



OLLI AT FSU'S MONTHLY NEWSMAGAZINE

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**VOLUNTEER CLASS HOSTS NEEDED FOR FALL CLASSES  
ON CAMPUS; OLLI COURSE AND ACTIVITIES CATALOG TO  
BE PUBLISHED ONLINE ONLY FOR THE FALL SEMESTER.**

As OLLI returns to the FSU campus on a limited basis for the Fall Semester, volunteers will be needed to serve as class hosts, Director Debra Herman said. “We will have live classes on campus each Wednesday during the Fall Semester, and of course we will need volunteers to serve as class hosts,” she said.

“However, the importance of volunteer participation takes on an even greater significance since we are coming off what will be an 18-month hiatus due to COVID. We need a reinvigoration of the volunteering spirit to take hold once again as we move toward a full return to normal OLLI life,” she added.

“Of course, we will continue to evaluate in-person classes on Wednesday as we move closer to registration in light of the Delta variant becoming more rampant. We need to make sure it’s safe to proceed considering the vulnerability of our members,” she said.

On another note, Herman announced that the Fall Semester Course and Activities catalog will be available online only, although we will be mailing a one-page list of classes with the day and time offered. “The costs associated with the printing and mailout of the catalog has become so high, and the importance of using technology so great, that the decision to go digital was an easy one,” she

said. “Our membership is becoming more and more attuned to technology, so this shift will, hopefully, not be a burden; and money saved on printing

and postage can and will be used for classes, faculty and other expenses designed to enhance the OLLI experience.”

## 10 SOCIAL SECURITY MYTHS THAT REFUSE TO DIE

**The program is going broke, the retirement age is 65, and other common misconceptions**

From AARP 2021

Social Security is enormous and complex, paying out nearly \$93 billion a month to some 65 million retirees, people with disabilities and their family members. It's wildly popular, supported by more than 90 percent of U.S. adults across the political spectrum, according to a recent AARP survey. And it's critical to older Americans' financial health, with 4 in 5 of those polled expecting to rely on Social Security during their later years.

Given Social Security's importance, concerns about its current and future state are understandable and widespread. Some of those worries, and the many changes to the program in its 85-year history, have given rise to misconceptions about how it is funded and how it works. Here are the facts behind 10 of the most stubborn Social Security myths.

### **Myth #1: Social Security is going broke**

**The facts:** As long as workers and employers pay payroll taxes, Social

Security will not run out of money. It's a pay-as-you-go system: Revenue coming in from FICA (Federal Insurance Contributions Act) and SECA (Self-Employed Contributions Act) taxes largely cover the benefits going out.

Social Security does face funding challenges. For decades it collected more than it paid out, building a surplus of \$2.9 trillion by the end of 2019. But the system is starting to pay out more than it takes in, largely because the retiree population is growing faster than the working population, and living longer. Without changes in how Social Security is financed, the surplus is projected to run out in 2035.

Even then, Social Security won't be broke. It will still collect tax revenue and pay benefits. But it will only have enough to pay 79 percent of scheduled benefits, according to the latest estimate. To avoid that outcome, Congress would need to take steps to shore up Social Security's finances, as

it did in 1983, the last time the program nearly depleted its reserves. The steps then included raising the full retirement age (see Myth #2), increasing the payroll tax rate and introducing an income tax on benefits (see Myth #8).

### **Myth #2: The Social Security retirement age is 65**

**The facts:** Full retirement age, or FRA — the age when a worker qualifies to file for 100 percent of the benefit calculated from lifetime earnings history — is currently 66 and 2 months. Those born in 1955 reach the milestone this year (or the first two months of next year). Over the next five years it will increase by two months at a time, settling at 67 for those born in 1960 and after.

The 65 threshold is a longtime Social Security truth that became a myth. When Social Security was created in 1935, 65 was set as the age of eligibility. In later decades the minimum eligibility age was lowered to 62, when people could claim a reduced benefit, but 65 remained the standard for full retirement.

That changed with the 1983 overhaul, which raised the retirement age to reduce Social Security's costs. The increase is being phased in over time; 2002 was the last year in which people turning 65 could claim their full benefit.

### **Myth #3: The annual COLA is guaranteed**

**The facts:** Since 1975, Social Security law has mandated that benefit amounts be adjusted annually to keep pace with inflation. But there is no requirement that this cost-of-living adjustment (COLA) produce a yearly increase.

The COLA is tied to a federal index of prices for select consumer goods and services called the CPI-W. Benefits are adjusted annually based on changes in the CPI-W from the third quarter of one year to the third quarter of the next. In 2020, the index showed a 1.3 percent increase in prices, so 2021 benefits grew by that amount.

But if the index doesn't show a statistically measurable rise in prices — if there's effectively no inflation — then there's no adjustment to benefits. This has happened three times since the current formula was adopted, in 2010, 2011 and 2016. Whether or not it produces a benefit increase, this process is automatic; it does not involve the president or Congress. They would have to take separate action to change the COLA.

### **Myth #4: Members of Congress don't pay into Social Security**

**The facts:** A common complaint about Social Security is that members of Congress don't bother fixing the program because it doesn't cover them. Actually, it does. Members of

Congress came under the Social Security umbrella in 1984, along with the rest of the federal workforce, as part of the sweeping changes to the program enacted the previous year.

Before that, senators and representatives did not pay into Social Security and were instead fully covered by a pension plan called the Civil Service Retirement System (CSRS). Those in office on Jan. 1, 1984, were allowed to remain in CSRS, but only in conjunction with Social Security. (If you're curious, two senators and five House members remain from those days.)

Those elected since are covered by Social Security as well as a pension program that replaced CSRS. Either way, members of Congress pay into Social Security just like most American workers.

#### **Myth #5: The government raids Social Security to pay for other programs**

**The facts:** The two trust funds that pay out Social Security benefits — one for retirees and their survivors, the other for people with disabilities — have never been part of the federal government's general fund. Social Security is a separate, self-funded program. The federal government does, however, borrow from Social Security.

Here's how: Social Security's tax revenue is, by law, invested in special U.S. Treasury securities. As with all Treasury bonds, the federal government can spend the proceeds on a variety of programs. But as with all

bondholders, Treasury has to pay the money back, with interest. Social Security redeems the securities to pay benefits.

This borrowing fuels the notion that the government is raiding or even stealing from Social Security and leaving it with nothing but IOUs. But the government has always made full repayment, and the interest increases Social Security's assets, to the tune of more than \$80 billion in 2019 alone.

#### **Myth #6: Undocumented immigrants drain Social Security**

**The facts:** Some have blamed problems with Social Security's financial health on undocumented immigrants draining the system's resources. It's a popular complaint, but a false one. Noncitizens who live and work in the U.S. legally can qualify for Social Security under the same terms as native-born and naturalized Americans, but undocumented people are not allowed to claim benefits.

There is evidence that undocumented workers actually improve Social Security's bottom line. Some do obtain Social Security numbers under false

pretenses, and payroll taxes are withheld from their wages even though they are not eligible to later collect benefits. A report by Social Security actuaries said that undocumented immigrants made a net contribution of around \$12 billion to the program in 2010 and that their earnings would likely continue to “benefit the financial status” of Social Security.

### **Myth #7: Social Security is like a retirement savings account**

**The facts:** The government does not stow your payroll tax contributions in a personal account for you, to be paid out with interest when you retire. Your benefit is based on how much money you earned over your working life, not on how much you paid into the system. As noted above, those contributions fund benefits for current retirees (and their survivors, and people with disabilities). When you retire, those still working will cover your benefits, and so on.

You might think of it less like saving for retirement — there are other vehicles for that — and more like an earned benefit the government promises to pay so you have at least some income in your later years. Emphasis on “some”: Contrary to another common misperception, Social Security is not meant to replace your entire work income. On average, it provides about 40 percent of a beneficiary's preretirement earnings. The formula for calculating benefits is

weighted so that they replace a larger percentage of income for lower-wage workers and a lower percentage for upper-income earners.

### **Myth #8: You don't pay taxes on Social Security benefits**

**The facts:** This was true until 1984. The Social Security overhaul passed by Congress and signed by President Ronald Reagan the year before included a provision that made a portion of Social Security benefits taxable, depending on your income level.

You will pay federal income tax on up to 50 percent of your benefits if your income for the year is \$25,000 to \$34,000 for an individual filer and \$32,000 to \$44,000 for a couple filing jointly. Above those thresholds, up to 85 percent of benefits are taxable. Below them, you don't owe the IRS anything on your benefits. (Roughly speaking, Social Security counts as income the money you get from work, pensions and investments; nontaxable interest; and half of your Social Security benefits.)

You might also owe state taxes on your Social Security income if you live in Colorado, Connecticut, Kansas, Minnesota, Missouri, Montana, Nebraska, New Mexico, North Dakota, Rhode Island, Vermont, Utah or West Virginia. Their rules on taxing benefits vary widely; contact your state tax agency to learn more.

### **Myth #9: An ex-spouse's benefits come out of your own**

**The facts:** If you are divorced, your former spouse may be eligible to collect Social Security benefits on your earnings record (and vice versa). As with benefits for a current spouse, these can be up to 50 percent of the benefit amount you are entitled to at full retirement age.

But those ex-spouse (or spouse) benefits don't reduce your Social Security. They are distinct payments and have no effect on what you receive each month, even if both a current and a former spouse (or multiple former spouses) are collecting them. You get the benefit you're entitled to, based on your earnings history and the age when you file for Social Security.

### **Myth #10: You lose benefits permanently if you keep working**

**The facts:** Social Security does have a rule, called the "earnings limit" or "earnings test," that can temporarily

reduce the benefits of people who still work. But it doesn't apply to all

working beneficiaries and is not permanent. The rule only covers people who claim benefits before full retirement age and continue working. In this circumstance, Social Security withholds a portion of benefits if earnings from work exceed a set cap, which changes every year and differs depending on how close you are to full retirement age.

In 2021, your benefit is reduced by \$1 for every \$2 in income above \$18,960, if you won't hit full retirement age until 2022 or later. If you will reach FRA in 2021, the formula is \$1 less in benefits for every \$3 in earnings above \$50,520. On the date when you hit FRA, the earnings test goes away — there's no benefit reduction, regardless of your income. Social Security also adjusts your benefit upward so that over time, you recoup the money that was withheld.

## **TPD WARNING RESIDENTS OF UTILITIES SCAM CIRCULATING IN TALLAHASSEE**

From WCTV Tallahassee

The Tallahassee Police Department is warning residents of a telephone scam that is circulating in the city.

According to TPD, residents have reported a scam where a person calls

and informs the victim that they will have their utilities disconnected if their overdue bills are not paid immediately. The scammer will leave voice mails with callback numbers that go to

recordings that sound exactly like the City of Tallahassee Utilities recording.

Callers are then directed to a certain extension which also has the City Utilities' recorded information on it. They are eventually connected with a subject who informs them they must purchase gift cards and pay by phone, TPD said.

TPD said to never wire money, purchase gift cards, or provide personal information such as social security numbers or account numbers over the phone, social media or email as this is often requested to carry out these and other types of scams. If contacted by a scammer, you can report the incident to TPD by calling 850-891-4200.

## **OLLI FRIENDSHIP FORCE SETS AUGUST IN-PERSON MEETING**

OLLI Friendship Force will meet on Tuesday August 10th at 6 pm at the Westminster Oaks Pool House for our social potluck dinner.

We request that all participants be vaccinated for COVID.

Please contact Jane Hudson, social chairman, after August 2nd

at [jhudson\\_98@yahoo.com](mailto:jhudson_98@yahoo.com) if you need additional information about the dinner.

For general information about Friendship Force, contact Wendy Johnston at

[mrswendyjohnston@gmail.com](mailto:mrswendyjohnston@gmail.com)

## **MONDAY BOOK CLUB CONTINUES ZOOM OPTION FOR THE FALL; SETS PROGRAMS FOR REST OF 2021**

The Monday Book Club will meet via Zoom for the September 2021 meeting, with the possibility of meeting in person and also providing Zoom access for the meetings of October through January. The meetings are on the second Monday of each month from 11:00 a.m. until 12:30 p.m. Please register online for the Monday Book Club and then send an email to Nancy O'Farrell, Chair, at [nancyofarrell047@gmail.com](mailto:nancyofarrell047@gmail.com), to make sure that you are on our email contact list. A Zoom link will be

emailed in advance of each meeting, with a reminder of the link emailed the morning of the meeting. We welcome OLLI members who live outside the Tallahassee area to attend virtually, especially our friends over at 30A! If we meet in person, we ask that members follow CDC protocols. Wearing of masks is optional.

The meeting dates and books we will be discussing as follow: **September 13** This Is How It Always Is by Laurie Frankel **October 11\*** Lab Girl by

Hope Jahren **November 8** Behind the Beautiful Forevers by Katherine Boo  
**December 13** The Wonder Boys of Whistle Stop by Fannie Flagg

\*October 11 is Indigenous Peoples Day For an in-person meeting, library may be unavailable

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## THE PRESIDENT'S PAGE

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Harriet Waas  
President, OLLI Advisory Council



COVID-19 changed our lives, requiring us to devise new and creative ways to keep OLLI moving forward. But the news continues to be bright, as we will once again return to campus in the Fall and have face-to-face classes. Beginning in October, classes on campus will be held on Wednesdays; Zoom classes only will be held on the other days of the week.

We will also be able to attend activities together. The silver lining of the pandemic brought us instructors from many states as well as several international countries. We plan to keep these instructors, and possibly include others, through continuing

Zoom classes for the foreseeable future. Mark your calendar for the fall Showcase on Monday, September 13, which will once again be held via Zoom. Then, look for the fall catalog in a few weeks and review all the wonderful new offerings.

On a more personal note, I have been a member of OLLI for almost seven years. Attending classes has given me a wonderful source of enrichment in retirement, activities in which to participate, and an amazing new social group. Never being one to sit idly by, I recognized early on that so much of what OLLI at FSU offers its members is provided through volunteers, and



that I could help. My husband, George, and I were approached by the incoming president, Carroll Bewley, at a meet-and-greet event and asked if we liked to travel. We had been to several European countries and looked forward to future travel. Carroll asked us if we would consider heading up the Travel Club, and we readily accepted. Working with our OLLI Director, Debra Herman, we began planning several trips each year; one trip is always a study abroad and the other is for cultural and/or educational purposes. Traveling with our OLLI friends has been an incredible experience and much more fun than traveling alone.

The next step was to become a class host, join several established committees, then become a Member Representative, and finally a member of the executive team (Second Vice President, First Vice President, and now President to be followed by Immediate Past President). It has been extremely gratifying to be involved in

OLLI on a deeper level and work with other amazing volunteers to continuously find ways to give our members a more comprehensive program. Words do not describe the satisfaction one gets from being successful in an organization that thrives and depends on volunteers. Volunteering also allows me to give back to OLLI some of what I get through the efforts of other volunteers.

I strongly encourage each OLLI member to volunteer in some way. Share a special interest with others by starting a club, join an already existing committee, volunteer for one-time events that pop up throughout the year. Just for example, volunteer for the Showcase, the Spring Business Meeting, or the All-Member Reception. Connect with others and they will be sure to let you know what needs to be done. Together OLLI will become a stronger, better organization and more attractive to the Tallahassee community! And your lives will be richer for it.

### **WEDNESDAY BOOK CLUB HOPING FOR IN-PERSON MEETINGS; SETS PROGRAMS FOR SEPTEMBER TO JUNE**

By Laurie Svec

The Wednesday Book Club is hoping to resume our in-person meetings in the Pool House at Westminster Oaks, starting on September 8th. We will carefully observe the current COVID precautions recommended by FSU and

Westminster Oaks at the time of each meeting. However, if you don't feel safe or properly protected to meet in person, please consider registering for the Monday Book Club, which will

continue to offer a Zoom alternative for its discussions.

The book schedule for the year is noted below for those who would like to get started. PLEASE NOTE that the reading schedule has changed slightly, with The Plague of Doves now our April 2022 read, and The Four Winds for June 2022. By making this change we were able to snag a Traveling Book Club (TBC) bag for The Four Winds. We also have TBC bags reserved for Anxious People and Celestial Bodies.

If you are an AARP member, you can read installments of The Boy in the Field by Margot Livesay on their website after logging in.

September 8	<u>The Dutch House</u> by Ann Patchett
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October 13	<u>The Boy in the Field</u> by Margot Livesay
November 10	<u>The Book of Lost Names</u> by Kristen Harmel
December 8	<u>News of the World</u> by Paulette Jiles
January 12	<u>Anxious People</u> * by Fredrik Backman
February 9	<u>Celestial Bodies</u> * by Jokha Alharthi
March 9	<u>Buried Seeds</u> by Donna Meredith
April 13	<u>The Plague of Doves</u> by Louise Erdrich
May 11	<u>Lost Roses</u> by Martha Hall Kelly
June 8	<u>The Four Winds</u> * by Kristin Hannah

\*Traveling Book Club available

## *FROM THE WRITERS' CLUB*

### ST. GEORGE ISLAND AFTERNOON MEMORY

By Jenny Crowley

(Author's note: A SAW PALM SPECIAL FEATURE: PLACES TO STAND IN FLORIDA

Places to Stand is a literary map of Florida, using words instead of photos. Each pushpin marks a point where a contributor has written a short nonfiction piece about what it's like to stand at that particular place at a particular moment in time. Some of the Places to Stand pieces are

memories. Some are written on the spot. Some are written as poetry. Click on the pushpins and take a literary tour through Florida time and space! And here's the link <http://www.sawpalm.org/places-to-stand.html>)

While at the beach one afternoon, I glanced upward and spied aquamarine gulls glowing in the blue afternoon

sky. The white cirrus clouds were a gauzy backdrop to their flight. I licked the tip of my index finger and held it skyward to test the breeze. Like a curved fishhook, my finger bent to catch the invisible stream of air. A faint fishy smell carried on the breeze. My gaze was drawn seaward; perhaps bait fish were schooling nearby. I blinked from the glare; my chin dipped allowing my visor to shield the sunlight. I remember wishing I could see better. Splashes of water churned in front of me, and I squinted to identify the sea creatures. Undulating dolphin spines broke the water's surface as the sleek, sultry mammals swam along the shoreline. I stretched my arms behind me, tilted my chin

skyward, then closed my eyes and arched my back like a dolphins' curve.

As if salt water flowed over my body, I imagined the taste of the blue-green brine, and its astringent smell and sting. My neck swayed side to side mimicking the dolphins' action against the current. When I opened my eyes, the beach sky had lost its glow. The afternoon thunderheads were huddled along the shoreline blotting out the blue, warning me to retreat.

This memory appears in Places to Stand in Florida, an online literary map of Florida published by the Saw Palm Literary Journal of the University of South Florida.

<http://www.sawpalm.org/places-to-stand.html>



# ***SPECIAL TO THE TIMES***

## **WE ARE LEAVING OLDER ADULTS OUT OF THE DIGITAL WORLD**

Jessica Fields, Tech Crunch 2019

May is national Older Americans Month, and this year's theme is *Connect, Create, Contribute*. One area in particular threatens to prevent older adults from making those connections: the digital divide. Nationally, one-third of adults ages 65 and older say they've never used the internet, and half don't have internet access at home. Of those who do use the internet, nearly half say they need someone else's help to set up or use a

new digital device. Even in San Francisco – the home of technology giants like Twitter, Facebook, and Google – 40% of older adults do not have basic digital literacy skills, and of those, more than half do not use the internet at all.

Mastering digital technology has become a key component of what it means to fully participate in society. If we do not provide technology access and training to older adults, we shut them out from society, worsening an already worrisome trend of isolation and loneliness among the elderly.

As a researcher working directly with isolated older adults to provide low-

cost internet, tablets, and digital training through the Tech Allies program, led by the non-profit Little Brothers Friends of the Elderly, I regularly hear this sentiment from seniors.

I visit Tech Allies participants – whose ages range from 62 to 98 – both before and after their eight weeks of one-on-one technology training. We talk about their experiences with and perspectives on technology today. In reflecting on why he and other older adults would want to learn to use the internet, one elder told me, “We feel like we’re standing outside a building that we have no access to.”

Another woman shared that because she doesn't have internet access or know how to use technology, she feels, “I’m just not part of this world anymore. In certain facets of society, I just can’t join.... Some [things] just are not possible if you are not in the flow of the internet.”

In contrast to concerns about technology use increasing isolation among younger populations, the communication and connection possible online can be especially valuable for older adults who are

homebound, live far away from family, or have lost the loved ones they relied on for social support in their younger years. Elders can use online tools to connect with friends and family via messaging platforms, video chat, and social media even if they can no longer physically visit them.

Older adults can find online support groups for people who share their medical conditions. And they can engage with the outside world through news, blogs, streaming platforms, and email, even if they are no longer able to move about as easily as they once could. As one elder told me, “I can’t really move that easily without a caretaker and I only have her a few hours a day so [the tablet] ... has been a great companion for me and it gets me connected with other people.”

For older adults in particular, the risks associated with social isolation are profound. Loneliness among older adults has been associated with depression, cardiovascular disease, functional decline, and death. Technology can serve as an important tool to help reduce these risks, but only if we provide older adults with the skills they need to access our digital world.

But we can close this gap. Our research shows that Tech Allies measurably improves older adults’ use of technology and confidence in key

digital skills. Programs like this, which embed technology training in existing

community-based organizations, should be expanded, with increased funding prioritized at local, state, and federal levels and with greater involvement of technology companies and investors. If we spent even a fraction of the \$8 billion invested in digital health companies alone last year on tailoring these tools for older adults, we could drastically expand usability, training, and access to broadband and devices.

Support from technology companies could take many forms. Beyond expanding device donation programs, technology companies should design devices specifically for older adults (when your hand is shaky, swiping can be tough...) and should have tech support call lines tailored to older adults less familiar with the internet (cache and cookies and clouds, oh my!).

Furthermore, broadband providers like Comcast and AT&T should streamline the enrollment process for their affordable internet programs and expand eligibility. Partnerships between service providers and community-based organizations focused on older adults will be key in ensuring that these efforts actually meet the needs of older adults.

To be sure, many older adults also express a lack of interest in technology. For some, this reflects a true lack of desire to use digital tools. But for others it reflects an underlying fear of

technology and lack of skills. Appropriate training can help to quell those fears and generate interest. In particular, great care must be paid to online safety training. Older adults are more likely to fall victim to online scams, putting their personal information at risk, but with tailored digital literacy training, they can learn to navigate the internet safely and securely.

The importance of digital inclusion is not going to disappear with the generational changes of the coming

decades. Technology is continuously evolving, and with each new digital innovation come challenges for even younger adults to adapt.

With greater investment in providing accessible devices, broadband, and digital training, technology has the potential to become a powerful tool for reducing loneliness among older adults, empowering them to connect, create, and contribute online. As one elder put it, “It’s time to catch up, you know, and join the world.”

## 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.

# WHEN PHONE SCAMMERS TURN TO THREATS

**Fraudsters increasingly use fear tactics to con victims**

by Doug Shadel, AARP 2019

There's a wonderfully funny scene in the 2010 kids' movie *Megamind*—the main character is asked what the difference is between a villain and a super-villain. The one-word answer: "Presentation!"

It's also a fairly accurate response. How a scammer makes a pitch can be as important to its success or failure as the pitch itself. At one time the preferred path to illicit riches seemed to be sweetness: Be friendly, reassuring, likable. When you win over the trust of a target, you're best poised to get that person to send money.

But that's changed as of late. Many of today's hottest phone frauds are based on fear, with the swindler quickly trying to frighten, even terrify, the target into taking action. Why are negative emotions increasingly the preferred approach?

To answer that, I called Roy Baumeister, a renowned social psychologist now teaching in Australia. I chose him because an article he cowrote several years ago, "Bad Is Stronger Than Good," has long

stuck in my brain. Turns out, he has just coauthored a book, *The Power of Bad*, on the same theme.

"The mind is hardwired to react more strongly to negative than to positive things," Baumeister told me. "Remember, human society has existed for about 150,000 years, and for 140,000 years, people lived as nomadic hunters and gatherers."

In such a world, he explained, survival depended on giving your immediate attention to threats. These evolutionary impulses are still with us. And con artists know that.

"When a scammer calls to inform you that there is a crisis or major problem, your mind automatically goes into high gear, seeking a solution," Baumeister said. "So, when this person tells you the problem can be solved with one or two easy steps, that sweeps you along."

Does fear also help close the deal? According to Baumeister, making decisions under the influence of "high-energy negative emotions" such as anxiety, anger or embarrassment can lead to judgment mistakes. "Some of my laboratory work found that these

emotions caused people to take foolish chances. They failed to consider the downside risks.”

So, what's the best way to avoid falling prey to such tactics?

"In our studies, pausing just to make a list of pros and cons of each option — even if this took only a minute — greatly reduced the rate of bad decisions,” he said. “Pay attention to the downside risk. What could go wrong? That can quickly bring you to your senses.” Good advice for us all.

### **Scams Based on Fear**

Examples of frightening scams frequently reported to the AARP Fraud Watch Network these days:

#### **1. The Fake Utility Company**

You're behind on your bill, and you'll lose power if you don't provide cash now.

#### **2. The Social Security Impostor**

Your SSN has been used in crimes, and you're going to be arrested unless ...

#### **3. The Dreaded Computer Virus**

You're about to lose all your info and photos, and only we can fix the problem.

#### **4. DNA Cancer Screening**

People like you have died because they didn't take the DNA test we're offering.

#### **5. Missed Jury Duty Scam**

There's a warrant for your arrest because you didn't show up for your jury duty assignment

#### **6. The IRS Warrant**

You made criminal mistakes in your past tax filings and will be arrested shortly.

## **AGING PARENTS PRESENT CHALLENGES FOR CHILDREN**

From USA Today 2021

Most of us come into the world viewing our parents as healthy, strong and everlasting. As we grow, and as they age, the naive feeling that they are a perpetual part of our lives fades. Their hearing weakens, their gait slows, their

memories dim, and for adult children the experience can provoke feelings of anger, anxiety, fear and frustration.

"Many people struggle as they witness age-related decline in their parents’

functioning," said Laura Carstensen, a psychology professor at Stanford University and the director of its Center on Longevity. "Cultural scripts that greatly value agency and autonomy equate vulnerability with failure. Pushing that message to its extreme, we all fail at some point."

It's a stressful transition, experts say, when adult children begin to see their parents less as capable caregivers and more as those needing care themselves. Children begin to wonder how quickly a decline will accelerate, how financially sound their parents are, what their future living situation will be. The shifting roles between child and parent can challenge family dynamics, made more complicated by negative stereotypes about aging, which contribute to the feeling that growing older is something people must resist or deny.

"It's a strange shift from when they were responsible for you. Now you might be responsible for them, and they're not listening to your orders the way an 8-year-old would," said Alan Castel, principal investigator at UCLA's Memory & Lifespan Cognition Lab and author of "Better with Age: The Psychology of Successful Aging."

### **A desire to deny the decline**

There is a subtle grief children experience as their aging parents begin

to lose functioning. Children may want to deny their parents' decline, which experts say can be amplified by a culture that suggests aging should be fought or hidden. Hair dye and wrinkle cream are embraced while hearing aids and walkers are shunned.

Negative stereotypes about aging can complicate the dynamic between adult children who see their parents in need of help and the parents who are apt to reject anything that identifies them as older or more vulnerable.

"When you think of an older adult, you think of maybe wise or kind, but explicitly and implicitly we also see older people as smelly, slow, bad drivers, stubborn or crotchety," Castel said.

### **Challenges of the 'sandwich generation'**

The natural and normal stresses of grappling with an aging parent are made all the more difficult by competing caregiving demands. Nearly half of adults in their 40s and 50s have a parent 65 or older and are either raising a young child or financially supporting a child 18 or older, according to the Pew Research Center. About 1 in 7 is financially supporting both an aging parent and a child.

Among all adults with at least one parent age 65 or older, 30% say their parents need some help caring for

themselves. The same figure holds true for emotional support.

These adults are part of what experts call the "sandwich generation," those who are simultaneously caring for their own children as well as for aging parents. The relentless financial and emotional stress of both can take a toll and lead to what Castel calls "caregiver stress," especially when the aging parent doesn't want the care.

**That feeling you can't name?:**It's called emotional exhaustion.

"There's so much frustration in wanting to respect a parent, but also help," he said.

### **Communicate, pick battles and seek support**

When a parent's health is deteriorating, good communication can make the transition easier.

"It's thinking about how to communicate things effectively without being condescending," Castel said. "Sometimes it's saying, 'I love you and I'm doing this because it can make your life better in some ways. I know it doesn't feel comfortable.'"

Castel suggests asking older parents questions such as, "Do you like it when I do this?" or "Do you know why I'm doing this?"

An older parent may say, "I hate it when you keep telling me to wear a hearing aid." But the child can reply with, "Well, I feel like I have to repeat things or you sometimes miss things. I'm happy to repeat things if it's important, but it causes me some frustration."

Children need to pick their battles. If a parent's hearing is decreasing, but they can still participate in a conversation, maybe don't push the hearing aid. If memory is declining, but no one is getting lost coming home, continuing to observe may be a good strategy.

Children can be clear with their parents that they may not be able to do as many things as they used to do, while also assuring their parents they will do their best to help them participate in activities most meaningful to them.

Children can also help navigate the transition by seeking out support, whether from siblings or from caregiver support groups.

### **'Accepting aging and mortality can be liberating'**

Aging is normal, even if our culture suggests otherwise. Experts say it's important for people to accept the process, and to acknowledge there are things that get better with age. Older people may be more emotionally intelligent, more judicious, and more

deliberate in ways that serve them well.

"The reality is that virtually all people will encounter physical problems as they age," Carstensen said. "The issue is less about avoiding the inevitable and more about living satisfying lives with limitations. Accepting aging and mortality can be liberating." Acceptance can be the goal, though

watching a parent age can be challenging not only because of what's happening to the parent but also because of what the child knows will happen to them, too. "It scares us," Castel said. "We think, 'That could be me one day. And in fact, if everything goes well, that will be me one day.' One thing to say to yourself is, 'How do I want my child to treat me?'"

## TO SAVE YOUR BRAIN, FILL YOUR CALENDAR

**Study from Mayo Clinic shows doing more activities may offer greater cognitive protection**

by Kimberly Goad, [AARP](#), 2019

If your doctor wrote out a prescription for your brain — one designed to guard against the kind of cognitive decline that makes you forget your best friend's name — it could look something like this: "Read books, play games, spend time on the computer, engage in social activities, take on a crafts project. Do a mix of these activities three to five days a week." Or so found a new study published in *Neurology*.

Researchers at Mayo Clinic asked 2,000 cognitively unimpaired adults who were 70 and older to try one or more of the activities above and keep a

daily record. After five years, they discovered that while the risk of mild cognitive impairment (MCI) was reduced in those who took on a single activity, those who took on more than one cut their risk at a significantly higher rate.

"It's not just about engaging in an activity, it's about mixing it up with two or more," says study co-author Yonas Geda, M.D., a professor of psychiatry and neurology at Mayo Clinic. "Two activities are better than one, three are better than two, and four are better than three."

While researchers say the message is that, yes, more is more in this case,

there were slight variations in results according to the activities pursued. Using a computer, for instance, was associated with a decreased risk of MCI regardless of when participants got in the habit. As for crafts, those only seemed to reduce the risk of MCI when carried out late in life. Overall, gains were the greatest after the first year of taking on such new habits and practices.

As for why taking on a variety of such activities rather than just one is

especially beneficial? Experts say the answer could lie in how such a combination requires you to tap multiple areas of the brain, giving it what amounts to a more rigorous workout.

"In terms of higher function, we divide the brain into five domains: language, attention, memory, sense of direction, and emotional behavior regulation. The more domains you bring into the picture, the better it is for the brain," says Geda. "When you combine these activities, you have a well-coordinated symphony."

And a healthier one, at that. People with MCI have a four-fold increased risk of developing dementia or Alzheimer's compared to cognitively healthy adults. Unlike people who experience the kind of regular

cognitive decline that happens with normal aging, people with MCI show more significant signs of forgetfulness and judgment.

"Take, for example, making a medical decision," says Namrata Das, M.D., a researcher at the University of Texas at Dallas' Center for BrainHealth. "Healthy agers might forget some details, but they can still retain enough information to make an informed decision. Whereas people with MCI are overwhelmed with the information provided and may ask the doctor a lot of questions. And people with Alzheimer's can't follow any instructions and the decision is left to the caregivers."

To work more potentially brain-saving activities into your own day, pencil them on your calendar to boost the likelihood you'll follow through. Doubling up on healthy habits is OK, too. If you're looking for ways to spend less time alone and make a dent in your reading list, join a book club at your local library. If you need to walk for your overall health, enlist a friend and count the hour as your "social" brain booster.

"Try to learn something interesting every day," suggests Das, who notes that along with challenging your brain, "nutrition, physical exercise and sleep also promote brain health."



# DON'T FALL FOR THIS TELEPHONE SCAM

By Allen Kim, CNN 2019

Pieter Gunst, 34, received what he thought was a credible phone call from his bank. But in a matter of minutes, Gunst realized the call was anything but after he had nearly handed over the keys to his account.

The woman was a scammer, and Gunst was just the latest target in a growing trend that's left thousands of Americans frustrated, broke, and without a clue how to get their money back.

## **The over-the-phone scheme is a type of phishing scam.**

And in the last year, a whopping 26,379 people reported being a victim of some sort of phishing scam. Together they reported nearly \$50 million in losses, according to the FBI's 2018 Internet Crime Report.

While the number of reported scams increased slightly from the 25,344 phishing scams reported to the FBI in 2017, the losses skyrocketed by nearly \$20 million.

They are not going away anytime soon, as scammers are getting more clever and devious in their phishing attempts. Here's how you can avoid being the next person to fall for one.

## **How it works**

Gunst ignored the first call from the scammer -- he didn't recognize the number. But the same number called him again, and as a business owner accustomed to unknown numbers, he decided to pick up.

Gunst says the woman on the other end claimed she worked with the bank, and someone had attempted to use his card in Miami. Gunst, who lives in San Francisco, told the caller it wasn't him.

Oooof. Was just subjected to the most credible phishing attempt I've experienced to date. Here were the steps:1) "Hi, this is your bank. There was an attempt to use your card in Miami, Florida. Was this you?" Me: no.

Still, having received legitimate calls from his bank regarding attempted fraud in the past, Gunst still did not suspect anything unusual.

## **Then it got weird.**

After confirming that he did not use his card in Miami, Gunst says the caller told him that the transaction had been blocked, and then asked him for his member number.

Gunst then received a legitimate verification pin from the bank's regular number via text, which he promptly

read back to the caller -- not realizing that it was a password reset code.

The person on the line -- a scammer -- was in. She could access his account and began to read off recent transactions that Gunst had actually made, lending a bit more credibility to the call.

Then came the next question, which immediately set off a red flag: "We now want to block the pin on your account, so you get a fraud alert when it is used again. What is your pin?"

Gunst hung up. That's a number no bank would ever ask for. He quickly called the fraud department at his bank, and began to rethink how the call went awry.

"The problem is the text should say what its purpose is," Gunst later explained to CNN of the verification pin, which he tweeted about in a widely-read thread. "'Someone is trying to reset your password. Don't give this number to everyone.' But it didn't. It was just a generic pin." He said that was a lesson for the bank to learn from.

Hackers may use what's known as social engineering to try and obtain or compromise information about you, which could then be used to gain access to something such as your bank account.

What that means is simple: they tricked you, or someone who knows you, to compromise your account.

CNN reporter Donie O'Sullivan recently agreed to allow Rachel Tobac, a cybersecurity executive and hacker who specializes in social engineering, to hack him as a means to show how a scam can work. She was able to get his home address, phone number, have his hotel points transferred over to her and even change his seat on an upcoming flight.

And she was able to do this largely by using information that he posted online on social media: an Instagram check-in at a hotel and a tweet about a piece of furniture.

How? Both the hotel and the furniture company handed his personal details to the hacker over the phone.

### **It's not always your fault**

Companies that don't have the proper security procedures in place can often leave themselves and their customers vulnerable to a social engineering attack.

A small company could easily be tricked into giving up personal customer information over the phone if a clever hacker has just enough information to seem credible.

Small banks and companies have been known to put out member newsletters or even hold member appreciation

events where it's posted on social media and people are invited to accept or decline the invitation, according to Ron Schlecht, managing partner of security firm BTB Security.

A savvy hacker could've used that information to find members of that bank and use social engineering to find information such as their home addresses and phone numbers in order to phish them.

"It's unclear at this point where this happened, but there's no doubt in my mind that they knew that I was a customer of that bank and they thoroughly understood the security procedures of that bank," Gunst says. "It was rather targeted."

While it's possible that Gunst's bank was compromised, Schlecht says that "it's more likely that they disclosed information without really knowing it was bad to do so."

### **Spotting the scam**

There are a number of clues out there that should raise your suspicions.

"If you've been randomly selected for a big prize, vacation, or to enjoy great savings or if all of a sudden the IRS, Medicare, or Social Security Administration needs to get a hold of you for a warrant or penalty, take a deep breath and consider the legitimacy of the call," Schlecht said.

He offered a simple rule: "Very broadly, if something seems too good to be true or too bad to be true, it probably is. Chances are that you haven't entered into a drawing, specifically sought out services, or even have an idea that you've done some misdeed."

Phishing scams are common, but particularly clever phishing attempts can deceive even those who are aware of them.

In the moment, with the scammer on the other end putting pressure on you to verify or give up information, it's easy to make a mistake or overlook a detail or clue that may hint at a scam.

Knowing the procedures your bank or institution takes with fraud attempts can be helpful in spotting a scam, but it's not foolproof. Gunst has received multiple calls from his bank for real fraud attempts in the past, and he says that the scammer stuck to the pattern very closely. He said it was a "very clever trick."

"When I read that thread now, that's one red flag after another," Gunst says. "But it's hard to express the social engineering component of it. My guard wasn't up in the way it should've been."

The FBI warned of scammers spoofing legitimate FBI phone numbers in August, so it's clear that you truly can't trust any inbound call no matter what the caller ID says. Your best bet at

staying safe would be to hang up and call the phone number your bank or institution has listed. "Zero trust always wins," Schlecht said. "You

can't verify that they are who they say they are, so call them after the notification instead of interacting with an inbound call."

## **IS YOUR LIFESTYLE TOO SEDENTARY? 8 SIGNS YOU'RE NOT MOVING ENOUGH, AND HOW TO GET MOVING**

You might be getting a little too cozy on the couch.

By Rozalynn S. Frazier  
Real Simple 2021

Did you know one in four adults don't meet the global recommended levels of physical activity? That's unfortunate, considering that a sedentary lifestyle—defined by a Sedentary Behavior Research Network's (SBRN) report as any waking behavior characterized by an energy expenditure less than 1.5 metabolic equivalents, while in a sitting, reclining, or lying posture—is linked to an "increased risk of adverse health outcomes, including weight gain and obesity, cardiovascular disease, type 2 diabetes, metabolic syndrome, and increased risk of all-cause mortality," says Jessica Matthews, DBH, a national board-certified health and wellness coach and assistant professor of kinesiology and integrative wellness at Point Loma Nazarene University. Put in layman's terms, a sedentary lifestyle is marked by a deficiency of physical activity

with long, uninterrupted periods of time or significant portions of the day spent sitting or lying down.

Simply put: Our bodies were not made to be stationary for long periods. "Historically, if a person was sitting or lying down for hours when not asleep, they would have starved or gotten eaten by something," says Aimee Layton, PhD, an exercise physiologist from Columbia University and a Peloton Health & Wellness Advisory Council member. Nowadays, something is still going to get you—but "that something becomes disease and premature aging." And it doesn't take long for sedentary tendencies to wreak havoc on your health. In fact, research shows it can take just two weeks of inactivity (in young, healthy people) to cause some pretty significant health effects, including

reduced muscle mass and metabolic changes.

### **How Long Is Too Long to Sit Still?**

The general recommendation is to reduce prolonged sedentary behavior to no more than 60 minutes, Matthews says. To keep up, she suggests focusing on greater frequency of movement throughout the entire day.

“At the end of every hour aim for three to six minutes of movement,” adds Joe Holder, a Nike Master Trainer and health and wellness consultant. “Set an alarm and just stand up, walk around. Do some sit-to-stands from your chair.” These “exercise snacks,” as Holder calls them, break up prolonged periods of sitting and get your blood flowing. “I can't really speak enough about the need for you to let your body do what it was made to do: not sit,” he says.

Still not sure if your habits are too sedentary? Here are some major signs you're not moving enough for lifelong mental and physical health, and that it's time to boost your physical activity.

### **Signs You're Not Moving Enough**

#### **1. You fall short of global health recommendations.**

One way is to consider the World Health Organization's new guidelines, which advise either 150 to 300 minutes of moderate-intensity aerobic activity

per week *or* 75 to 150 minutes of vigorous-intensity aerobic activity per week, plus two days of strength training. If you're not hitting either of those suggestions, you're likely not moving enough.

#### **2. You spend more than half your waking hours not moving.**

Another helpful strategy: “Count the number of hours you sleep, and then subtract that from 24 hours. That number is the number of hours in the day you have to live, to move, to be active, and to be engaged. If you spend more than 50 percent of that time sitting, reclining, and not moving, it's important to find ways to change this,” says Suzanne Steinbaum, MD, a preventive cardiologist, founder of SRSHeart Center for Women's Prevention, Health and Wellness, and a Peloton Health & Wellness Advisory Council member.

#### **3. You feel fatigued all the time.**

It's true, fatigue comes from many things—stress, a poor diet, hormone imbalances—but being sedentary also plays a role in extreme tiredness. The more you sit around, the more wiped out you're going to feel. That's because the body—heart, lungs, muscles—is being “deconditioned”, which can happen in as little as a couple of days.

The good news: Research shows that moving can put the spring back in your step. One study that looked at the effect of exercise on folks who

reported persistent levels of fatigue found that both those who engaged in 20 minutes of either low- or medium-intensity exercise three times a week for six weeks experienced a 20 percent boost in energy levels. And while both groups also reported a reduction in feelings of fatigue, the low-intensity group experienced a much higher drop. Translation: You don't have to go hard to reap the benefits.

#### **4.You notice changes in your weight and metabolism.**

To keep your weight from fluctuating in an unhealthy way, you have to burn the same number of calories that you take in. But when you're too sedentary, your calorie intake stays the same while your energy expenditure plummets, and those excess calories get stored as fat. In the same vein, being sedentary also affects your metabolism—the body's process for converting food into energy. A slower metabolism means you're burning fewer calories at rest. "There is less blood flow and less metabolism," Layton says. "Long term, that leads to diabetes, heart attacks, stroke, and other diseases."

#### **5.You often feel winded.**

"The heart thrives on good oxygen flow," says Sanul Corrielus, MD, FAAC, a board-certified cardiologist and owner of Corrielus Cardiology in Philadelphia. As we sink deeper into the couch, Dr. Corrielus explains, "our

breathing gets shallow which depletes the heart of good streams of oxygen supply and contributes to the deconditioning of the heart." Minimal movement can also make you feel winded faster as well as experience palpitations, which "can lead to further deterioration of the heart function if not addressed effectively."

The more stagnant a person, the greater risk of mortality and heart disease, Dr. Steinbaum says, pointing to one data analysis from the European Prospective Investigation into Cancer and Nutrition (EPIC) Norfolk study, which found that each additional hour spent per day watching television during leisure time came with an increased risk of cardiovascular disease. Plus, sitting at least 10 hours a day, compared to sitting for less than five, was associated with a higher risk of heart attacks. "Without movement and exercise, we have an increase in the sympathetic nervous system," she says. "Sympathetic overdrive leads to an increase in stress hormones and inflammatory markers, leading to an increase in cardiovascular disease."

As you get older, it takes longer to recover from a sedentary state. That said, to recondition the heart, Dr. Corrielus says it will take about 8 to 10 weeks of consistent workouts. "Even if it's just walking for 10 minutes every other day, the key is to start and be consistent," he says, Your goal: Work up to doing 30 minutes of moderate-

intensity exercise five days a week. “Even a light-intensity movement for one to five minutes every hour can make a significant impact,” Dr. Steinbaum of moderate intensity exercise. Need a little push to get you started? JAMA Cardiology reveals that just one session is enough to offer two to three hours of protection against damage to the heart.

### **6.You miss out on quality Zzs.**

Sleep is precious. Not getting an adequate amount—the recommended seven to nine hours—can lead to metabolism issues, weaken your immune system, up your risk of an early death, and more. And the longer you’re inactive, the more your sleep will suffer. For example, if you spend more than 11 hours a day in chill mode (we’ve all binged-watched an entire season, let’s be honest) it can lead to both reduced sleep quality and sleep quantity. A meta-analysis also found that excessive sedentary habits ups the possibility of insomnia. Rest assured, you’ll be able to sleep more soundly if you nail the recommended national activity guidelines. Research reveals those who did were 95 percent less likely to feel overly sleepy throughout the day.

### **7.Your mental health has taken a downturn.**

“Studies have also shown that those people who are more sedentary have a decrease in psychological well-being and quality of life,” says Dr.

Steinbaum, noting that these people also tend to be more depressed. She also explains that exercise is associated with the release of serotonin. “These ‘feel good’ hormones are what makes the ‘runner’s high’ that drives people to crave exercise and be committed to their exercise plans,” she says.

Becoming aware of your underactive tendencies and choosing to be active can help put your mind and mood in a better position—and mindfulness can play a crucial role. “Mindfulness can strengthen our ability to combat stress and anxiety,” says Matt West, a psychologist and co-founder of the Boom Journal, a mindful journaling app. West strongly believes that the habit of moving mindfully is extremely beneficial to optimizing the relationship between fitness and mental health. Research backs this up. In Psychology of Sport and Exercise, students who were either mindful or moving experienced a bump in mood and a decline in stress. When the habits were combined, the effects were bolstered even more.

### **8.Your memory is faltering.**

Typically, when we think of being sedentary, our minds zero in on physical side effects like muscle weakness, heart issues, and overall risk for diseases like cancer. But our brains need exercise just as much as our bodies do. According to a PLOS One study, hours spent sitting leads to less

thickness in the medial temporal lobe, an area of the brain responsible for memory—which might explain why you’ve been forgetful if you’ve also been idle. But, a dose of aerobic fitness, like treadmill walking, can not only boost this area, but also help with age-related cognitive issues such as dementia.

Remember, “even small increases in physical activity offer positive benefits in terms of improved health and well-being,” Matthews says. Start small and stick to it, because when “implemented consistently, over time they lead to big results.”

## **Now, let’s get moving, shall we?**

### **Here are Ways to Start a Fitness Routine You Can Stick With.**

Getting fit is all about moving your body. And it's not just about how much movement and what type of movement you do—it's also about how intensely you do that movement. Exercise and physical activity is generally categorized into three different types of intensity: low, moderate, and high (sometimes called "vigorous"). But it can be tricky to understand exactly what type of activity falls into which intensity bucket.

For example, the World Health Organization (WHO) recently released its 2020 guidelines on physical activity and sedentary behavior, which recommends 150 to 300 minutes of moderate-intensity exercise per week (that's about 21 to 43 minutes per day) or 75 to 150 minutes of vigorous-intensity aerobic exercise per week for able-bodied adults. But how do you know for sure that your movement of choice really is vigorous enough? Is your level of aerobic activity *too* vigorous? Is high-intensity always best, or will a good low-impact walk get the job done? Do the same guidelines apply to both beginners and fitness buffs? So many questions.

Knowing what each exercise intensity means and learning how to structure your fitness routine accordingly will help you get most from the exercise you do. We asked health and fitness experts to break them down, explain why they matter, and share how to apply them to your daily life.

### **1. An Overview of Exercise Intensity**

Intensity correlates with how hard you’re working—or really, how hard your heart is working—when you exercise. The three levels progress from easiest to hardest, and there are two ways to measure them, either the “talk test” or by measuring heart rate. The talk test is probably the easiest way to measure intensity, since you only need to figure out how easy or



hard it is to talk during whatever activity you're doing. With low intensity, you're moving, but you're still able to be conversational, says William Smith, MS, NSCA-CSCS, author of *Exercises for Cardiac Recovery*. When you move into moderate-intensity activity, while you shouldn't be totally out of breath, you won't be able to hold a conversation as easily. Your sentences may be slightly broken up with intermittent, yet manageable, heavier breathing. If you're moving with high or vigorous intensity, you won't be able to carry on a conversation at all (nor will you want to).

Exercise intensity can also be determined more technically by heart rate: how frequently your heart is pumping in the span of a minute (aka beats per minute). Heart rate monitors make measuring your resting and working heart rate a simple task (smartwatches like the Apple Watch often have this handy function). If you don't have a monitor, however, you can do some old-school counting. Just find your pulse on your wrist or neck and count the number beats for 10 seconds; then multiply that number by six for beats per minute.

## **2. Understanding Maximum Heart Rate and Workout Intensity**

Knowing all this, the next step is to calculate your maximum heart rate (MHR): the highest point of intensity that you should be achieving during

exercise. "Exercise intensity is calculated as a percentage of your maximum heart rate during physical activity," says Ben Walker, a personal trainer and owner of Anywhere Fitness in Dublin, Ireland. "The higher the percentage, the harder your body is working."

To determine what your body's maximum heart rate should be, subtract your age from 220.

For instance, if you're 40 years old, your estimated MHR would be about 180 beats per minute. Now, once you know your personal MHR, you can use it to measure how many beats *you* should be striving for during activities, depending on their intensity. Here's a breakdown:

Low intensity is calculated as working at about 30 to 50 percent of your MHR. Multiply your MHR by .30 and then .50 to determine your heart rate range, Walker says.

Sticking with the example above, if you're 40 years old with an estimated MHR of about 180 beats per minute, multiply 180 by .30 (=54) and then .50 (=90). The result? A hypothetical,

healthy 40-year-old's heart rate should remain roughly between 54 and 90 beats per minute when engaging in low-intensity exercise. Low-exertion aerobic activity can often involve moving repetitively at a slower, steadier pace: casual walking (where

you can still hold a conversation), light yoga, biking at low-resistance, or leisurely swimming laps. You're moving, but you're not huffing and puffing.

With moderate-intensity aerobic movement, your heart will work a bit harder—though not at max capacity—at roughly 50 to 70 percent of your MHR. Common activities include brisk walking or hiking, aerobic dancing, doubles tennis, cycling (slower than 10 miles per hour, according to the American Heart Association), and even vigorous yard- or housework.

Finally, high intensity means you're training at 75 to 100 percent of your MHR (the average 40-year-old's heart should be pumping at 135 to 180 beats per minute). This vigorous type of movement often involves short, quick-burst exercises where you're fast off the mark, Walker says. You should be working hard, breathing rapidly and heavily, getting sweaty, and unable to sustain a conversation. You might, for instance, be jumping rope, running the stairs, doing a HIIT (high-intensity interval training) workout, playing singles tennis, running, or cycling 10 miles per hour or faster.

### **3. Benefits of Each Intensity Level**

Each exercise intensity affects the body differently. While they all have benefits, how much you do of each one

will largely depend on your current fitness level and goals.

Beginners should start with low intensity, which is beneficial not only for fitness novices, but also seasoned athletes. Think of low-intensity exercise as building the groundwork for more intense exercise. "Low-intensity exercise reduces the risk of injury while preparing your body for more intense activities," Walker says, adding that it primarily burns fat cells as a fuel resource. It also builds your stamina, which you'll need as you progress in your fitness program since it activates the aerobic system. It's also crucial for sports-specific athletes. "If you're training for any sport that requires a lot of movement for longer spells, you'll need to train aerobically to handle this required level of fitness."

When you shift into moderate-intensity exercise, your body begins using fat, carbohydrates, and sugar as fuel sources. "Burning calories from all of these sources help achieve quicker weight loss results," Walker says. More moderate-level activity is needed to achieve more health benefits (the higher the intensity, the less time is needed to reap those exercise rewards).

As soon as you move into high-intensity exercise, though, you're exercising to your full potential. Not only does this stimulate the best response in your body for fat loss and muscle gains, it also boosts your

metabolism for hours after your workout. “By training at maximum capacity, you increase potential for muscle growth and weight loss by breaking down more muscle fibers,” says Walker, adding that it’s a fantastic way to maintain lean muscle mass and improve body composition.

#### **4.Applying It to Your Fitness Routine**

So how do you know what intensity you should hit during exercise? While it will depend on your health, current fitness level, and personal goals, some guidelines can help. (Note: Definitely talk to your doctor if you have any questions or concerns about the right intensity for you and your health.)

According to the 2018 Physical Activity Guidelines for Americans, and echoing WHO global guidelines, adults should get at least 150 to 300 minutes of moderate-intensity activity, 75 to 150 minutes of vigorous-intensity exercise, or a combination of each every week. (Guidelines also suggest that you do muscle-strengthening activities at least two days a week.) Even the American Heart Association and American College of Cardiology have exercise prescriptions, namely recommending 30 minutes of moderate-intensity exercise five to seven days a week, says Waqar Khan, MD, a board-certified interventional cardiologist in

Houston, Texas and author of Be Heart Smart.

Of course, if you’re just beginning an exercise program, always start with low-intensity exercise and progress gradually, Walker says. This also applies if you’re recovering from an injury or health issue like a heart attack, Dr. Khan adds.

Once you get past this point, your personal goals will largely dictate your exercise program and how intense your workouts are. If you’re hoping to achieve optimal health, follow the above guidelines. If, however, you have sport-specific goals, you may need something different.

The one caveat? While high-intensity exercise can be good for the body, your heart included, you don’t want to overdo it. Extreme aerobic exertion is taxing on the body, which also needs time to recover from it. Walker suggests doing no more than three high-intensity workouts each week, spaced a day apart.

On the flip side, unfortunately, long hours of low-intensity exercise won’t add up to the same benefits as vigorous-intensity activity (or even moderate). The two intensity levels stimulate different reactions in the body, Walker says, and if you do excessive amounts of low-intensity exercise, while you may improve your cardiovascular health, you risk depleting your muscle tissue. The

most important takeaway though is *not* to get so hung up on the numbers—get up and move regularly, however you can. Intensity aside, all movement matters.

There is no shortage of scientific research to tell you that a sedentary lifestyle—one that involves little to no physical activity—is detrimental to everything from our mental wellbeing to physical health to overall longevity. In fact, besides endowing you with all kinds of immediate aches and pains, sedentary behaviors and physical inactivity are some of the leading factors around the world for cardiovascular disease and all-cause mortality. Even for people who are relatively active, prolonged periods spent sitting—whether from desk-bound work days or lazy weekends in front of the TV—can chip away at the benefits of their healthy choices.

But before you panic and start working your nine-to-five from the treadmill in the attic, there's good news. It is possible to help counterbalance some of the health risks associated with sitting for hours (and hours) with a regular *and* attainable amount of movement. A massive meta-analysis published in the British Journal of Medicine seems to have found the daily exercise sweet spot required to offset the negative impact of 10 hours of sitting. According to the published research, **30 to 40 minutes of mild to**

**vigorous physical activity every day appears to reduce the association between sedentary time and risk of death.**

Scientists cross-analyzed nine prospective cohort studies from four different countries, which followed 44,370 men and women followed for four to 14 and a half years. They examined how different combinations of physical activity (measured by fitness trackers) and sedentary time affected their respective health and mortality risk. Overall, researchers found that “higher sedentary time is associated with higher mortality in less active individuals,” and “those in the lowest third of [mild-to-vigorous physical activity] had a greater risk of death in all combinations with sedentary time.”

The fitness recommendation above also aligns nicely with recent research suggesting that 35 minutes of exercise per day—either from higher-intensity cardio or lower-impact movement (yoga, stretching)—is the magic number to help stave off depression and seasonal affective disorder (SAD). The findings also coincide well with the World Health Organization's (WHO) newly released 2020 guidelines on physical activity and sedentary behavior, which recommends 150 to 300 minutes of moderate-intensity exercise per week (that's about 21 to 43 minutes per day) or 75 to 150 minutes of vigorous-

intensity aerobic exercise per week for able-bodied adults.

How you choose to move your body to reverse the health risks associated with sitting too much is up to you. Find activities you love that raise your heart rate and work up a good sweat, whether it's a formal fitness session or vigorous afternoon of gardening or playing with the kids. Take a brisk walk around the neighborhood, go for a bike ride, run up and down the

stairs in your apartment building, blast music and have a dance party in your bedroom, take a good old-fashioned hike. These are all fair game. On days when you can't squeeze in any sort of workout, at least make sure to stand up every 20 to 30 minutes to stretch your legs. If you can, take a lap around the kitchen island or do some super-quick squats between batches of emails. Or try these easy yoga stretches you can fit between Zoom calls.

## **SIMPLE WAYS TO MAKE HEALTHY LIFESTYLE CHOICES FOR BETTER LIVING**

To provide for a healthy lifestyle, some recommendations are fairly simple, such as exercising regularly and eating right. Many people, however, don't know how much exercise they should get or which foods are the best choices. They also may not realize there are other ways to take care of your body and mind to promote better overall health.

Start on the path to healthier living with these tips from the wellness experts at Walgreens.

### **Exercise regularly.**

The American Heart Association recommends at least 30 minutes of moderate-intensity activity at least five days a week, and that's because an active lifestyle can help you achieve far more than muscle mass

or weight loss. Regular exercise can also contribute to mental well-being, and even something as simple as a walking break or two at work can provide health benefits.

### **Eat well.**

The keys to a healthy diet are eating the right amount of calories for your activity level and eating a wide range of foods to ensure that you're receiving all the nutrients your body needs. By prioritizing great taste and ingredient guidelines, such as minimizing hydrogenated oils, trans fats and artificial ingredients, Walgreens Nice! products help take the guesswork out of making healthier choices. In an effort to simplify healthy living, the line's packaging, products and ingredient standards were updated, and

offerings now include organic and gluten-free options in addition to traditional baking goods and other general grocery items.

### **Get enough sleep.**

Sleep plays a vital role in good health and well-being, and can help improve your mental health, physical health and quality of life.

The National Sleep Foundation recommends 7-9 hours per night for adults and 9-11 hours for school-aged children. If you find sleep elusive, try implementing a bedtime routine to send signals to your body that it's time to sleep, avoid screen time immediately before lights out and eliminate caffeine after lunch.

### **Manage stress.**

Between juggling a career, family and other commitments, it's easy to find things to stress over. Practices such as meditation and yoga can help to better manage stress. Setting aside time for a favorite hobby can

also help relieve stress and focus on an activity you enjoy.

Aside from mental and emotional impacts, stress can also impact your physical health, so it's important to identify coping mechanisms that reduce overall stress.

### **Be social.**

Making time to socialize with friends and family is an important part of living a long and healthy life. Even if your schedule is packed, try to block out time at least once a week to spend with family and friends.

### **Break bad habits.**

Whatever their nature, work to break bad habits by first acknowledging the problem then working to replace the negativity with alternatives that make a more positive impact on your life. Even a negative attitude can bring you down.

# GETTING THE RECOMMENDED AMOUNT OF PHYSICAL ACTIVITY IS TIED TO LOWER RISK OF CANCER, STUDY SAYS

By Michael Nedelman, CNN 2019

A recent study sheds light on one potential health benefit of exercise: a lower risk of certain cancers.

The study, published in the Journal of Clinical Oncology in December 2019, analyzed data from more than 750,000 adults in the United States, Europe and Australia, and found that recommended amounts of physical activity correlated with lower risks of seven types of cancer, of the 15 types that researchers looked at.

These cancer types were colon, breast, kidney, myeloma, liver, non-Hodgkin lymphoma and endometrial.

A number of previous studies have come to similar conclusions about physical activity and cancer. In the latest analysis, the researchers dug deeper into the relationships between the amount of physical activity and how much lower the cancer risk became.

Recommended levels of physical activity showed what could be a range of potential benefits, from a 6-10% lower risk of breast cancer to an 18-27% lower risk of liver cancer.

With some cancers, most of that reduced risk was seen with the recommended amounts of physical activity. With other cancers, the study found that physical activity well above current recommendations may correlate with the lowest risk levels.

The authors say this "may reflect important differences in the underlying biologic mechanisms for distinct cancer types."

US health officials recommend that adults get at least 2½ hours of moderate-intensity aerobic exercise, 75 minutes of vigorous-intensity aerobic exercise, or a comparable combination of the two per week.

The authors note their data come from self-reported physical activity at just one point in time and that the majority of people included were white, which could limit how applicable their findings are more broadly.

When adjusting for body mass index, or BMI, the link between endometrial cancer and physical activity disappeared. However, this had a "limited effect" on other types of cancer, the authors said. In addition, a

significant association for non-Hodgkin lymphoma was seen only in women, and the same was true for colon cancer in men.

The researchers caution that the study doesn't definitively show that exercise directly causes cancer risk to drop. Health experts say there may be various other factors at play.

"There is substantial evidence that higher levels of physical activity are linked to lower risks of several cancers," explains the National Cancer Institute.

However, "people who are not physically active may differ from active people in ways other than their level of physical activity.

"These other differences, rather than the differences in physical activity, could explain their different cancer risk," according to the institute. "For example, if someone does not feel well, they may not exercise much, and sometimes people do not feel well because they have undiagnosed cancer."

A number of other factors have been linked to cancer risk, including smoking, diet and obesity." We know there are many factors that are associated with both obesity and cancer, such as lack of exercise and poor diet," MD Anderson Cancer Center's Dr. George Chang previously told CNN. "How much each of those factors contribute to cancer is less clear."

## THE FUTURE OF WEIGHT LOSS

**Recent research on 'good' fat, intermittent fasting and a new diet pill**

by Lisa Arbetter, AARP 2019

If the soaring numbers of expanding waistlines mean we need weight-loss strategies, like, yesterday, the plus side is that scientists are finally gaining a more nuanced understanding of why we put on pounds and how we might more easily shed them. Here are a few of the standout findings and breakthroughs from the past year —

and what they might mean to your own efforts to keep off the pounds.

**Weight creep may have metabolic causes**

Maintaining a healthy weight does get harder as you age, even if your diet and exercise regime remain the same. While you may have known this from



experience, it's only very recently that science has been able to back up this fact. The culprit in later-in-life weight creep, according to new research from Sweden's renowned medical center the Karolinska Institute, is the age-related slowdown in lipids (fats) removal and storage. The newly released 13-year study found that those who didn't compensate for this natural slowdown by eating fewer calories had about a 20 percent increase in body weight over the period studied. Prior research has shown that one key way to speed up the lipid turnover in fat tissue is exercise. Experts say this new research further supports that notion, which means that more cutting-edge science is telling you to hit the gym more often.

### **Intermittent fasting actually curbs hunger**

New science on intermittent fasting shows that this increasingly popular diet strategy works not by restricting food intake but by actually lowering appetite. Published in the journal *Obesity*, the study, from the Pennington Research Center, was heralded in science literature as the first to track how meal timing affects energy metabolism. But it also measured appetite-controlling hormones such as ghrelin, finding them lowered when participants stuck to a schedule that had them eating dinner around the time some might have just finished lunch.

What's at play, says internist Steven Heymsfield, director of Pennington Biomedical's metabolism-body composition department and president of the Obesity Society, is how eating earlier seems to better synch with our body clock. "There's circadian rhythms throughout the day. Certain physiological processes peak early in the day," he says. "The study found that when people ate on the [earlier] regimen, they had metabolic processes that were much more favorable to eat less and process nutrients better."

Researchers also found that eating between 8 a.m. and 2 p.m. — instead of between 8 a.m. and 8 p.m., as a control group did — may also help people burn more fat.

### **Brown fat holds big promise**

Not all fat is created equal. There's potentially problematic white fat, which is stored energy for later use, and then there's "good" brown fat, which really has scientists talking. "The reason brown fat is so exciting is that it's an organ whose principal role is to take calories and convert them into heat," says internist Aaron M. Cypess, an investigator at the National Institute of Diabetes and Digestive and Kidney Diseases. "If you activate brown fat in animals, it is extremely helpful for combating obesity."

Researchers are now focusing on how to activate this brown fat in humans

(there's been some success in doing so by exposing it to cold) and figuring out exactly how it does its calorie-burning magic. In a study released this year, researchers also discovered that brown fat does more than just create calorie-busting heat. Specifically, participants who had more brown fat, as measured by a PET scan, were better able to filter and remove branched-chain amino acids (BCAAs) from their blood than subjects with less activity. BCAAs, which are found in foods and in supplement form, are essential for good health, but having too many in the blood is linked to diabetes and obesity. Experts say they could prove a useful target for weight-loss strategies of the future.

Other research in this area focuses on turning white fat into beige fat (which has calorie-burning properties that are similar to brown fat). Building on earlier work that showed that resveratrol, a compound found in fruit and wine, could be used to shape-shift these fats, Shu Wang, an associate professor in the Texas Tech Department of Nutritional Sciences, focused on what had heretofore been the hitch: getting the resveratrol to its white-fat target. Her solution: a recently unveiled nanoparticle system that encloses the resveratrol and delivers it directly into the white fat cells, transforming them into beige.

The preliminary results of an animal study are promising: After five weeks

of targeted delivery of resveratrol, researchers saw a 40 percent reduction in subcutaneous fat, plus a 50 percent reduction in the visceral fat, the kind found inside the abdomen.

Since we have only a small amount of brown fat in our bodies, Heymsfield says he and others still need to pursue possible ways to boost it. "Could you transplant brown fat to a person? Or, could you give them a drug that would make brown fat proliferate? I think people are very interested in those questions, but that kind of research is still in a very early stage," he says.

### **A safer diet capsule may be coming**

In April, the U.S. Food and Drug Administration issued approval for Plenity, a stimulant-free way to decrease appetite for those with a BMI of 25 to 40, a range that includes people who aren't technically obese. Users take three capsules before lunch and one before dinner with water. Upon hitting the stomach, the capsules release thousands of particles made of things like plant-derived cellulose and citric acid. Those particles then rapidly absorb water, making you feel full. Unlike other approved appetite suppressants, Plenity isn't a drug that affects the brain, and it's technically classified by the FDA as a device. Its makers expect it to be available by prescription in 2020.

"So far that product has been relatively safe, but its effects on weight are fairly modest," says Heymsfield of

Pennington. In a double-blind placebo-controlled study funded by the drugmaker Gelesis, 59 percent of the patients who took Plenity achieved a weight loss of 5 percent; in a control group taking a placebo, 42 percent did so. But among patients with either

prediabetes or type 2 diabetes (that wasn't being treated with medications), those who took Plenity were six times as likely to have lost 10 percent or more of their body weight as those who took the placebo.

## **EXERCISE-INDUCED PROTEIN MAY REVERSE AGE-RELATED COGNITIVE DECLINE**

From National Institute on Aging 2020

Exercise and physical activity are important as you age. They help keep your body and brain healthy. Staying active can help you remain independent by preventing loss of physical mobility. It may also slow age-related cognitive decline.

Researchers don't know how exercise might slow age-related cognitive decline. A better understanding of this process could point toward ways to help those who have difficulty exercising due to fragility or health conditions.

In animals, exercise has been shown to reverse age-related decline in a brain area called the hippocampus. This region is important for learning, memory, and other cognitive functions. To determine what may underlie these potential rejuvenating effects of exercise on the brain, a research team led by Dr. Saul A. Villeda at the University of California, San Francisco compared proteins that circulate in the blood of mice who get

a lot of physical activity with those in sedentary mice. The work was funded by NIH's National Institute on Aging (NIA). Results were published on June 10, 2020 in *Science*.

Researchers compared the brains of young (3 months) and aged (18 months) mice that either had access to a running wheel in their cage for six weeks or were sedentary. They looked at age-related molecular and cellular changes in the hippocampus. Older mice that were active showed increased generation of new brain cells called neurons and higher levels of nerve cell growth factors than sedentary mice. They also made less errors in hippocampal-dependent learning and memory tasks.

The team then collected blood and plasma from both young (6 to 7 months) and aged mice (18 months) who were either active or sedentary. They injected their plasma into separate groups of older mice eight times over three weeks. The aged mice

that received blood from the active groups showed increases in new neurons and on learning and memory tasks similar to those of the active mice themselves.

Many proteins were found at higher levels in the blood of the active mice. The researchers honed in on one made in the liver, called GPLD1. Researchers injected the gene for the protein into aged mice, causing their livers to produce GPLD1. After three weeks, the animals showed brain cell growth and improvements in learning and memory similar to that seen in active mice.

GPLD1 did not appear to enter the brain, suggesting that the protein acts through one or more molecules that interact with the brain directly. Further study will be needed to understand its mechanism of action.

The researchers also collected blood

samples from healthy older people (ages 66 to 78) to explore whether the protein could play a similar role in humans. Levels of GPLD1 were higher in those who were physically active (>7100 steps per day) than in those who were sedentary (<7100 steps per day).

“Through this protein, the liver is responding to physical activity and telling the old brain to get young,” Villeda says. “This is a remarkable example of liver-to-brain communication that, to the best of our knowledge, no one knew existed.”

More research is needed to determine how much, how long, and what types of exercise people would need to see cognitive benefits. Further, identifying the factors underlying this protein’s effects on the brain could help researchers develop therapeutics to combat age-related cognitive decline.

## CHOOSING HEALTHY MEALS AS YOU GET OLDER

From National Institute on Aging 2020

Making healthy food choices is a smart thing to do — no matter how old you are! Your body changes through your 60s, 70s, 80s, and beyond. Food provides nutrients you need as you age. Use these tips to choose foods and beverages for better health at each stage of life.

### **1. Drink plenty of liquids**

With age, you may lose some of your sense of thirst. Drink water often. Low-fat or fat-free milk or 100% juice also helps you stay hydrated. Limit beverages that have lots of added sugars or salt. Learn which liquids are healthier choices.

## **2. Make eating a social event**

Meals are more enjoyable when you eat with others. Invite a friend to join you or take part in a potluck at least twice a week. A senior center or place of worship may offer meals that are shared with others. There are many ways to make mealtimes pleasing.

## **3. Plan healthy meals**

Read and share this infographic to learn about making smart food choices for healthy aging. Find trusted nutrition information from ChooseMyPlate.gov and the National Institute on Aging. Get advice on what to eat, how much to eat, and which foods to choose, all based on the Dietary Guidelines for Americans. Find sensible, flexible ways to choose and prepare tasty meals so you can eat foods you need.

## **4. Know how much to eat**

Learn to recognize how much to eat so you can control portion size. When eating out, pack part of your meal to eat later. One restaurant dish might be enough for two meals or more.

## **5. Vary your vegetables**

Include a variety of different colored, flavored, and textured vegetables. Most vegetables are a low-calorie source of nutrients. Vegetables are also a good source of fiber.

## **6. Eat for your teeth and gums**

Many people find that their teeth and gums change as they age. People with

dental problems sometimes find it hard to chew fruits, vegetables, or meats. Don't miss out on needed nutrients! Eating softer foods can help. Try cooked or canned foods like unsweetened fruit, low-sodium soups, or canned tuna.

## **7. Use herbs and spices**

Foods may seem to lose their flavor as you age. If favorite dishes taste different, it may not be the cook! Maybe your sense of smell, sense of taste, or both have changed. Medicines may also change how foods taste. Add flavor to your meals with herbs and spices.

## **8. Keep food safe**

Don't take a chance with your health. A food-related illness can be life threatening for an older person. Throw out food that might not be safe. Avoid certain foods that are always risky for an older person, such as unpasteurized dairy foods. Other foods can be harmful to you when they are raw or undercooked, such as eggs, sprouts, fish, shellfish, meat, or poultry.

## **9. Read the Nutrition Facts label**

Make the right choices when buying food. Pay attention to important nutrients to know as well as calories, fats, sodium, and the rest of the Nutrition Facts label. Ask your doctor if there are ingredients and nutrients you might need to limit or to increase.

## **10. Ask your doctor about vitamins or supplements**

Food is the best way to get nutrients you need. Should you take vitamins or other pills or powders with herbs and minerals? These are called dietary

supplements. Your doctor will know if you need them. More may not be better. Some can interfere with your medicines or affect your medical conditions.

## **HOW DANGEROUS IS SOCIAL MEDIA TO SENIORS' WELL-BEING?**

From Senior News 2020

Ten years ago, few people would have predicted that seniors would become some of social media's most passionate users. But a study last year by Pew Research Center found that 62% of online seniors are on Facebook. Other studies show that social media use among seniors is rising at a rapid rate. How Dangerous is Social Media to Seniors' Well-Being?

As more and more seniors use social media, there are growing concerns. Most research indicates that social media improves quality of life for elderly adults. But some senior care professionals are increasingly worried about the dangers that social media could pose to seniors' well-being.

### **Is Social Media Good or Bad for Seniors?**

On the whole, social media seems to have a positive effect on seniors' well-

being. Internet use has been shown to reduce seniors' risk of depression by as much as 33%. One study found that seniors who use Facebook show marked improvements in cognitive function. Another study found similar results when seniors were trained to use email, Skype, and Facebook.

Social media also opens new avenues for seniors separated from children and grandchildren by long distances. Facebook makes it easy to keep in touch with family members. Video-calling is particularly popular with seniors, who use services like Skype to connect with their grandchildren. And in recent years, tech-focused senior care services have made using social media easier and safer than ever for elderly adults.

So why are some people concerned about the dangers of social media for elderly well-being?

## **Social Media and Depression in Seniors**

One common concern is that social media could, over time, make seniors more depressed. When researchers have surveyed social media users of all ages, they've found that more social media use is linked with higher risk of depression. However, this concern might be overblown among the elderly — after all, research has found that online seniors are less depressed than others.

A study out of the University of Missouri might explain why. In that study, researchers found that the risk of depression only rose in social media users who were using sites like Facebook to compare themselves to others. Depression was tied to an increase of jealous feelings and lower self-esteem. If users were using social media primarily to keep in contact with others, their risk of depression did not increase. Since most seniors use social media for keeping in contact with family and friends, it makes sense that most seniors aren't at high risk of depression due to social media use.

## **Social Media and Senior Isolation**

A much bigger concern is how social media affects seniors' in-person interactions. Senior isolation is a serious problem among the elderly, one with devastating health effects. Social media use can alleviate some of these effects, but it's not enough.

Seniors need to regularly spend time in the physical presence of others to avoid the emotional, mental, and physical effects of senior isolation. If seniors and their families start to treat social media as a replacement for in-person interaction, that could put a greater percentage of seniors at risk for feelings of isolation and loneliness.

“There are obvious benefits to social media use among seniors,” says Larry Meigs, CEO and President of Visiting Angels. “If social media is used to augment in-person contact, that's fantastic. But there's a real concern that seniors and their family members might have less of these interactions the more they rely on social media.”

## **Senior Care Tips for Social Media**

Ultimately, social media is a positive tool for seniors, families, and senior care providers. But it's something that should be approached with a degree of caution. If social media is your loved one's main avenue for social interaction, or if you've noticed they're spending less time with others now that they're on Facebook, it may be time to consider a change.

Spending more time with your loved one is always a welcome solution. But it might not be enough. If you live far away or have a busy schedule, frequent visits aren't always practical. In these cases, you might encourage your loved one to spend more time with friends

and acquaintances. You could even suggest they join a local club or organization that you think they'd find enjoyable.

Finally, you might consider companion care services, a

specialized form of senior care that helps the elderly avoid isolation by providing conversation and companionship in the comfort of home.

## **5 PROVEN BENEFITS OF READING FOR SENIORS**

From Philips Lifeline 2015

Seniors who read often enjoy much more than just a good story. Scientific studies have found many benefits of reading for older adults, from reducing stress and enhancing sleep to improving memory circuits, sharpening decision-making and possibly even delaying the onset of dementia and Alzheimer's Disease. These top five benefits demonstrate why good senior reading habits help preserve mental faculties, enabling people to live independently longer.

### **1. Enhancing Memory**

A study of 294 seniors published in Neurology found that those who engaged in mentally stimulating activities such as reading across their life-span had slower rates of memory decline compared to those who did not. Engaging in frequent cognitive activity later in life reduced the rate of decline by 32 percent. Reading exercises your memory, which is critical to the short-term recall of everyday events. Regular mental workouts through reading can strengthen the brain's neural network, helping your mind

become more receptive to learning and memory retention.

### **2. Sharpening Decision-Making Skills**

Reading can improve the analytical and reasoning power seniors need to solve problems, an ability known as fluid intelligence that declines throughout adulthood. A major study of Americans ages 25 to 74 found that, regardless of age, those who routinely did more to challenge their brains through such activities as reading did better on fluid intelligence tests than their counterparts.

### **3. Delaying Onset of Alzheimer's and Dementia**

Additional research determined that adults in their 70s who engaged in mentally intense hobbies, such as reading, from ages 20 to 60 are less likely to develop Alzheimer's disease. In an article published by USA TODAY, Dr. Zaven Khachaturian, senior science adviser to the Alzheimer's Association, says that brain-challenging activities build a



reserve of neuronal connections, making it take longer for the Alzheimer's process to destroy enough neurons for symptoms to emerge. Another study of participants from the Rush University Aging and Memory Project found that more frequent mental activities, including reading, help preserve brain structures important to cognition in late life.

#### **4. Reducing Stress**

When it comes to unwinding, getting lost in a good book beats listening to music, having a cup of coffee, or going for a walk, according to research conducted at Mindlab International at the University of Sussex. It only took six minutes for the heart rate and muscle tension of

participants to relax once they dove into a book.

#### **5. Sleeping Better**

Reading in bed has long been considered a surefire way to fall asleep. The Mayo Clinic confirms this, stating that creating a bedtime ritual, such as reading, signals the body that it's time for sleep. This activity induces shut-eye better than falling asleep in front of a television screen or other electronic device, which has been proven to keep people awake longer or even disrupt their rest.

As people age, they might tend to read less and turn on the TV instead. Given the proven health benefits of reading, however, you may want to consider trading in the remote for a good book instead.

## **A PRIMER ON ARTHRITIS**

**From HealthinAging 2020**

### **BASIC FACTS**

- Do you wake up in the morning with stiff joints?
- Does it take you longer to get out of bed than it used to?
- Are your knees, hands, hips, neck or lower back aching more than before?
- Have you noticed that some of the joints in your hands and feet have become swollen?

- Is it getting harder to move in general?

If you answered yes to any of these questions, you may be developing arthritis, the most common joint problem in older people.

### **What is Arthritis?**

The most common form of arthritis is osteoarthritis. It occurs in older

people because it is usually the result of long years of wear and tear on your body—most likely from normal physical activity or from past injuries. Eventually, all that history starts to take its toll, especially on your joints (the places where two or more bones meet). In fact, the word “arthritis” means “inflamed joint.”

Arthritis is the leading cause of disability in the United States. Surveys have shown that millions of adults are limited by arthritis in their ability to walk, climb stairs, bend, kneel, or participate in regular social activities such as going to places of worship or visiting with family and friends. For those still working, arthritis can make daily routines more and more challenging.

## **The Most Common Types of Arthritis**

There are several types of arthritis. The ones that occur most often are:

### **Osteoarthritis**

This is the most common type of arthritis. The ends of your bones are

covered by a slippery, cushioning substance called cartilage. Cartilage acts as a shock absorber and allows your bones to slide smoothly against each other. With advancing age, injuries, or infections, your cartilage may start to deteriorate. This leaves your bones unprotected. They

start to grind against each other whenever you move. Small holes and fractures start to appear in the bone surface, and bony growths—called osteophytes or bone spurs—may begin to appear. Sometimes, small bone fragments or bits of cartilage break off and interfere with the movement of the joint, causing more swelling and pain. Eventually, the underlying bone, ligaments, blood vessels, nerves, and even muscles become irritated and inflamed as well.

### **Rheumatoid Arthritis**

This is the second most common form of arthritis. Rheumatoid arthritis affects many other joints, including your hands, wrists, elbow, shoulders, and feet. In this type of arthritis, your own immune system mistakenly starts to attack the tissues in your joints—particularly the synovium, a thin lining over your bones that helps keep your joints moving well. Other body tissues may also be targeted, including muscles, blood vessels, heart, lungs, nerves, and skin. Most cases appear before the age of 60 but some appear after. Rheumatoid arthritis is often a life-long, progressive disease.

### **Gout**

Gout is caused by the build-up of uric acid crystals within the joint where it causes intense pain, swelling, warmth, and redness.

### **Infectious Arthritis**

This type of arthritis occurs when an infection spreads into a joint.

## How Common is Arthritis?

Approximately 50 million adults have been diagnosed with some kind of arthritis in the United States, including osteoarthritis, rheumatoid arthritis, gout, lupus, and fibromyalgia. In fact, about half of Americans over the age of 65 have been told they have arthritis by their healthcare provider.

Women are slightly more likely to get a diagnosis of arthritis than men, although gout is more common in men. Also, if you are overweight or obese, your chance of developing arthritis increases.

## CAUSES

There are factors that can put you at higher risk of suffering from arthritis. These include:

- Getting older. Osteoarthritis, rheumatoid arthritis, and gout are more common in older people.
- Being overweight or obese.
- Having previous injuries or infections that affected the joint.
- Playing sports or doing repetitive work that puts extra stress on certain joints.
- Genetics. In rheumatoid arthritis, scientists have found genes involved in the immune system that are linked to a higher risk of getting the disease.
- Gender. Women are more likely to get rheumatoid arthritis, but

men suffer from gout more often than women.

- Medications. Certain medications raise the risk of gout flares.

## SYMPTOMS

Each type of arthritis has different symptoms.

### Osteoarthritis

Osteoarthritis affects only your joints, usually the hands, knees, hips, or spine. However, any injured joint can develop osteoarthritis.

Osteoarthritis causes joint pain, swelling, and stiffness. The joint stiffness gets worse after a period of sitting still and gets better fairly quickly when you start moving. As it progresses, your joints may become damaged and deformed.

### Rheumatoid Arthritis

With rheumatoid arthritis, you are more likely to experience warmth and redness along with pain and swelling in the affected joints. Eventually, the cartilage and bone are badly damaged and the joint may become severely deformed. Many people with rheumatoid arthritis have long periods of joint stiffness in the mornings (over 30 minutes). You may also have a rash and fever and feel generally ill.

### Gout

Gout is a type of arthritis that usually only affects one or a few joints. It

usually affects the big toe or ankle, but can impact other joint such as the knee, wrist, or shoulder. Gout flares usually happen suddenly, often starting at night and reaching the worst pain within one day of the pain onset. They typically will resolve in 7-10 days, even without treatment. If you are having an attack of gout, you may also have a fever.

### Warning Signs

The following are warning signs that you may be developing arthritis:

- Pain, swelling, or tenderness in one or more joints
- Cracking or crunching sounds with movement
- Stiffness, especially morning stiffness or stiffness after rest
- Warmth or redness in the joints
- Bony knobs that appear on the joints of the fingers
- Reduced range of motion (a decrease in how much you can move the joint in all directions)

Rheumatoid arthritis has some

particular additional signs, such as:

- Anemia (low numbers of red blood cells)
- Dry eyes and mouth
- Inflammation in other places such as blood vessels or the lining of the lungs or the heart
- Joints on both sides of the body affected at the same time (for example, both ankles or both wrists)

- General fatigue, fevers, feeling sick, weight loss—especially when it starts in an older person

You may feel arthritis pain and other symptoms in unexpected areas. For example, if you feel tingling, weakness, or numbness in your arms or legs, you may have arthritis of the spine. This can put pressure on the nerves coming out from your spinal cord, sometimes even affecting bladder or bowel function. In the same way, arthritis in your hip may be felt as pain in your groin, buttocks, inner thigh, or knees.

Your healthcare provider (a primary care doctor or advanced care provider [physician's assistant or nurse practitioner], internist, geriatrician, or an arthritis specialist called a rheumatologist) will use a combined approach to figure out if you have arthritis or some other condition that has similar symptoms. This approach can include the following tests:

### Physical Examination

Your healthcare provider will ask you about your symptoms, as well as other medical conditions you have or that run in your family. They will check your reflexes, muscle strength, range of motion (how much you can move your limbs), how you stand, walk, and bend, and will examine your joints for swelling or other signs of arthritis.

Often, this is all that is needed to diagnose osteoarthritis.

#### X-rays

These show if there is bone damage, loss of cartilage, bone spurs, or debris in the joint, especially if the condition is advanced. X-rays are especially helpful to diagnose rheumatoid arthritis.

#### MRI (magnetic resonance imaging)

This test is painless and non-invasive. An MRI is able to show the soft tissues of your joints better than X-rays. It is not usually needed but is often used for knee or shoulder problems if your healthcare provider is worried you have torn a ligament or tendon.

#### Joint aspiration

In this test, fluid from inside the joint is drawn into a needle. Then it is examined under a microscope to look for bacteria, crystals, or certain types of cells that indicate inflammation. This test is most useful to diagnose infections or gout in the joint.

#### Blood tests

Some blood tests can provide clues to the diagnosis, especially for rheumatoid arthritis and gout.

#### Tests for rheumatoid arthritis

Rheumatoid arthritis varies a great deal from person to person and can be difficult to diagnose at the beginning when the symptoms are mild and only

a few may be present. Your healthcare provider may order the following blood tests to help confirm the diagnosis:

- Rheumatoid factor
- Anti-CCP (cyclic citrullinated peptide) antibodies
- White blood cell count
- Red blood cell count (to look for anemia)
- Sedimentation rate
- C-reactive protein

## CARE AND TREATMENT

Medications for Pain and Inflammation Commonly Used for Osteoarthritis

Acetaminophen

Non-Steroidal Anti-Inflammatory Drugs (NSAIDs)

Opioid pain relievers

Steroids

Hyaluronic Acid-type preparations

Creams or sprays

Additional Types of Drugs for Rheumatoid Arthritis

Patients with rheumatoid arthritis may take some of the medications mentioned above. Additional types of drugs are also used to control the malfunctioning immune system and minimize the resulting damage to joints. Although these drugs are often very helpful, they must be used carefully, and your healthcare provider has to monitor your progress closely.

DMARDs (Disease-Modifying Antirheumatic Drugs)

Immunosuppressants  
TNF-alpha Inhibitors (tumor necrosis factor-alpha inhibitors)  
Uric Acid Lowering Medications  
Other drugs  
Non-Medication treatments  
Surgery  
Monitoring

## **LIFESTYLE AND MANAGEMENT**

Everyone living with arthritis has a different experience, although many basic aspects of the disease are common to all. Each person experiences the tenderness, pain, inflammation, and disability differently.

Your own lifestyle and needs will direct how you adapt to your arthritis symptoms. The providers on your healthcare team will be able to offer many coping strategies.

The following approaches will make it easier.

**Take Control of Your Disease**  
Come up with a plan with the help of your provider and healthcare team that includes exercise programs, relaxation, and regular check-ups. Educate yourself so that you understand your own treatment

routine. Research shows that people who are in control of their treatment feel less pain and spend less time at their healthcare provider's office.

**Physical Activity**  
Regular physical activity is a critical part of arthritis treatment. Studies for osteoarthritis treatment have shown that that regular physical activity is associated with decreased pain and improved ability to move around. Over time, physical activity can also help weight loss, which can help with osteoarthritis pain too.

**Diet**  
If you have gout, your healthcare provider may advise you to avoid certain foods that can raise the risk of gout flares. These include shellfish, full-fat dairy, and alcohol.

**Find Support Groups and Other Resources**  
You can find support in your community or online. Bring your family and friends on board. Sharing your own experiences and hearing about other people coping with the same diagnosis can be helpful, educational, and empowering. Arthritis self-management programs teach people with arthritis about their disease and help them take charge of their own care.

# OLDER ADULTS WHO “FEEL YOUNGER” TEND TO LIVE LONGER

From Healthline 2021

- **Researchers say older adults who “feel younger” tend to be in better health and live longer.**
- **Experts say feeling younger includes energy for recreation, fitness activities, and creativity.**
- **They say you can feel younger by taking time to meditate, laugh, and learn new topics.**

You can fight the damaging effects of stress simply by feeling younger.

That’s according to a new study published by the American Psychological Association in the journal Psychology and Aging.

Researchers from the German Centre of Gerontology analyzed 3 years of data from 5,039 participants over 40 years old in the German Ageing Survey.

They questioned people on their perceived relationship to stress and their overall feelings of health or feelings of well-being.

Subjective age, or how old the participants felt, provided some sort of protective effect against stress.

Participants who reported more stress in their lives experienced a steeper decline in functional health over 3 years. This relationship was stronger for chronologically older participants.

Feeling younger than their chronological age was associated with a weaker link between stress and functional health. The benefits of this were seen to increase with participant age, too.

In other words, feeling more youthful than you are helps buffer the effects of stress. This can play a role in maintaining your overall health as you age.

## **What does feeling younger look like?**

So, when it comes to your health, the age you feel could be more important than your actual birthdate.

This isn’t a new concept.

The Centers for Disease Control and Prevention (CDC) Trusted Source has previously advised people that their heart age could be beyond their actual years due to lifestyle factors such as stress. Reducing that age is a key in reducing risk of heart disease and stroke.

But what does it really mean to “feel younger”?

“Feeling younger is an attitude of playfulness, emotional flexibility, and leaning into creativity,” said Akua K. Boateng, PhD, LPC, a licensed psychotherapist in Philadelphia.

Boateng told Healthline this research enhances her clinical understanding that feeling younger, with the absence of extreme stress, does affect longevity.

“As a clinician, I have seen the damaging effects of stress on the emotional life,” she said. “Years of trauma, anxiety, and chronic stress erode our ability to wonder, be creative, and seek adventure.”

### How to feel younger

The study authors suggest that interventions targeted at helping people feel younger may help reduce the harm caused by stress as well as improve health among older adults.

They added that further study is needed to help determine what kinds of interventions would work best.

So, what should you take away from this? Well, experts say feeling younger can be as simple as shifting your mindset.

Begin by asking yourself how old you feel today.

Then, make a conscious effort to incorporate the following lifestyle modifications into your everyday routine. Over time, small changes can completely transform your life.

Boateng shares her lifestyle tips for feeling younger:

- **Play.** Incorporate play into your weekly schedule (e.g., games, sports, or social interactions).
- **Laugh.** Lean into laughter at least once a day.
- **Learn.** Start a hobby that allows you to explore something either new or continue learning.
- **Explore.** Enhance your curiosity (ask questions about what feels established and known).
- **Seek.** Be spontaneous and seek adventure.

The National Institute on Aging suggests tackling stress in other ways, including:

- meditating
- starting a stress relief program
- increasing physical activity
- talking things out with friends and family

If you’re struggling to shift your mindset, consider talking with peers, mentors, and trusted professionals about what may not be working.



There are many avenues of changing your mindset, and oftentimes seeking support from others who may be feeling the same or may have

experienced this before is helpful.

If you're still feeling "off" about your age or your relationship to stress, consider mental health support.

## **POSITIVE IMPACT OF SOCIAL MEDIA FOR SENIORS**

Newport Home Care 2021

Most people believe that social media isn't popular with senior citizens. But this isn't true. Studies have found that more numbers of seniors are approaching social media in recent years than any other age group, which proves that this technology has great benefits to offer to older age groups as well.

### **How Does Social Media Affect Senior Citizens?**

Here are some important aspects that show how social media is playing a positive role in senior citizen's lives.

#### **Improve Mental Health**

- We usually say a person is healthy if they don't have any diseases or infirmity. But being healthy is much more than just this. Good health includes complete physical, mental, and social well-being.
- New studies have found that seniors using social media acquire many positive instances

related to their personal and social life as they are more engaged in constructive activities and focus on self-education and love. In addition, they stay updated with the latest news and trends, so they are less indulged in habits like smoking and alcoholism.

- In fact, there are very few cases of depression and other cognitive illness in such people. It also reports that older people who use social sites have much-controlled blood pressure and sugar in comparison to those who are not using it.

#### **Make Shopping Easier**

- Shopping is something that excites every age group. It doesn't matter if you are 16 or 60; shopping is always fun for everyone. But for senior people, it might be challenging at times because they become weak with age and aren't able to roam around much. However, this

isn't a matter of concern these days as online shopping has made things really easier. It's really beneficial for senior people to order anything online and get home delivery. Anything they want is just a click away, and they do not need to go out or drive anymore. They can also take advantage of great deals on online sales and even get discount coupons for further money-saving.

#### Keep Up to Date with Friends & Family

- Older individuals are usually seen as suffering from depression or anxiety due to too much leisure time. Social media gives them a sense of connectivity with their friends and family as they can see their grandchildren grow up even if they aren't with them.
- They get to know what their children are doing, and what's happening in the lives of their loved ones. Many of them form groups on social media to stay in touch with all of their loved ones as they can plan to catch up and socialize through social media.

#### Sense of Belonging to a Greater Community

- Social media creates a sense of belonging to a greater community among senior citizens. It allows seniors to be part of many online

communities and make them feel connected on a large scale.

- Seniors can use social media to chat, make audio/video calls, and share photos. The best part of social media is that it helps them to find like-minded people and discuss the topics they are most passionate about. For example, seniors can find a Facebook group based on their interests and share a project they are working on to get some troubleshooting ideas.

#### Alleviates Effects of Senior Isolation

- Senior isolation is a serious problem that can also cause mental health issues in senior citizens. Social interaction is found to be crucial for the overall health of seniors.
- Using social media can reduce senior isolation to some extent. However, it should not be used as a replacement for in-person social interaction. Seniors also need to spend time with others in-person to avoid mental, physical, and emotional effects of social isolation.

#### Things to Consider to Avoid Negative Effects of Social Media on Elderly

- Along with these benefits, certain risks are also involved when a senior adult is engaged in online activities and social media because the Internet is full of scams, phishing, and

more. If you have any senior members at home using social media, you need to make sure they are keeping off from any malicious internet content.

- Guide them about do's and don'ts to protect them from scams. Let them enjoy the benefits of social media and lead a peaceful old age with great positivity.

### **Social Media and Depression in Seniors**

Studies conducted among social media users of all ages have raised a concern that social media usage can aggravate the symptoms of depression.

Let us understand this study to know how this is possible.

- In this study conducted at the University of Missouri, researchers found that social media use triggered depression only in people who use various sites like Facebook to compare themselves to others.
- However, if users limited social media usage mainly to contact friends and family, their risk of depression did not increase. Instead, it has been found to help the elderly avoid feeling isolated and lonely. Since most seniors use social media to stay connected with their close friends and relations, they are not at high risk of depression due to social media usage.

### **Senior Care Tips for Social Media**

There is no doubt that social media is a positive tool for seniors, families, and senior care providers. However, it should be approached with a degree of caution.

- If you think your loved one has got addicted to social media, and it is their only avenue for social interaction, maybe it's time for a change. Make sure that your loved one has other interests apart from social media. For example, having a Facebook account should not reduce their social interactions with others.
- If you find your loved one is showing too much interest in spending time on social media, you should encourage them to decrease their social media usage and spend more quality time with them.
- Even though spending more time with your loved one is always a welcome solution, it may not always be possible because of your busy schedule. In such cases, you should encourage your loved one to spend more time with friends and relatives. You could even suggest they join a local organization that they would find enjoyable.
- Additionally, you can also consider hiring companion care services for your loved one. This is a specialized form of quality

home care solution that helps the elderly avoid isolation by providing companionship and

conversation in the comfort of your home.

## HERE ARE GARDENING TIPS FOR AUGUST FOR TALLAHASSEE

If you get frost, calculate your planting date to see if you have time for more crops. Count back the number of days to maturity plus 18 days for the harvest of the crop.

In areas with frost, there may be time for snap beans and Irish potatoes by midmonth and squash and cucumbers by end of month.

Be sure to harvest your fruit and vegetables as soon as they are ripe. See our Ripeness Guide on Almanac.com.

Check your plants for any diseases and pests and treat when necessary. Prepare soil for fall plantings. Clean up all debris. Mix in compost or fertilizer.

Start plants for broccoli, cabbage, cauliflower, collards, kale, and onions to set out in September. In southern areas, cool-season crops can be planted. Plant herb transplants: rosemary, ginger, laurel, Mexican tarragon.

Prepare your perennial flower beds now; you can start flowers for next spring soon. Even in late summer, you

can plant bulbs for many lilies (butterfly, Aztec, spider).

Continue to remove spent blooms, cut back overgrown bedding plants, and fertilize flowering annuals and perennials.

Stake any tall-growing plants to help prevent any damage.

Be sure to divide and replant any crowded plants. It is important to increase the air circulation between plants so that the plants can dry out between rain showers.

If your lawn seems stressed, determine whether it's rainfall or pests or disease. Use a sharp mower and remove only one-half of grass blades to reduce stress.

If older palm fronds are yellowing, you may have a magnesium or potassium deficiency. Apply an appropriate palm fertilizer. Fertilize ornamental plants

that need more nutrition due to growth and leaching rains. Lightly prune shrubs if they need it so that any new growth will harden off before the cold weather.

# QUOTE OF THE MONTH

## LAW

“There is no greater tyranny than that which is perpetrated under the shield of the law and in the name of justice.”

**Montesquieu**

For publication in the OLLI times send **your information to George and Harriet Waas** at [waas01@comcast.net](mailto:waas01@comcast.net)

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