journal in which you can count your blessings will help you keep perspective when hard times hit. At the end of each day, write down three or four things you feel proud of, positive traits you learned about yourself or positive actions you took toward nurturing yourself that day.

Take Care of Your Skin

45. Apply SPF 30 sunscreen every day. Even on rainy winter days. Don't forget areas such as your ears, the tops of your feet and the back of your neck. Once you begin a skin protection routine, it allows your skin to start repairing itself.

46. Use a sunblocking lip balm every day. Lipstick protects women against skin cancer of the lip, which is why it's seen far more commonly in men. If you don't wear lipstick, use an SPF lip balm.

47. Be a morning (or evening) person. The risk of skin damage is highest between 10 a.m. and 4 p.m. Scheduling your outdoor time at 9 a.m. or 5 p.m. instead of noon can

significantly lessen skin damage over time.

48. Take time to appreciate your partner's skin. And while doing so, look out for changes in his or her moles. People often notice skin cancer because of a spot that doesn't look quite right. Be familiar with your own moles and get a screening if you notice suspicious changes in shape, texture, color or size.

Cut Back On Your Vices

49. Put your TV in a time-out. Be mindful of exactly what content you consume — and choose a specific show or film to watch. When it's over, turn the TV off and go for a walk or take a bath to give your mind a break. With the end of the pandemic should come the end of long TV binges.

50. Make online shopping less impulse driven. Delete your credit card information from websites on which you regularly shop. Having to grab your wallet to pay for an impulse purchase adds an extra step that gives you more time to consider whether the item is actually necessary.

Clean Up Your Environment

51. Store leftovers in glass containers instead of plastic. Plastics often contain harmful chemicals like BPA and phthalates that can seep into food and may negatively impact your health.

52. Opt for fragrance-free products. If your household cleaner or air freshener says “fragrance,” you might want to toss it. If the ingredients are not disclosed, the product likely contains harmful chemicals that are carcinogenic. Also, to improve the overall health of your air, invest in a HEPA filter.

53. Bring plants into your home. Plants not only look beautiful, but many of them, such as bamboo palm and English ivy, can improve air quality.

54. Choose organic fruits and vegetables when possible. By opting for organic produce, you're reducing your exposure to pesticides. Organic foods may also be more nutritious than their conventional counterparts.

Get Your Gut in Shape

55. Try natural constipation treatments. OTC laxatives can interfere with how you absorb nutrients, an issue of rising importance as you age. Look for ways to add more fiber to your diet, as well as foods that are natural laxatives: Kiwi, prunes and rhubarb are all good options.

56. Lay off the artificially sweetened gum. For some, foods sweetened with sucralose or fructose, like sugar-free mints or candies, will cause problems with abdominal pain and cramping, bloating, gas or diarrhea.

57. Do some diaphragmatic breathing. Stress or anxiety can amplify problems in your GI tract. Work on taking deep breaths that expand your abdomen. This activates the autonomic nervous system and makes your GI tract less sensitive to various stimuli.

58. Place a step stool in front of the commode. The idea is to get your knees above your hips so that you're in more of a squatting position. This straightens out the lower part of your colon so you can pass stools more easily.

Stay Flexible and Improve Your Posture

59. Do an hourly posture check. Sit or stand up tall with your feet flat on the floor. Look straight ahead, bring

your shoulders back and down, and slightly tuck in your chin. Hold this position for a count of five. Repeat this several times throughout the day. Doing so will get you used to maintaining a healthier, upright posture.

60. Change how you carry stuff. The goal is to balance the weight evenly to both sides of your body. When carrying bags in your hands, it's best to have a similar amount of weight on both sides; this will allow you to maintain an upright posture. If you're using a backpack, put on both arm straps to spread the burden equally. You should avoid slinging a heavy bag over just one shoulder. If you are leaning over to the side or bent forward, you are carrying too much of a load.

ARE WE BORN TO WANDER?

By Eric Weiner, National Geographic
February 2021

I've been putting my passport to good use lately. I use it as a coaster and to level wobbly table legs. It makes an excellent cat toy.

Welcome to the pandemic of disappointments. Canceled trips, or ones never planned lest they be canceled. Family reunions, study-abroad years, lazy beach vacations. Poof. Gone. Obliterated by a tiny

virus, and the long list of countries where United States passports are not welcome.

Only a third of Americans say they have traveled overnight for leisure since March, and only slightly more, 38 percent, say they are likely to do so by the end of the year, according to one report. Only a quarter of us plan on leaving home for Thanksgiving,

typically the busiest travel time. The numbers paint a grim picture of our stilled lives.

It is not natural for us to be this sedentary. Travel is in our genes. For most of the time our species has existed, “we’ve lived as nomadic hunter-gatherers moving about in small bands of 150 or fewer people,” writes Christopher Ryan in Civilized to Death. This nomadic life was no accident. It was useful. “Moving to a neighboring band is always an option to avoid brewing conflict or just for a change in social scenery,” says Ryan. Robert Louis Stevenson put it more succinctly: “The great affair is to move.”

What if we can’t move, though? What if we’re unable to hunt *or* gather? What’s a traveler to do? There are many ways to answer that question. “Despair,” though, is not one of them.

We are an adaptive species. We can tolerate brief periods of forced sedentariness. A dash of self-delusion helps. We’re not grounded, we tell ourselves. We’re merely between trips, like the unemployed salesman in between opportunities. We pass the days thumbing through old travel journals and Instagram feeds. We gaze at souvenirs. All this helps. For a while.

We put on brave faces. “Staycation Nation,” the cover of the current issue

of Canadian Traveller magazine declares cheerfully, as if it were a choice, not a consolation.

Today, the U.S. Travel Association, the industry trade organization, is launching a national recovery campaign called “Let’s Go There.” Backed by a coalition of businesses related to tourism—hotels, convention and visitor bureaus, airlines—the initiative’s goal is to encourage Americans to turn idle wanderlust into actual itineraries.

The travel industry is hurting. So are travelers. “I dwelled so much on my disappointment that it almost physically hurt,” Paris-based journalist Joelle Diderich told me recently, after canceling five trips last spring.

My friend James Hopkins is a Buddhist living in Kathmandu. You’d think he’d thrive during the lockdown, a sort-of mandatory meditation retreat. For a while he did.

But during a recent Skype call, James looked haggard and dejected. He was growing restless, he confessed, and longed “for the old 10-countries-a-year schedule.” Nothing seemed to help, he told me. “No matter how many candles I lit, or how much incense I burned, and in spite of living in one of the most sacred places in South Asia, I just couldn’t change my habits.”

When we ended our call, I felt relieved, my grumpiness validated. It's not me; it's the pandemic. But I also worried. If a Buddhist in Kathmandu is going nuts, what hope do the rest of us stilled souls have?

I think hope lies in the very nature of travel. Travel entails wishful thinking. It demands a leap of faith, and of imagination, to board a plane for some faraway land, hoping, wishing, for a taste of the ineffable. Travel is one of the few activities we engage in not knowing the outcome and reveling in that uncertainty. Nothing is more forgettable than the trip that goes exactly as planned.

Travel is not a rational activity. It makes no sense to squeeze yourself into an alleged seat only to be hurled at frightening speed to a distant place where you don't speak the language or know the customs. All at great expense. If we stopped to do the cost-benefit analysis, we'd never go anywhere. Yet we do.

That's one reason why I'm bullish on travel's future. In fact, I'd argue travel is an essential industry, an essential activity. It's not essential the way hospitals and grocery stores are essential. Travel is essential the way books and hugs are essential. Food for the soul. Right now, we're between courses, savoring where we've been, anticipating where we'll go. Maybe it's Zanzibar and maybe it's the

campground down the road that you've always wanted to visit.

James Oglethorpe, a seasoned traveler, is happy to sit still for a while, and gaze at "the slow change of light and clouds on the Blue Ridge Mountains" in Virginia, where he lives. "My mind can take me the rest of the way around this world and beyond it."

It's not the place that is special but what we bring to it and, crucially, how we interact with it. Travel is not about the destination, or the journey. It is about stumbling across "a new way of looking at things," as writer Henry Miller observed. We need not travel far to gain a fresh perspective.

No one knew this better than Henry David Thoreau, who lived nearly all of his too-short life in Concord, Massachusetts. There he observed Walden Pond from every conceivable vantage point: from a hilltop, on its shores, underwater. Sometimes he'd even bend over and peer through his legs, marveling at the inverted world. "From the right point of view, every storm and every drop in it is a rainbow," he wrote.

Thoreau never tired of gazing at his beloved pond, nor have we outgrown the quiet beauty of our frumpy, analog world. If anything, the pandemic has rekindled our affection for it. We've seen what an atomized, digital

existence looks like, and we (most of us anyway) don't care for it. The bleachers at Chicago's Wrigley Field; the orchestra section at New York City's Lincoln Center; the alleyways of Tokyo. We miss these places. We are creatures of place, and always will be.

After the attacks of September 11, many predicted the end of air travel, or at least a dramatic reduction. Yet the airlines rebounded steadily and by 2017 flew a record four billion passengers. Briefly deprived of the miracle of flight, we appreciated it more and today tolerate the inconvenience of body scans and pat-downs for the privilege of transporting our flesh-and-bone selves to far-flung locations, where we break bread with other incarnate beings.

In our rush to return to the world, we should be mindful of the impact of mass tourism on the planet. Now is the time to embrace the fundamental values of sustainable tourism and let them guide your future journeys. Go off the beaten path. Linger longer in destinations. Travel in the off-season. Connect with communities and spend your money in ways that support locals. Consider purchasing carbon offsets. And remember that the whole point of getting out there is to embrace

the differences that make the world so colorful.

"One of the great benefits of travel is meeting new people and coming into contact with different points of view," says Pauline Frommer, travel expert and radio host.

So, go ahead and plan that trip. It's good for you, scientists say. Plotting a trip is nearly as enjoyable as actually taking one. Merely thinking about a pleasurable experience is itself pleasurable. Anticipation is its own reward.

I've witnessed first-hand the frisson of anticipatory travel. My wife, not usually a fan of travel photography, now spends hours on Instagram, gazing longingly at photos of Alpine lodges and Balinese rice fields. "What's going on?" I asked one day. "They're just absolutely captivating," she replied. "They make me remember that there is a big, beautiful world out there."

Many of us, myself included, have taken travel for granted. We grew lazy and entitled, and that is never good. Tom Swick, a friend and travel writer, tells me he used to view travel as a given. Now, he says, "I look forward to experiencing it as a gift."

BENEFITS OF TRAVELING LATER IN LIFE

FROM SENIOR LIVING BLOG 2019

You've waited and worked and saved your whole life for retirement. Now it's here and it's your time to make the most of every day. What will you do? For many, it's a time to see the world. For the first time in your life, you have the time to go where you want. To do what you want. And, for seniors in senior living, there's no home maintenance to worry about while you are away.

With a little planning and foresight, senior travel can be an amazing experience. Let the adventure begin!

It has been said that traveling is the only thing we can buy that actually makes us richer. The merits of this quote and the benefits of travel to mental, physical, spiritual, and emotional health has been well researched. Studies have found that:

- Men who take annual vacations are 32% less likely to die from heart disease, a leading cause of death.
- Women who take vacations at least twice a year are less stressed and less likely to experience depression.
- Three days of vacation can drastically lower stress levels, even after the vacation ends.
- Travel abroad can make the traveler more open-minded and emotionally stable.

- Travel keeps seniors moving and active, often providing more opportunities to move than staying at home.
- Travel can increase confidence as senior travelers overcome fears and get out of their comfort zone.

OVERCOMING COMMON CHALLENGES TO SENIOR TRAVEL

The thought of traveling may seem overwhelming at first thought. There's so much to pack. There are so many things that could go wrong. The "what ifs" magnify and can even stop some people from seeing the world. These senior travel tips can help prepare you and your loved ones for a stress-free trip!

1. Choose a destination that will be
2. easy to navigate, or consider a group trip, or cruise that can easily accommodate special service requests.
3. Seek the most direct and shortest routes to your destination while
4. also allowing yourself enough time on layovers to grab a quick meal, use the bathroom, and stretch your legs. Request special

services as needed in advance. Every airport will be able to provide free wheelchair service if staffed by an airport employee.

5. Travel with proper documents including passport, boarding passes, itineraries, emergency contact information, and

6. Insurance cards. Also have

7. medical contact information readily available for quick access to medical providers, if necessary.

8. Think through medication management. Carry medication with you on the plane and have alarms set on your phone or watch to remind you to take medication during a hectic travel day.

PROBLEMS FACED BY SENIOR CITIZENS AND THE ELDERLY

From Mason Finance 2021

The problems of the elderly in America today are somewhat different than those faced by retirees in past generations. Increased longevity has made it harder to make ends meet.

If you are at least 65 years old and have stopped working, then you're probably already familiar with many of the problems that face America's elderly population today. Your income is probably less than it was while you were working, and your health may also be starting to deteriorate. The elderly in the United States today have to make their money last longer and do more than retirees of past generations.

The elderly in America today face physical, mental, financial and family issues that can erode their sense of security and cause a great deal of stress. A list of the problems of the elderly includes:

Senior Health Problems

As seniors move into retirement, a host of health issues that they may not have previously experienced may manifest themselves. Many of these conditions can be helped with proper diet and exercise, while other ailments and chronic diseases can be unavoidable. Here's a list of the common healthcare issues faced by seniors:

- **Increased longevity** – Healthy retirees today can often expect to live well into their eighties or nineties, instead of dying in their sixties or seventies like past generations. Advances in healthcare are allowing Americans to live longer than ever before, and this trend is only likely to increase as new medical technology and procedures appear.

- **Osteoporosis** – As you age, your bone density lessens and can sometimes reach a point where an action as simple as standing up or sitting down can cause a fracture. This usually happens with the “old”-old age group who have made it into their late eighties or nineties. But the Osteoporosis Foundation estimates that over 50 million Americans age 50 and up are affected by this condition.

- **Arthritis** – This is perhaps the single most common ailment afflicting older adults today. Roughly half of all adults age 65 and up suffer from this condition to some degree, and the joint pain it causes can erode a retiree’s quality of life.

- **Heart Disease** – The Center for Disease Control and Prevention (CDC) ranks heart disease as the leading cause of death among those age 65 and up. About a third of all men and a quarter of all women in this age category suffer from some sort of chronic heart ailment. Those with high blood pressure and/or cholesterol levels are at greater risk for heart disease than others. And many elderly patients cannot afford to treat these conditions.

- **Obesity** – Just over a third of all men and about 40% of women between the ages of 65 and 74 are considered to be obese, and this risk factor can lead to heart disease, cancer, diabetes and other chronic conditions. Daily activities such as exercise can help to address this problem.

- **Substance Abuse** – Studies show that about one out of 5 seniors have had some sort of substance abuse problem either now or in the past. The most commonly abused substances are alcohol and tobacco, which can interact in unhealthy ways with any prescription medicines that are being used. It can also lead to greater risk of injury

from falls or tripping. Substance abuse can also lead to other medical conditions such as diabetes or a stroke. Those who struggle with this need to find a social support group that can help them to recover.

Mental Issues

Not all health-related issues are physical in nature. Many seniors suffer from various mental health ailments, including:

- **Dementia** – Despite the recent advances in medical care, the elderly still grapple with several major common medical conditions, such as Alzheimer’s disease or another form of cognitive impairment, which can require constant supervision and care by either a friend or family member or healthcare professional. These symptoms also tend to appear in those in their eighties or nineties, although they can start sooner in some cases. The Alzheimer’s Association estimates that about 1 out of every 9 adults in the United States age 65 and over have this condition.
- **Depression** – The American Psychological Association estimates that 15 to 20% of those age 65 and up have

experienced depression at some point in their lives. Depression can affect seniors in many ways, such as by lowering their immune systems and making them more vulnerable to disease. Seniors can help to combat this with regular exercise and increased social interaction.

- **Loneliness** – Many seniors who live alone don’t spend enough time interacting with other people, and loneliness can be overwhelming for some of them. And this can make those who suffer from this more vulnerable to fraud (see below). It is important for elderly persons to maintain a network of social contacts and stay in touch with their health service providers.

Financial Issues

The high costs of healthcare along with any debt that has accumulated can make it very difficult for some seniors to make ends meet. A list of the financial issues that the elderly face today includes:

- **Poverty** – A Kaiser Family Foundation report revealed that a whopping 45% of all adults age 65 and up had incomes below the poverty level in 2013. The rate of poverty is slightly higher

among elderly women than males. And, of course, those who live in poverty have a much harder time paying medical bills and prescription drug costs that address their health conditions than those who are more fortunate.

- **Lack of Financial Planning –**

Those who fail to plan are essentially planning to fail. Millions of Americans are retiring without seeking advice from a financial planner about how to handle their retirement plans and other savings and maximize their tax deductions and credits. A financial advisor can help his or her clients to stretch their dollars further and economize in ways that the client can live with. He or she can also help retirees to allocate their assets in a way that matches their risk tolerance, time horizon and investment objectives.

- **Running Out of Money –**

This goes hand-in-hand with poverty, but many seniors simply do not have sufficient savings to tide them over during retirement. Many in this dilemma are forced to go back to work in some capacity, which can be very hard on them in their later years. One way to combat

this factor is through the use of annuities that can provide a guaranteed lifetime payout.

- **Fraud –** Many seniors are very trusting people, and hucksters often prey upon this type of person, pretending to be their friend in order to get them to send money for some good or service. Lonely persons are usually the easiest targets, but even savvy seniors can get caught up by scams on occasion. The National Adult Protective Services Association issued a warning, saying that financial fraud against the elderly is on the rise. Children or other loved ones need to educate the elderly on common scams and rackets that are being used. And, unfortunately, in many cases the swindler is one of the elderly person's children or other relative who seeks to take advantage of their generosity.

- **Low Interest Rates –** Seniors who have previously relied on income generated by fixed-income investments have had a hard time finding decent yields in recent years. Although rates are now finally starting to rise again, many senior investors have had to reallocate their

portfolios into more aggressive instruments such as junk bonds, high-yield mutual funds and preferred stocks in order to generate the income that they need to live on.

- **Fear of the Stock Market –**

The Subprime Mortgage Meltdown of 2008 caused a substantial bear market for stocks. But while savvy investors were buying stocks right and left, many seniors who lost substantial sums of money missed out on the subsequent bull market that has lasted for almost 10 years. Many of them remained in low-yielding investments that have substantially lagged the markets for the past several years.

- **Social Security Funding –**

The Social Security trust fund is expected to be depleted by 2033. At that point, seniors may be forced to absorb a reduction in benefits of over 20%. This is alarming news, considering the large segment of seniors who rely on Social Security as their primary or sole source of income.

- **Increasing Healthcare**

Costs – The cost of healthcare in America is rising at a much faster rate

than the overall rate of inflation. This is especially true in the managed care sector, which includes nursing homes as well as in-home care services. And healthcare costs will most likely continue to rise as pharmaceutical companies and medical device manufacturers continue to churn out personalized therapeutic drugs and devices.

- **Poor Job Market –** Seniors who have no retirement savings and need to reenter the workforce will find themselves at a disadvantage, as many employers are looking to hire younger employees who will work for a lower rate of pay.

- **Debt –** About half of all seniors who retire today still have a mortgage payment, compared to a quarter of retirees in 1992. But housing debt isn't the only kind of debt that many seniors are saddled with. Student loan debt among seniors has grown to \$18 billion – more than 500% of the level of student loan debt among seniors in 2005. These debts make it more difficult for seniors to make ends meet and can erode their ability to reach other financial goals,

such as paying for healthcare or taking a vacation.

Family Issues

Dealing with family can be a complicated affair for many seniors. There can be leftover feelings of anger or resentment between parents and grown children or other unresolved issues that need to be worked through. Personal boundaries may need to be (drastically) redefined or other changes in relational dynamics may need adjustment. Some of the family issues that the elderly must contend with include:

Assisting Adult Children – A recent report from the Pew Research Center revealed that almost half of all seniors who are age 60 or above were helping their adult children to pay their bills. Of course, it's hard to find fault with this practice, but statistics show that this trend is substantially impacting the level of assets of the elderly. About a fifth of the \$18 billion in student loan debt among seniors was borrowed to support a child or grandchild attending school.

Living with Adult Children – Parents who can no longer care for themselves often move back in with their adult children. This arrangement can be dicey in some circumstances, where the parent or parents must adjust to the role of receiving care instead of giving it. But this arrangement is also often the most practical one by far; care that is given by a family member may cost

little to nothing, while care provided by a professional can cost hundreds or thousands of dollars out of pocket.

Leaving a Legacy

The final factor that the elderly must prepare for is leaving their remaining assets to their children or other heirs. These decisions can also be fraught with peril, as there may be disagreements among the heirs as to how the assets should be passed. Here are some of the issues that elderly persons must contend with when it comes to dispersing their assets:

Avoiding probate – Many elderly persons would be wise to place their assets inside a revocable living trust so that the probate process can be bypassed. While some assets such as IRAs and annuities are inherently exempt from the probate process, other items such as vehicles, homes and retail bank and investment accounts are subject to this procedure if they are not placed inside a trust. The probate process can be expensive and time-consuming and may result in assets being distributed inequitably or going to heirs that the deceased did not intend.

Legal Issues When the Spouse Dies – Many seniors who lose their spouse have no idea how to transfer any assets that were solely in the spouse's name to themselves. Adult children may need to get involved in this process in order to ensure that everything gets done correctly.

The Life Settlement Solution

Elderly persons who own a cash value life insurance policy have another option that they can turn to if they find themselves in dire straits financially. They can either access the cash value directly via

withdrawal or policy loan, or they can sell their policy to a qualified buyer. This is usually a life settlement company that is in the business of buying life insurance policies from older people.

HOW FOUR-LEGGED FRIENDS HELP BUFFER THE LOSS OF A SPOUSE

From Health24 2019

Dealing with the death of a loved one, or even a divorce? A furry, four-legged friend can help ease the pain. The loss of a loved one is one of life's most stressful events. But new research suggests that having a furry friend at hand may help ease the pain. Investigators looked at 437 older adults, some of whom lost a spouse, either through divorce or death. They found that having a cat or dog at home was linked to an easing of loneliness and depression.

Risk factors for death Study leader Dawn Carr, an associate professor of sociology at Florida State University, said the research team was surprised by the results, which were particularly meaningful because loneliness and depression have been found to be risk factors for death and other health problems, just like smoking. Pets can

provide support during stressful times – even just petting a dog or cat can calm you, Carr noted.

In the study, the researchers compared the mental health of people who stayed married to those who didn't, over a four-year period. They also looked at whether owning a dog or cat had any effect on mental health. The study found that while all people who became widowed or divorced did have some decline in their mental health, having a pet seemed to make a difference. Patients without pets who experienced such a loss had an average of 2.6 symptoms of depression, but that fell to just 1.2 symptoms for those with pets.

But Carr stressed that the question of pet ownership is complicated. "There have been a variety of studies that have

shown both positive and negative effects of pet ownership," she noted. But what these studies haven't taken into account is the different factors that might cause people to become pet owners in the first place.

"For example, older people may choose to get a cat if their health is declining," she said. "So if we were to look at people with pets compared to people without pets, we might conclude that pets cause [a decline in health], when that's just a correlation." Cushioning the blow So, this study assessed the baseline characteristics of people who do and don't own pets, and then looked at the impact of a losing a spouse on both groups. The researchers did find that having a pet seemed to cushion the emotional blow.

For the report, Carr's team used data on people over 50 who had answered questionnaires for the University of Michigan's Health and Retirement Study. Participants were classified into one of four groups: no loss/no pet; loss/no pet; loss/pet, and no loss/pet. Their average age was 65. Dr Alice Pomidor is a past chair of the American Geriatrics Society's public

education committee. She was not involved in the study, but agreed that pet ownership is more complicated than it appears. Pets can increase the risk for falls in older adults due to tripping over them, and they can cause financial stress due to the cost of their care.

However, pets can also help their owners get exercise and engage with something outside themselves, which can be helpful for older adults. "You have another living being around to keep you company," she said. Virtual reality Overall, said Pomidor, this study is important as the baby boomers age and more people begin to need long-term care. Companion animals are already used in some hospices and assisted living facilities, either through resident animals, or through volunteer programs in which people bring in pets. Some places are experimenting with automated systems and virtual reality programs. But, Carr said, "When we take care of animals, we have a purpose to get up for in the morning. Virtual reality may not ever be able to replicate that." The study was published recently in The Gerontologist

THIS BAD HABIT COULD BE UNDERMINING YOUR WEIGHT LOSS

BY JULIA MALACOFF, MYFITNESSPAL 2019

Feeling like you're eating well but not seeing any weight loss is a common,

and frustrating, experience. One main culprit: estimating your portion sizes.

Here, a look at the main problems with this approach and how you can take guessing out of the equation:

IT'S DIFFICULT TO CORRECTLY GUESS HOW MUCH YOU'RE EATING

“Most people are not accurate with estimating how much they are eating unless they have long-term practice weighing and measuring a variety of foods,” says Emily Field, RD. In fact, even experts are pretty bad at it. “Research shows that nearly everyone from nutrition professionals to healthcare practitioners to the average person is inaccurate at estimating calories for their typical portion sizes,” adds Field.\

MEMORY RECALL ISN'T ALWAYS ACCURATE

“Many people completely forget what they've eaten,” explains Stacey Mattinson, RD. Think about it: Can you remember what you ate last Thursday? Probably not. So if you're basing what and how much you eat off of previous meals without any measuring or tracking involved, you're unlikely to be accurate in your estimations, which can lead to overeating.

YOU MIGHT IGNORE YOUR HUNGER SIGNALS IF YOU ESTIMATE

“Satiety, or how satisfied you are after a meal, is rooted in both physical and psychological mechanisms,” Field explains. “For example, a meal that is rich in protein and fat will digest slower, and a meal that is heaping in non-starchy vegetables will take up a lot of room in your stomach. Both meals will likely make you feel full and physically satisfied after eating. However, if you perceive a meal to be ‘light,’ you might find yourself hungry between meals or experience cravings — which points to the role of psychology in meal satisfaction.”

A recent study looked at this phenomenon. Participants were given the same-sized omelet to eat for breakfast, and told it contained either two or four eggs (it actually contained three.) Researchers discovered the people who believed they ate a smaller omelet reported feeling hungrier two hours later, and even ate more at lunch and throughout the rest of the day compared to the people who believed they'd eaten four-egg omelets. This underscores how your perception of how much you're eating is extremely powerful. Understanding your portions on a more precise level (rather

than just estimating) can help you keep your hunger in check.

HOW TO COMBAT THE GUESSING GAME

“One of the best ways to get more accurate is to track your daily food intake, including what you eat at home, what you eat out when you’re with friends and what you eat in times of stress or celebration,” Field says. Here’s how to get the most out of tracking: Start small. Tracking your food may seem intimidating at first, but experts say the best approach is to start small.

“Decide that you’re going to start food logging and commit yourself to three days, and then one full week, and then maybe a sample of days you eat outside the home and a few days you eat at home,” recommends Field. Ideally, you want to use a measuring implement, such as a food scale, to get accurate amounts for each food you eat, although this may not be possible when eating out.

“Let this be a neutral, information-gathering experience and don’t pass

judgment on your eats,” Field says. “Should you choose to alter your meal choices based on the data you’ve collected on yourself, do so in small steps, such as cutting back on how much dressing you use or portioning yourself a few chips instead of eating straight from the bag.”

Opt for foods that help you tune into your hunger and satiety signals. In addition to understanding how much you’re truly eating, focusing on whole foods can make a big difference in keeping overeating in check. “You could be eating enough calories and not feeling satiated for a number of reasons, such as the fact that beverages generally don’t trigger satiety the same way as chewing (if you’re drinking tons of smoothies, for example) or poor macronutrient composition,” says Mattinson.

What’s more, “foods high in salt, sugar and fat can override satiety signals so you don’t feel full even though you’ve had adequate calories.” Instead, focus on “getting enough protein and lots of colors (fruits, veggies and nutrient-rich whole grains) for high fiber.”

READING THE NEW BLOOD PRESSURE GUIDELINES

The definition for what is considered high blood pressure has been tightened. Here's what you need to know.

From Harvard Health Publishing online 2019

If you didn't have high blood pressure before, there's a good chance you do now.

In 2017, new guidelines from the American Heart Association, the American College of Cardiology, and nine other health organizations lowered the numbers for the diagnosis of hypertension (high blood pressure) to 130/80 millimeters of mercury (mm Hg) and higher for all adults. The previous guidelines set the threshold at 140/90 mm Hg for people younger than age 65 and 150/80 mm Hg for those ages 65 and older.

This means 70% to 79% of men ages 55 and older are now classified as having hypertension. That includes many men whose blood pressure had previously been considered healthy. Why the change?

Behind the numbers

"Blood pressure guidelines are not updated at regular intervals. Instead, they are changed when sufficient new evidence suggests the old ones weren't

accurate or relevant anymore," says Dr. Paul Conlin, an endocrinologist with Harvard-affiliated VA Boston Healthcare System and Brigham and Women's Hospital. "The goal now with the new guidelines is to help people address high blood pressure — and the problems that may accompany it like heart attack and stroke — much earlier."

The new guidelines stem from the 2017 results of the Systolic Blood Pressure Intervention Trial (SPRINT), which studied more than 9,000 adults ages 50 and older who had systolic blood pressure (the top number in a reading) of 130 mm Hg or higher and at least one risk factor for cardiovascular disease. The study's aim was to find out whether treating blood pressure to lower the systolic number to 120 mm Hg or less was superior to the standard target of 140 mm Hg or less. The results found that targeting a systolic pressure of no more than 120 mm Hg reduced the chance of heart attacks, heart failure, or stroke over a three-year period.

More than blood pressure

The new guidelines have other changes, too. First, they don't offer different recommendations for people younger or older than age 65. "This is because the SPRINT study looked at all patients regardless of age and didn't break down groups above or below a certain age," says Dr. Conlin.

The guidelines also redefined the various categories of hypertension. It eliminated the category of prehypertension, which had been defined as systolic blood pressure of 120 to 139 mm Hg or diastolic pressure (the lower number in a reading) of 80 to 89 mm Hg. Instead, people with those readings are now categorized as having either elevated pressure (120 to 129 systolic and less than 80 diastolic) or Stage 1 hypertension (130 to 139 systolic or 80 to 89 diastolic).

A reading of 140/90 mm Hg or higher is considered Stage 2 hypertension, and anything higher than 180/120 mm Hg is hypertensive crisis.

What should you do?

If you had previously been diagnosed with high blood pressure, the new guidelines don't affect you too much, says Dr. Conlin, as you still need to continue your efforts to lower it through medication, diet, exercise, and weight loss. "However, based on new

information in the guidelines, your doctor may propose treating your blood pressure to a lower level," he says.

The larger issue is that many men ages 65 and older suddenly find themselves diagnosed with elevated or high blood pressure, since the new normal is a whopping 20 points lower than before. Does this mean an automatic prescription for blood pressure drugs? Not necessarily.

"They should consult with their doctor about first adjusting lifestyle habits, such as getting more exercise, losing weight, and following a heart-healthy diet like the DASH or Mediterranean diet," says Dr. Conlin.

Medications are recommended to lower blood pressure in Stage 1 hypertension if you've already had a heart attack or stroke or if your 10-year risk of a heart attack is higher than 10%. (You can find your 10-year estimation at www.cvriskcalculator.com.) For others with Stage 1 hypertension, lifestyle changes alone are recommended.

"Overall, the new guidelines may help people get more involved with monitoring their blood pressure, which can hopefully prevent complications from hypertension," says Dr. Conlin.

SENIORS AND HIGH BLOOD PRESSURE

From National Institute of Health 2020

You can have high blood pressure, or hypertension, and still feel just fine. That's because high blood pressure often does not cause signs of illness that you can see or feel. But, high blood pressure, sometimes called "the silent killer," is very common in older people and a major health problem. If high blood pressure isn't controlled with lifestyle changes and medicine, it can lead to stroke, heart disease, eye problems, kidney failure, and other health problems. High blood pressure can also cause shortness of breath during light physical activity or exercise.

What Is Blood Pressure?

Blood pressure is the force of blood pushing against the walls of arteries. When the doctor measures your blood pressure, the results are given in two numbers. The first number, called systolic blood pressure, is the pressure caused by your heart contracting and pushing out blood. The second number, called diastolic blood pressure, is the pressure when your heart relaxes and fills with blood. Your blood pressure reading is usually given as the systolic blood pressure number over the diastolic blood pressure number, such as 138/72. Normal blood

pressure for adults is defined as a systolic pressure of less than 120 and a diastolic pressure of less than 80. This is stated as 120/80.

Do I Have High Blood Pressure?

One reason to visit your doctor regularly is to have your blood pressure checked. Routine checks of your blood pressure will help pick up an early rise in blood pressure, even though you might feel fine. If there's an indication that your blood pressure is high at two or more checkups, the doctor may ask you to check your blood pressure at home at different times of the day. If the pressure stays high, even when you are relaxed, the doctor may suggest exercise, changes in your diet, and, most likely, medications.

What is considered high blood pressure for older adults?

Recent updates to guidelines from the American Heart Association and the American College of Cardiology changed the definition of high blood pressure or hypertension for most people. High blood pressure is now generally defined as 130 or higher for the first number, or 80 or higher for the second number (previously it was

140/90). However, there are important considerations for older adults in deciding whether to start treatment for high blood pressure, including other health conditions and overall fitness. If your blood pressure is above 130/80, your doctor will evaluate your health to determine what treatment is needed to balance risks and benefits in your particular situation.

What if Just the First Blood Pressure Number Is High?

For older people, often the first number (systolic) is 130 or higher, but the second number (diastolic) is less than 80. This problem is called isolated systolic hypertension, which is due to age-related stiffening of the major arteries.

It is the most common form of high blood pressure in older people and can lead to serious health problems (stroke, heart disease, eye problems, and kidney failure) in addition to shortness of breath during light physical activity, lightheadedness upon standing too fast, and falls. Isolated systolic hypertension is treated in the same way as regular high blood pressure (130 or higher for the first number, or 80 or higher for the second number) but may require more than one type of blood pressure medication. If your doctor determines that your systolic pressure is above a normal level for your age, ask how you can lower it.

What if My Blood Pressure Is Low?

If your blood pressure is lower than 90/60, you have low blood pressure, or hypotension. You may feel lightheaded, weak, dizzy, or even faint. Low blood pressure can be caused by not drinking enough liquids (dehydration), blood loss, some medical conditions, or too much medication.

Some High Blood Pressure Risks You Can't Change

Anyone can get high blood pressure. But some people have a greater chance of having it because of things they can't change. These are:

- **Age.** The chance of having high blood pressure increases as you get older.
- **Gender.** Before age 55, men have a greater chance of having high blood pressure. Women are more likely to have high blood pressure after menopause.
- **Family history.** High blood pressure tends to run in some families.
- **Race.** African Americans are at increased risk for high blood pressure.

How Can I Control My Blood Pressure?

High blood pressure is very common in older people. As we age, our vascular system changes. Arteries get

stiffer, so blood pressure goes up. This is true even for people who have heart-healthy habits. The good news is that blood pressure can be controlled in most people.

There are many lifestyle changes you can make to lower your risk of high blood pressure:

- **Keep a healthy weight.** Being overweight adds to your risk of high blood pressure. Ask your doctor if you need to lose weight.
- **Exercise every day.** Moderate exercise can lower your risk of high blood pressure. Set some goals so you can exercise safely and work your way up to exercising at least 30 minutes a day most days of the week. Check with your doctor before starting an exercise plan if you have any health problems that are not being treated.
- **Eat a healthy diet.** A diet rich in fruits, vegetables, whole grains, and low-fat dairy products may help to lower blood pressure.
- **Cut down on salt.** As you get older, the body and blood pressure become more sensitive to salt (sodium), so you may need to watch how much salt is in your diet. Most of the salt comes from processed foods (for example, soup and baked goods). A low-salt diet, such as

the DASH diet, might help lower your blood pressure. Talk with your doctor about eating less salt.

- **Drink less alcohol.** Drinking alcohol can affect your blood pressure. Men should not have more than two drinks a day and women no more than one a day to lower their risk of high blood pressure.
- **Don't smoke.** Smoking increases your risk for high blood pressure, heart disease, stroke, and other health problems. If you smoke, quit. You are never too old to quit, and the health benefits of quitting can be seen at any age.
- **Get a good night's sleep.** Tell your doctor if you've been told you snore or sound like you stop breathing for moments when you sleep. This may be a sign of a problem called sleep apnea. Treating sleep apnea and getting a good night's sleep can help to lower blood pressure.
- **Manage stress.** Relaxing and coping with problems can help lower high blood pressure.

If these lifestyle changes don't lower your blood pressure to a safe level, your doctor will also prescribe medicine. You may try several kinds or combinations of medicines before finding a plan that works best for you. Medicine can control your blood

pressure, but it can't cure it. You will likely need to take medicine for the rest of your life. Plan with your doctor how to manage your blood pressure.

High Blood Pressure Facts

High blood pressure is serious because it can lead to major health problems. Make a point of learning what blood pressure should be. And, remember:

- High blood pressure may not make you feel sick, but it is serious. See a doctor to treat it.
- You can lower your blood pressure by changing your day-to-day habits and by taking medicine, if needed.
- If you take high blood pressure medicine, making some lifestyle changes may help lower the dose you need.
- If you take blood pressure medicine and your blood pressure goes down, it means medicine and lifestyle changes are working. If another doctor asks if you have high blood pressure, the answer is, "Yes, but it is being treated."
- Tell your doctor about all the drugs you take. Don't forget to mention over-the-counter drugs, vitamins, and dietary supplements. They may affect your blood pressure. They also can change how well your blood pressure medicine works.
- Blood pressure pills should be taken at the same time each day. For example, take your medicine in the morning with breakfast or in the evening after brushing your teeth. If you miss a dose, do not double the dose the next day.
- Don't take more of your blood pressure medicine than your doctor prescribes. Do not stop taking your medicine unless your doctor tells you to stop. Don't skip a day or take half a pill. Remember to refill your medicine before you run out of pills. If you cannot afford your medicines, talk with your doctor or pharmacist.
- Before having surgery, ask your doctor if you should take your blood pressure medicine on that day.
- Get up slowly from a seated or lying position and stand for a bit before walking. This lets your blood pressure adjust before walking to prevent dizziness, fainting, or a fall.
- As you get older, high blood pressure, especially isolated systolic hypertension, is more common and can increase your risk of serious health problems. Treatment, especially if you have other medical conditions, requires ongoing evaluation and discussions with your doctor to strike the best balance of

reducing risks and maintaining a good quality of life.

If your doctor asks you to take your blood pressure at home, keep in mind:

- There are many home blood pressure monitors for sale. Ask your doctor, nurse, or pharmacist which monitor you need and how to use it. Have your monitor checked at the doctor's office to make sure it works correctly.
- Avoid smoking, exercise, and caffeine 30 minutes before

checking your blood pressure.

- Make sure you are sitting with
- your feet uncrossed and on the floor, and that your back is resting against something.
- Relax quietly for 5 minutes before checking your blood pressure.
- Keep a list of your blood pressure numbers, what time you measured your blood pressure, and when you took your blood pressure medication (if you take it). Share this information with your doctor, physician's assistant, or nurse.

NIH STUDY FINDS HEAVILY PROCESSED FOODS CAUSE OVEREATING AND WEIGHT GAIN

From the NIH 2019

People eating ultra-processed foods ate more calories and gained more weight than when they ate a minimally processed diet, according to results from a National Institutes of Health study. The difference occurred even though meals provided to the volunteers in both the ultra-processed and minimally processed diets had the same number of calories and macronutrients. The results were published in *Cell Metabolism*.

This small-scale study of 20 adult volunteers, conducted by researchers at the NIH's National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK), is the first randomized controlled trial examining the effects of ultra-processed foods as defined by the NOVA classification system. This system considers foods "ultra-processed" if they have ingredients predominantly found in industrial food manufacturing, such as hydrogenated oils, high-fructose corn

syrup, flavoring agents, and emulsifiers.

Previous observational studies looking at large groups of people had shown associations between diets high in processed foods and health problems. But, because none of the past studies randomly assigned people to eat specific foods and then measured the results, scientists could not say for sure whether the processed foods were a problem on their own, or whether people eating them had health problems for other reasons, such as a lack of access to fresh foods.

“Though we examined a small group, results from this tightly controlled experiment showed a clear and consistent difference between the two diets,” said Kevin D. Hall, Ph.D., an NIDDK senior investigator and the study’s lead author. “This is the first study to demonstrate causality — that ultra-processed foods cause people to eat too many calories and gain weight.”

For the study, researchers admitted 20 healthy adult volunteers, 10 male and 10 female, to the NIH Clinical Center for one continuous month and, in random order for two weeks on each diet, provided them with meals made up of ultra-processed foods or meals of minimally processed foods. For example, an ultra-processed breakfast might consist of a bagel with cream cheese and turkey bacon, while the

unprocessed breakfast was oatmeal with bananas, walnuts, and skim milk. The ultra-processed and unprocessed meals had the same amounts of calories, sugars, fiber, fat, and carbohydrates, and participants could eat as much or as little as they wanted.

On the ultra-processed diet, people ate about 500 calories more per day than they did on the unprocessed diet. They also ate faster on the ultra-processed diet and gained weight, whereas they lost weight on the unprocessed diet. Participants, on average, gained 0.9 kilograms, or 2 pounds, while they were on the ultra-processed diet and lost an equivalent amount on the unprocessed diet.

Dietitians at the Clinical Center of the National Institutes of Health designed recipes to test the effects of ultra-processed and unprocessed diets on study participants. “We need to figure out what specific aspect of the ultra-processed foods affected people’s eating behavior and led them to gain weight,” Hall said. “The next step is to design similar studies with a reformulated ultra-processed diet to see if the changes can make the diet effect on calorie intake and body weight disappear.”

For example, slight differences in protein levels between the ultra-processed and unprocessed diets in this study could potentially explain as

much as half the difference in calorie intake.

“Over time, extra calories add up, and that extra weight can lead to serious health conditions,” said NIDDK Director Griffin P. Rodgers, M.D. “Research like this is an important part of understanding the role of nutrition in health and may also help people identify foods that are both nutritious

and accessible — helping people stay healthy for the long term.”

While the study reinforces the benefits of unprocessed foods, researchers note that ultra-processed foods can be difficult to restrict. “We have to be mindful that it takes more time and more money to prepare less-processed foods,” Hall said. “Just telling people to eat healthier may not be effective for some people without improved access to healthy foods.”

HOW TO HELP SENIOR LOVED ONES PROTECT THEMSELVES FROM FINANCIAL ABUSE

From the Senior Citizen Times 2021

An often-overlooked aspect of elder abuse is cybercrime – and it’s a problem that’s getting worse.

In 2020, the FBI reported a record amount of cybercrime complaints – nearly 800,000 – adding up to over \$4.1 billion in losses. More than half of those losses were suffered by people aged 50 and older.

‘The financial consequences are staggering,’ said DJ Johnson, senior vice president of financial crimes risk management at Charles Schwab. ‘It’s something we all need to prioritize, dedicate resources to address and work closely on to prevent.’

The FBI data shows that, on average, Americans aged 50 and over lost nearly \$5 million every single day, or

nearly \$3,500 per minute, to cybercriminals.

To protect your loved ones from financial cybercrime, the first step is awareness.

What are the scams?

While fraud can come in many forms, some criminal schemes are targeted at the senior population, including:

- **Romance**

scam: Fraudsters present themselves as potential romantic partners online to exploit their targets’ desire for companionship – a desire that has grown for many who have felt isolated through the coronavirus pandemic –

and eventually get access to their money.

- **Person in need scam:** Criminals pretend to be a loved one (e.g., a grandchild) in immediate trouble and need of money right away.
- **Investment scam:** Outreach with phony investment opportunities.
- **Fraud investigation scam:** Criminals pose as law enforcement officials, asking for personal information or even money to help with their investigation.
- **Technology scam:** Fraudsters appear to be a technology support team member or someone from a trusted financial institution asking for remote access to fix a fabricated technical or account issue.

Who are the perpetrators?

When we think of fraudsters, we tend to think of nameless, faceless people sitting in the dark, halfway around the world. In reality, a report by the Office of Financial Protection for Older Americans found that in 36% of cases, the victim knows the perpetrator personally.

This is why caregiving should be a group effort. Bring other loved ones into the conversation, instead of leaving it in the hands of just one person. Lean on the financial institutions you keep your money with to be an extra set of eyes and ears for you. For instance, at Charles Schwab, we have teams dedicated to identifying and dealing with fraud attempts.

How can caregivers protect senior loved ones?

For caregivers, if you're worried about your loved ones, start with this checklist to protect them:

- **Talk about it.** Have a conversation about common scams. Discuss your loved ones' investment goals and attitudes toward money so that you can recognize irregular behavior.
- **Designate trusted contacts.** Make sure financial institution reps know who to contact on your loved one's behalf in the event of suspected exploitation, fraud or health issues.
- **Get organized.** Locate and safely store important financial documents, such as wills, trusts, powers of attorney, account statements, insurance

policies and beneficiary designations.

Even after you put things in place for your loved ones, be vigilant:

- **Check in.** Regularly review and update important financial documents.
- **Listen.** Pay attention to what your loved ones are saying and listen for worrying key phrases, such as 'people are asking me for money,' 'my bills are confusing to me' and 'I don't understand financial

decisions that someone else is making for me.'

- **Watch.** Look out for red-flag behaviors, including unusual or unexplained financial activity, abrupt changes to documents, unpaid bills or mail piling up, new friends or sweethearts or confused behavior.

For more information on ways to educate and protect yourself and senior family members from fraudsters, visit [schwab.com/schwabsafe/security-knowledge-center](https://www.schwab.com/schwabsafe/security-knowledge-center).

WISDOM FROM SENIORS

From The Freeman Institute 2018

1. I started with nothing. I still have most of it.
2. When did my wild oats turn to prunes and all bran?
3. I finally got my head together, now my body is falling apart.
4. Funny, I don't remember being absent minded.
5. All reports are in. Life is now officially unfair.
6. If all is not lost, where is it?
7. It is easier to get older than it is to get wiser.
8. If at first you do succeed, try not to look astonished.
9. The first rule of holes: if you are in one, stop digging.

10. I tried to get a life once, but they told me they were out of stock.
11. I went to school to become a wit, only got halfway though.
12. It was so different before everything changed.
13. Some day's you're the dog, and some day's you're the hydrant.
14. Nostalgia isn't what it use to be.
15. God wanted me to touch my toes, He would have put them on my knees.
16. Never knock on death's door, ring the bell and run (He hates that).
17. Lead me not into temptation (I can find the way myself).
18. When you are finally holding all the cards, why does everyone else decide to play chess.
19. If you are living on the edge, make sure you're wearing your seatbelt.
20. There are two kinds of pedestrians. The quick and the dead.
21. An unbreakable toy is useful for breaking other toys.
22. A closed mouth gathers no feet.
23. Health is merely the slowest possible rate at which one can die.
24. It's not hard to meet expenses; they are everywhere.
25. Jury: Twelve people who determine which client has the better attorney.
26. The only difference between a rut and a grave is the depth.

PERKS TO BEING OVER 50

1. Kidnappers are not very interested in you.
2. In a hostage situation you are likely to be released first.
3. No one expects you to run into a burning building.
4. People call at 9 PM and ask, "Did I wake you?"

5. People no longer view you as a hypochondriac.
6. There is nothing left to learn the hard way.
7. Things you buy now won't wear out.
8. You can eat dinner at 4 P.M.
9. Your supply of brain cells is finally down to manageable size.
10. You enjoy hearing about other people's operations.
11. You get into heated arguments about pension plans.
12. You have a party and the neighbors don't even realize it.
13. You no longer think of speed limits as a challenge.
14. You quit trying to hold your stomach in, no matter who walks into the room.
15. You sing along with elevator music.
16. Your eyes won't get much worse.
17. Your investment in health insurance is finally beginning to pay off.
18. Your joints are more accurate meteorologists than the national weather service.
19. Your secrets are safe with your friends because they can't remember them either.
20. You can't remember who sent you to this particular web page.

On Getting Old

You know you're getting old...

...when you feel like it's the morning after, and you didn't go anywhere the night before.

...when you look forward to a dull evening.

...when a little old lady helps you across the street, and it's your wife.

...when you get winded playing chess.

...when you sink your teeth into a thick steak, and they stay there.

...when everything that doesn't hurt doesn't work.

...when the gleam in your eyes is the sun hitting your bifocals.

...when your children are older than you re-member your parents being when you were young.

...when your mind makes contracts that your body can't keep.

...when you finally know all the answers, and no-body's asking you any questions.

...when the favorite part of the newspaper is the section under the heading "25 years ago today."

...when you sit down in a rocking chair and can't get it going.

...when your knees buckle but your belt won't.

...when your back goes out more often than you do.

...when you get excited and your pacemaker makes the garage door go up.

...when your house is too big, and the medicine cabinet is too small.

...when you wake up and realize that the best part of the day is over.
...when you figure that if God wanted you to touch your toes, He would have put them on your knees.
...when your spouse says, "Let's go upstairs and make love," and you say, "Honey, we can't do both."
...when your friends compliment you on your new alligator shoes, and you're not wearing shoes.

A group of senior citizens were talking at the breakfast table in a Palm Springs nursing home.

"My arms are so weak I can hardly lift this cup of coffee," said one.

"Yes, I know. My cataracts are so bad I can't even see my coffee," replied another.

"I can't turn my head because of the arthritis in my neck," said a third, to which several nodded weakly in agreement.

"My blood pressure pills makes me dizzy," another went on.

"I guess that's the price we pay for getting old," winced an old man as he slowly shook his head.

Then there was a short moment of silence.

THE HEALTH RISKS OF OBESITY IN SENIORS

From Family Matters online 2017

America is suffering an obesity epidemic that continues to worsen each year. We often hear about the growing problem among adults and

even children, but what about obesity in the senior population?

In the past, seniors were at risk of being underweight, however this has changed as the number of overweight

seniors grows. According to Congressional Research Service estimates, if the current pattern is continued, nearly half of the elderly population will be obese by 2030.

There are many reasons older adults gain excess weight. As we age, our metabolism slows and mobility often declines leading to a less active lifestyle. Additionally, as we grow older, we tend to lose muscle mass, which gets replaced with fat. Older adults may also experience a natural loss of taste buds causing them to consume more sodium, sugar and high caloric foods that lead to weight gain.

Health conditions associated with obesity

While being overweight has health consequences at any age, older adults may suffer more severe complications overall. As we age, our organs don't function as efficiently. Seniors who are obese have an even greater strain on their organs to operate properly. An overweight senior's heart has to work much harder to pump blood throughout the body causing the heart muscle to enlarge. This can lead to serious heart disease, a number one killer among older adults.

Obese seniors are also at risk for developing:

- Hypertension
- High cholesterol
- Certain cancers
- Diabetes

- Breathing problems
- Gallstones

Being overweight can cause mental health complications as well. Most seniors experience some level of cognitive decline as they grow older. However, studies show that cognition, which includes memory recall, information processing, and decision making, deteriorates more rapidly in those who are affected by obesity.

Obesity has also been linked to depression and a decreased overall quality of life, which can be especially concerning for seniors. Seniors suffering from depression are twice as likely to develop heart disease and other life-threatening illnesses, and have the highest incidence of suicide among any age group.

How to fight obesity

It's never too late lose weight and improve your health. Some studies show that a weight loss as little as 3 percent in older adults may significantly improve conditions such as inflammation, blood pressure, cholesterol and blood sugar.

Here are some common ways to help manage weight:

- **Exercise.** Physical activity is an important part of losing weight and improving overall health. Try low impact activities such as walking, swimming, and bicycling. These activities are generally considered safe for

seniors, even those who suffer from conditions such as heart disease or high blood pressure.

- **Eat healthy.** Proper nutrition is important at any age. Eating a sensible diet of whole grains, fresh produce, and lean protein can help

seniors stay healthy avoid excess weight gain. Seniors who have difficulty chewing or special dietary restrictions may benefit from consulting with a nutritionist or dietician for diet recommendations and guidance.

BENEFITS OF JOINING A BOOK CLUB FOR SENIORS

From Senior Living Blog 2020

More than a reading group, book clubs provide a great opportunity for seniors to socialize, expand horizons, stay current on social events, and more. Learn more about the benefits of joining a senior book club and commit to joining one this month!

1. MAKE NEW FRIENDS

Book clubs are a great way for seniors to reach out and make new friends. Most book clubs meet monthly and are a great way to make friends who enjoy similar things – like reading. Book clubs fight social isolation and loneliness, immediately providing a group and a topic of conversation for that group. Social isolation has been associated with a higher risk of depression and even linked to an increased risk of dementia.

2. GAIN NEW PERSPECTIVES

Book clubs are a great way to gain

other perspectives on the world. Not only do books help us learn about the world around us through the text itself, they facilitate conversation and discussion across generations and cultural lines. As books bring out thoughts and personal experiences of their readers, book clubs can be a great way to see the world through someone else's viewpoint.

3. GET OUTSIDE YOUR COMFORT ZONE

Since most book clubs give participants a turn to choose a book, joining a book club is a great way to explore different genres, and maybe even discover a new favorite. Book clubs often have a wide range of books throughout the year ranging from non-fiction and mystery to historical fiction and romance. You may be surprised to learn which ones appeal to you in different seasons of life.

4. LEARN IN AN INFORMAL ENVIRONMENT

Classes and lectures can sometimes be an intimidating environment for seniors. Book clubs give seniors a great way to learn about current events, history, political science, and more in an informal setting where they can voice ideas freely and then discuss ideas and events without a formal setting – or a grade. Additionally, discussing books with others can reinforce ideas and events, helping

readers to better retain information.

5. IMPROVE AND MAINTAIN COMMUNICATION SKILLS

Book clubs are a great way for seniors to improve and maintain communication skills through aging. Because books draw out personal opinions, participants in a book club

have to learn how to listen, discuss, and disagree without resorting to emotional arguments. Discussions encourage participants to be honest and tactful at the same time. Book clubs can also help seniors overcome a fear of public speaking as discussing books require speaking in front of a small group, expressing opinions, and summarizing ideas.

6. ENCOURAGE CULTURAL AWARENESS

Book clubs appeal to people from all walks of life. They can be found in the halls of high schools and in senior living apartments. Books call to all cultures, all races, and people of different socioeconomic status. Choosing to be an active participant in a book club can challenge the way we view the world, change our views on the world around us, and understand others in a new and profound way.

SENIORS BRING WISDOM TO YOUNGER GENERATIONS.....NOW IF ONLY THEY WOULD LISTEN

From CompassCare2020

America is ambivalent about the wisdom of older people. Popular culture provides both buffoonish images of the elderly – as well as sages

who offer unparalleled wisdom. So if younger people question what important life lessons they can glean from the experience of older

Americans – let me assure them that our elders are a uniquely important source of guidance....they are experts on living well through hard times.

Here are three perspectives as to why younger Americans should turn to the elderly as potential repositories of wisdom.

1. Listening to the advice of older people has promoted well-being and even survival for millennia. To put things in perspective, you need to realize that over 1.5 million years of human existence, it is only in the past 150 years that people have gone to anyone other than local elders for solutions to life's problems. Anthropologists tell us that, historically, the accumulated wisdom of older people was a key to human survival. Not only did the older improve the survival chances of their grandchildren by caring for them and finding them food; they also were the source of life experience to whom group members would go in time of crisis. Later on, in agricultural societies, the family elder was often the only one who knew how his family's property should be farmed or how to handle drought or pest infestation. Without that elder's knowledge basic survival of the family was in peril. So consulting older people was really a "natural" thing for humans to do.

2. America's elders are a unique and extraordinary generation

People in their seventies and beyond have lived through experiences many of us today can only imagine. Their lives have often included what psychologist Juan Pascual-Leone has termed "ultimate limit situations." As he eloquently puts it, these are situations that "cannot be undone and are nonetheless faced with consciousness and resolve." Situations like illness, aging, failure, oppression, loss, crushing poverty, and war. It is precisely these situations that lead to wisdom. America's elders have more of this kind of wisdom more than the rest of us because on average they have been through many more ultimate 'limit situations.' They have survived them, absorbed them, and gained invaluable experience. This unique perspective is a valuable lens through which younger people can view their own lives.

3. Elders offer an alternative to conventional wisdom

There's a paradox here: This point is simultaneously why we should seek out elder wisdom and also why younger people may not pay attention. From our surveys of elders about their lessons for living, we found that their perspectives often *shake up conventional wisdom*. Conventional wisdom is what everybody knows—what the members of a society learn

while they are growing up. Conventional wisdom reinforces the values of the culture. It ultimately becomes the basis of our identity and self-esteem.

I found that the elders often rejected what has become conventional wisdom and point to an alternative. This alternative wisdom defies a single categorization—sometimes it's what we think of as “liberal” (endorsing religious tolerance and rejecting materialistic worldviews) and sometimes it is what we think of as “conservative” (marriage should be a lifelong commitment). But it is exactly this challenge to the conventional

world-view that the true value of their wisdom lies. The elders lead us to examine our assumptions and make more conscious decisions about our own scripts for happiness.

In the end, I come down on the side that the accumulated wisdom of older people—our “experts” on living—can serve as a helpful guide for us. They bring experiential knowledge of just about every problem a human being can go through. People from their teens to middle age will find that the roadmap for life that elders provide can help them take a new look at their own situations and choose new ways of living that will make them happier.

HERE ARE GARDENING TIPS FOR JULY FOR TALLAHASSEE

Start planning your fall garden.

In the first half of the month, you can still plant okra, pole beans, lima beans, and corn. Also, plant cucumbers, squash, and snap beans. Just be sure that enough water is provided.

Be sure to harvest your fruit and vegetables continuously before any animals can get to them.

Make sure that the garden is well mulched to conserve moisture. Water

early in the morning and deeply to avoid drought stress. Lightly fertilize your flower beds to encourage their growth.

Bulbs that can be planted in the middle of the summer include gladiolus and butterfly lily.

As long as they stay moist, you can plant annuals such as coleus, ornamental pepper, and crossandra. Continue planting palms if it's still wet and rainy. Support large palms with braces for 6 to 8 months after planting.

Remove any dead flowers on your plants to encourage new growth. Plant a pumpkin for Halloween!

Prune your shrubs and trees if it is necessary. Do not heavily prune your spring-flowering shrubs.

Remove any dead or diseased plants from your garden immediately. You can replace them with new plants.

Do not neglect your container plants; they need more water than those plants in the ground.

Lawn insects can be a problem. Before treating, ensure that it's not a moisture or disease problem.

If you haven't prepared yet for hurricane season, make sure that all weak branches and trees are pruned.

(Editor's Moment of Levity) The farmer was shocked when he was recognized for his country fried chicken recipe. It was a Pullet-Surprise!

QUOTES OF THE MONTH

LEADERSHIP

“Leadership is the art of getting someone else to do something you want because he wants to do it.”

Dwight Eisenhower

LAUGHTER

“Laughter is magic that dispenses clouds and creates sunshine in the soul.”

Richelle E. Goodrich

For publication in the OLLI times send **your information to George and Harriet Waas** at **waas01@comcast.net**

Do you have an idea for a class?

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