



OLLI TIMES

NEWS AND INFORMATION FROM THE MEMBERS AND STAFF TO THE MEMBERSHIP

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OCTOBER 2019

OLLI MEMBERS GATHER AT THE TURNBULL CENTER FOR THE FALL SHOWCASE

An estimated 400 OLLI members, old and new, gathered at the FSU Turnbull Center for the Fall Showcase held on Monday, September 16, 2019. The attendees heard from the instructors who will be teaching the more than 50 classes (more fully set out in the Fall Course and Activity Catalog), as well as those who will be conducting the more than 20 activities and events that will take place during the semester.

OLLI offers an exciting, challenging array of classes tailored for adults 50 and over who love to learn and want to expand their intellectual horizons in a stress-free environment where there are no grades and no required

homework. These classes are offered purely for the joy of learning. Instructors include current and retired faculty members from area institutions of higher education, FSU graduate students and experts in their subject fields.

According to OLLI Program Coordinator Terry Aaronson, 2139 individual registration orders (parking and memberships) were placed on the first day of registration. 89 new members joined on the first day; 919 members enrolled in the accumulated number of classes; and 437 members registered for the accumulated total of activities, all on the first day.

OLLI TIMES PROFILES...



OLLI PROGRAM COORDINATOR TERRY AARONSON

If you are in the Pepper Building on FSU's campus, visit the second floor, and peer through a narrow window into an office located next to a large billboard, chances are you will see, above a large computer screen, the hairline of a woman busily working. She is probably designing and laying out the Course and Activities Catalog. Or inputting class and activities descriptions as well as other necessary information in OLLI's online registration system. Or doing the many and varied tasks involving the management of the day to day operations of the OLLI program.

If OLLI's term is not in session, she is planning for classes with the curriculum team, and working with instructors and staff on securing instructors and classes.

During registration, she handles the maddening volume of phone calls, emails, and assists members with resetting their usernames and/or passwords and actual registration. "Full throttle for two or three days," she says. "I feel like I'm an accountant during tax season," she added.

During semesters, she is making the rooms ready for members and

instructors, dealing with emergencies as they arise, “inevitably,” she notes. She is also answering member emails and phone calls, as well as posting on social media and working with staff to update the OLLI website. Oh, and she handles the weekly newsletter.

This busy lady who works with OLLI leadership, members and volunteers toward developing a successful, exciting program, is OLLI’s Program Coordinator, **Terry Aaronson**.

She is a native of Tallahassee and attended Florida State University. She is married to her “funny, intelligent, and talented husband, Glenn.” They have a son who lives with his wife in Ashville, N.C.; two daughters and another son that all live in Tallahassee.

Terry moved away from here for about 15 years “and then found my way back,” she said. She joined The Academy at FSU in October of 2001 under its founder, Susan Lampman. “We had a total of six classes a term for the Fall and Spring—and no May term for the first couple years.”

Right out of college, Terry took a position with the Leon County School Administration as an Instructional

Television Program Specialist, providing Leon County school teachers with education media. After moving to Tampa, FL, I joined Kast International, a customer relations training company (now Achieve Global) as a Marketing Manager for the Banking and Insurance industries.”

Terry finds her work very rewarding, especially when she hears from members how OLLI has changed their lives for the better; and how they have found new lasting meaningful friendships within OLLI, even giving some a reason to live. This is what makes my job so fulfilling!

Looking down the road five years, Terry sees a “larger membership, additional classes and activities, and an overall more dynamic program with classes that meet two, three, four and five weeks at a time.”

When she is away from OLLI, her hobbies and outside interests include “snow skiing, vacationing at the beach, traveling, herb and vegetable gardening, cooking, and family time,” she said.

THE PRESIDENT'S CORNER



John Kilgore, President, OLLI Members Advisory Council
kilgorejhn@comcast.net

The OLLI Members Advisory Council is made up of the Officers, the Member Representatives, The Recording Secretary, the Executive Director, and the Committee Chairpersons. This issue and the next I am going to talk about the Committees.

Society of Past Presidents (Ramona Bowman, Chair). The Council values the experience that our Past Presidents bring to OLLI. The Council has given this committee the opportunity to remain active and to provide advice and help to present officers.

The chairperson has a vote on the Council and participates in meetings.

Philanthropy Committee (Winnie Schmeling). OLLI has several sources of funding. Member philanthropy is an important part of these sources. Member gifts may be made to the general fund or to the scholarship fund. Gifts may be made on-line through the website.

Scholarship Committee (Cindy Foster). OLLI at FSU presently contributes three scholarships a year to FSU students. This committee is responsible for soliciting the student applications and preparing them for presentation to the Council which votes on whom to award the scholarships.

Curriculum Committee (Susan Yelton). Curriculum is our busiest committee. They work all year to contact potential instructors, collect proposals from them, and then determine if the proposal meets our needs. Approximately 2-3 months before the start of classes, they meet to pick which classes to present to the members and then build the schedule from instructor availability.

Succession Planning Committee (Linda Fairbanks). This committee is responsible for the annual election of the Officers and Member Representatives. They solicit nominations, vet the candidates against the Bylaws, and conduct the election by the Council Members. I will conclude this overview next month with the Inclusivity, Volunteer, Communications, and Social Committees.

CURRICULUM CHAT

by Susan Yelton
Chair, OLLI Curriculum Team

Showcase of Classes has come and gone and it feels like we are going back to camp again...seeing friends from last semester, catching up on what we did for the summer and sharing family stories.

This semester we are offering more classes than ever and lots of three-week classes. I thought the social and cultural committees gave us fantastic choices. I have signed up for seven classes and having a difficult time figuring out how to fit in all the activities that look like fun. If you only signed up for a membership, you could fill your months with so many

inexpensive field trips and cultural events.

As you know by now, two of our favorite instructors have had to cancel their classes. All of our instructors try to fit us into their busy lives and family obligations but there are times when family has to come first. The good news is that Arleen Pabon will be teaching in the spring and getting us ready for the trip to Greece. And Margaret McColley will be back teaching French.

I'm writing this column on opening day of registration. It is the day I try to

figure out whether we got it right or wrong in selecting instructors for you. What we do as a team when selecting proposals is not a perfect science, but we make the best decisions based upon room availability and interest of membership. We can always guess how many members will take Jim Jones' class but the surprise to me was Judge Terry Lewis' class. It was full by noon on registration day. Normally, I would not be telling a "behind the curtain" story, but getting Judge Lewis to teach for us has twists and turns and can give you some insight into how we find instructors.

I was at Gadsden Arts Museum meeting with their staff so I could schedule the Rockwell class for OLLI. The person I was meeting with said she thought her father would enjoy taking OLLI classes because he was retiring. When I asked his name, she said Terry Lewis. The bells went off in my mind and I thought of the Gore/Bush election. Initially, I was thinking of recruiting a new member but maybe Terry could be one of our instructors. Ever since I read Caroline Kennedy's book about the First Ten Amendments to our Constitution, I have been trying to arrange a class for us on the Bill of Rights. You can't just call up a judge on their office phone, but my neighbor is a circuit court judge and he gave me Judge Terry's cell number. Terry was very receptive when I called him, but not about my idea. He has been teaching a class at the FSU Law School

that he thought we would like as a class. Sounded good to me... but could he teach as recently retired state employee?

Melissa Guest, our accounting representative, came to the rescue providing all the information Judge Lewis needed so he could teach for us. And now when you take Judge Lewis' class please don't ask him about the Gore/Bush election. I think that is past history for him. He won't tell me much about the novel he is writing, but I know it focuses on our founding fathers and a plot to kill one of them. Jim Jones has been proofing the script for historical accuracy and tells me it is going to be a good tale.

The spring schedule is just about finished. The curriculum team will meet on October 10th to review proposals and select classes. There are some very good proposal, some repeats and returning faculty. For those of you who are history buffs, I told David Proctor I think we are all tired of wars. He liked my suggestion to have a class about the early years of our country and is putting together a proposal that will address the time period before the American Revolution. He may cover the French and Indian Wars but I hope he will focus on the impact of the Puritans and the early settlers. Don Barry will be teaching the American Revolution. A class on that subject has never been taught and so glad Don agreed to my

request. And, Jim Jones will be back to continue the story of the Civil War.

Getting us ready for travel to Greece and Croatia/Slovenia, in addition to Arleen's class, Allen Romano has a proposed class about the Greeks and their impact on our culture, government etc. For May, I am still keeping my fingers crossed, but Lee Metcalf has promised to teach a class about Croatia and Slovenia. Her class on the breakup of Yugoslavia was fantastic.

Do you remember our class taught by Jonathan Dennis about genes? Well, he is proposing teaching a class about microbiome, the population of helpful bacteria that live in our bodies and are contributing factors to our wellness. Should be another class that gives us a better understanding of our immune system and how to stay healthy.

Gary Stillwell will be back with a class about the Origin and Evolution of Abrahamic Religions. I know we all miss Rabbi Jack Romberg, but I am so glad that Rabbi Michael Shields who has replaced Rabbi Jack, called us and wants to teach in the spring. He is very familiar with OLLI. The Temple where he served prior to coming to Tallahassee was used as the lifelong learning program for Davidson University.

There is a lot more to say... we should have another Saturday at Sea, but I do

want to tell you about the lectures I am scheduling for the week before we begin spring classes. On February 11th, we are going to have a special lecture program at Westminster Oaks to commemorate the 19th Amendment. Yea! Women finally got the right to vote. It will be a lecture luncheon with some great panelist from FSU faculty. More information will be provided as we get closer to the spring schedule.

During February week, Jim Jones will give his talk about "Billy Yank". He called me the day he found his notes so excited.... They were in a book about the Civil War... where else would they be? Still working on the other lectures for the week, and have some good contacts. Had lunch with Madeline Carr at Wakulla Springs the other day about her new book that focuses the early explorers and settlers in Wakulla County. Might try to schedule a class at the Old Fort.

This will be my last chat with you.... I will be stepping down as the member curriculum chair. Debra has always been the "real chair" regarding curriculum but she has let me have the title instead of a pay increase. Trying to find instructors for OLLI has been a seven-year adventure for me as a volunteer and I have loved the challenge. Debra did not fire me and I am in good health. It was just time to

provide succession planning for the years ahead. Past President Carroll Bewley will take over the role of curriculum chair. Carroll and I have worked together on curriculum and other projects since 2013. He will be an excellent chair and will have my support, (and if my brain is working), institutional knowledge of prior classes and faculty. I know Carroll will bring a fresh look to the curriculum program. As part of succession planning, there is another change on the team. Your member

representative, Jill Adams, will take on the additional role of curriculum team member. She is replacing Pat Meredith who has been a valued member for several years. I don't need a new volunteer job, but Debra has asked me to take on the role of special lectures. So, in the months ahead I'll be busy helping Carroll and Jill transition and arrange some special lectures in February.

See you in class!

THE OLLI DONOR SPOTLIGHT

SHINES ON

FRAN AND CHARLES CONAWAY



For the Fall 2019 Semester, the OLLI Donor Spotlight shines on Fran and Charles Conaway.

Fran, a former OLLI president who also writes columns about senior living for the Tallahassee Democrat extolling the virtues of

OLLI, says that "Since retirement, OLLI has become our way of life--a source of continuing learning, a map for successful longevity, a meaningful way to volunteer and, more than anything else, a source of friendship and fun.

“With classes, travel, socials and the wide variety of activities, our calendars are filled with exciting, productive opportunities of all kinds.

“For both of us—Charles as an alumnus and emeritus professor and Fran as a long-time employee—OLLI is truly our alma mater for our garnet and golden years—as well as a way to give back to Florida State University and OLLI.

Because of the importance we place on the understanding of critical world issues, we created the Conaway Fund, a charitable gift annuity intended to support OLLI courses like Great Decisions, which provide vital information and discussion opportunities for OLLI students. We hope our contribution will benefit OLLI and its members for decades to come.”

Congratulations to Fran and Charles.



...FROM THE PEPPER INSTITUTE

HOMELESSNESS AND AGING

How common is it for Americans to fall into homelessness in their later years?



by Anne Barrett, Director of Pepper Institute on Aging and Public Policy

Some homeless people have been on the streets for decades -- but others arrived much later. Almost half of homeless Americans over age 50 lost their homes after reaching age 50.

This group differs in several ways from those who became homeless much earlier in their lives. People who lose their homes in later life are more likely to be women -- and to

have more education and closer ties to the labor market.

Also distinctive are the events that led them into homelessness.

Relationship breakdowns, like a separation, divorce, or the death of a partner are a primary cause -- as are health crises that reduce the ability to work and drain savings.

People facing homelessness for the first time while in later life tend to be less familiar with federal, state, and community health and

social care systems, limiting their ability to access available resources.

CLUB NEWS

OLLI MEMBER, BOOK CLUB MEMBER, PENS FIRST BOOK

The OLLI Writers' Group announces another member of the group, long-time OLLI member Phil Beyer, has published his first book. *A Soul Walkin' Home, Stories of Those Living on the Fringes* was recently released by Covenant Books. Beyer credits his OLLI classes and monthly Writers Group with guiding him through the publication process.

“What started as an interest in writing a memoir transitioned into an anthology encouraged by the OLLI Writer’s Group. As a first-time author, their input was invaluable,” Beyer said. His book captures

stories of persons in prisons, ghettos, homeless missions, and third world countries. “Their unvarnished stories stirred my vulnerabilities. I assumed I was transforming lives. Fixing other’s brokenness. All the while, God’s indwelling spirit was transforming me.” For more information on the Writers Group or to purchase the book contact Phil Beyer at 850-508-5721 or at windsong90@aol.com.

“We all have stories just waiting to be written. Join us and let us help you get your story on paper.”

OLLI BOOK CLUB TO MEET OCTOBER 14

The OLLI Book Club will meet on the second Monday of the month except this semester in November when the group will meet on the first Monday because of Veterans Day when the library (our meeting place) will be closed. All meetings shall be held at the LeRoy Collins Leon County Library at 11 a.m. in the Magnolia Room on the second floor.

October's second Monday is Columbus Day; the library is open and the club will be meeting on that day. For October, the club has chosen to read *The Nickel Boys* by Colson Whitehead. It is currently on the best seller list. “It is a novel but is based on the happenings/abuses that took place at the Dozier School for Boys in Marianna, FL (Jackson County, located about 50 miles NW

of Tallahassee). One of the primary characters of the story grew up in Frenchtown here in Tallahassee. It is fairly recent history; something all of us should be aware of. As is true with so many other historical settings involving injustices, we need to be aware of this tragedy. We book club people

believe that reading is an education and we aim to guard against 'injustices of the past' being repeated.

Come and join us. Our only requirement for book club inclusion is that you are a member of OLLI," said Ramona Bowman.

OLLI WEDNESDAY BOOK CLUB TO MEET OCTOBER 9 TO DISCUSS RUTH WARE'S BOOK

The OLLI Wednesday Book Club will be discussing The Death of Mrs. Westaway by the English author, Ruth Ware. The meeting will be October 9th, 4:00 at Westminster Oaks pool house. Ruth Ware is the master of the psychological thriller, with cleverly

twisting story lines. She also wrote The Lying Game and The Girl in Cabin 10.

Discussion questions will be sent out to Book Club participants early October for your consideration.

IT'S A BUSY OCTOBER FOR CULTURE & ARTS

With the (hopefully) cooler weather comes a plethora of culture and arts activities for OLLI members!

We start the month off with a walk among the downtown art in the All Saints district, led by Amanda Karioth Thompson from our local Council on Culture and Arts. This activity filled up fast and will be fun, healthy and educational!

The end of October brings three very different experiences: a trip back in time to the Roaring Twenties at the FSU School of

Theatre's production of the musical, "Chicago"; the kaleidoscope of stunning quilts on display at The Museum of Florida History, and a tour of Mission San Luis de Apalachee, our own Spanish Franciscan mission built in 1633!

If you haven't signed up for one of these last three events, there may still be time! Check them out on the OLLI website and sign up if there is still space available! Got ideas for activities you'd like to see for Spring Semester? Send them to Jan Smith at jansmith1642@gmail.com

FRIENDSHIP FORCE TO MEET ON OCTOBER 8

The next meeting will be Tuesday October 8th at 6 pm at the Westminster Pool House. Please bring a covered dish to share and wear your name tag. Contact Social chair, Jane Hudson at judson_98@yahoo.com for more information.

Unfortunately, our incoming November international visitors from Mexico had to cancel their trip. Our club is currently working to have another club visit us during the spring break in March 2020. More details in the next issue.

All members of OLLI are automatically members of Friendship Force International. The website is www.friendshipforce.org

Contact Wendy Johnston, President, at mrswendyjohnton@gmail.com if you have any questions or want more information.

SPECIAL TO THE TIMES

COMBATting AGEISM: HERE'S HOW

Everyone reading this will get older. In fact, for many of us, the word “old” often elicits feelings of fear or dread. “What was I most worried about?” pondered Ashton Applewhite during her TED talk on ageism. “Ending up drooling in some grim institutional hallway. Thankfully, Applewhite learned that only about 4% of older Americans need to utilize nursing homes. Another worry about aging for Applewhite? Losing her cognitive function.

“The real worry is our anxiety about memory loss,” she says. “It turns out the longer people live, the less they fear dying.” If the number of older adults who need nursing home care is decreasing, and if we’re actually happier the older we get, why do so many of us fear aging?

What does ageism look like? Ageism is discrimination and stereotyping based on age. So, those widely held opinions that most older adults need to get shipped off to a nursing home? Or all older adults are depressed because they’re frail and sick and going to die soon? All are stereotyping associated with ageism. “All these prejudices pit us against each other to maintain the status

quo,” notes Applewhite. “Why should aging well mean struggling to look and move like younger versions of ourselves? It’s embarrassing to be called out as older until we quit being embarrassed about it.”

We all participate in ageist behaviors While you probably aren’t participating in outwardly ageist behavior, you probably have thought about or done a few of these things: (1) Rejected a new haircut or a relationship because it wasn’t “age appropriate” (2) Grumbled about “entitled millennials”(3) Hung around with people your own age at a social event “For adults there’s no such thing [as age appropriate]. A lot of these behaviors are ageist. We all do them,” said Applewhite.

Ways to help stop ageism In fact, says Applewhite, it’s something to be celebrated. After all, we all do it. “People with more positive feelings about aging walk faster, they do better on memory tests, they heal quicker and they live longer,” she says. But even if aging is not to be feared, the fear around it still exists. What can you do as an older adult to combat ageism?

Speak up: If you experience ageism or see someone else experience it, say something. Don't allow someone to talk down to you — calling you “sweetie” or “honey” — and don't allow yourself or someone you know to be pushed around or discounted because of your age. You are just as able as your younger counterparts.

Acknowledge it: You might think ageism only occurs when someone is passed over for a job because of their age or when someone gets talked down to at a restaurant or while shopping. But the truth is, ageism is everywhere. And like the examples above, we and those we know are probably doing subtle things to perpetuate ageism.

If you can, avoid those examples above, try not to refer to yourself or your friends as “old people” or “golden oldies.” Remember, your age doesn't define you so don't let it.

Stay active: Keep doing the things you love. Stay up-to-date on news and trends that interest you.

Embrace diversity: Try not to lump all people of a certain age together. A 65-year-old is vastly different from an 85-year-old. They have different wants, needs and abilities. Keep in mind that as you age, you get happier, have more diverse interests and discover more about what makes you who you are.

Be a role model: You know age doesn't define you. Show the world what aging looks like by living your best life.

POSTERIOR VITREOUS DETACHMENT—THE AGING EVENT NO ONE'S HEARD OF

Commonly Referred to as “floaters.”

By Meta Calder, OLLI member

I remember the day I suddenly saw all those floaters and flashes. Alarmed, and remembering friends who had suffered from retinal detachment, I immediately made an appointment with an optometrist at Capital Health Plan who then sent me to an ophthalmologist at Southern Retinal Associates to make sure everything was alright.

Upon examination I was assured that this was normal, everything was OK, and I went on my way. However later, when I went in for a pre-examination as a first step for cataract surgery, it was discovered that I had something called " macular puckering" and

off I was sent for another ophthalmology examination to verify the diagnosis.

Following cataract removal, the macular puckering seemed to get worse, and the large floaters crossing my vision became a constant irritation affecting my ability to read except in really good light. Eye surgery was recommended.

After much soul searching, I went forward with the surgery. [You're going to stick pins in my eyeball and drain out all the fluid!?! Really!?!] Learning on the day of the surgery that the procedure I was about to undergo (and which I later discovered was called a "vitrectomy") was very common, used for

many eye conditions, and that the outpatient clinic successfully did 6 to 8 of them a day, I relaxed. I also started to put all the pieces together. Googling my symptoms, I discovered that the puckering was the result of an underlying condition called "posterior vitreous detachment."

Turns out posterior vitreous detachment (PVD), is an eye event that almost everyone experiences as they age. Most people get PVD at age 50 or older, and it's very common after age 80. It happens to men and women equally. If you're nearsighted, have had cataract surgery, or had some kind of trauma to your eyes, you could be at higher risk for PVD. Over time, the vitreous gel that fills the eye becomes liquid and condenses (shrinks) due to age and normal wear and tear. For much of your life, it's right up against your retina located at the back of the eye cavity, near your optic nerve. The retina is the light-sensing nerve layer that helps you focus on the images you see. Tiny fibers attach the gel to your retina. As the gel shrinks, it no longer fills the whole volume of the eye's vitreous cavity (which remains the same size during adulthood) and separates from the retina.

Mild floaters in the vision are normal, but a sudden increase in floaters is often the first symptom of PVD. As the vitreous material shrinks, it becomes stringy. These strands can cast tiny shadows on the retina. These shadows are floaters. If you try to look at them, they seem to quickly dart out of the way. Floaters are most bothersome when near the center of vision and less annoying when they settle to the side of the vision. They may appear like cobwebs, dust, or a swarm of insects — or in the shape of a circle or oval, called a Weiss ring. During PVD, floaters are often accompanied by flashes, which are most noticeable in dark surroundings. Most

patients experience floaters and flashes during the first few weeks of a PVD, but in some cases the symptoms are hardly noticeable.

Over the next 1 to 3 months, the vitreous gel further condenses, and the sides of the gel separate from the retina at the back of the eye until the PVD is complete and the vitreous gel is attached to the retina only at the vitreous base - up nearer the lens of the eye.

Clear vitreous fluid fills the space between the condensed vitreous gel and the retina. Patients who experience PVD in only one eye will often experience PVD in the other eye within 1 year. Vision problems caused by PVD usually get better over a few weeks.

In fact, many people don't have any symptoms, so they may never know they had it. About 85% of patients who experience PVD never develop complications and in most cases, the flashes and floaters subside within 3 months. But for others, such as myself, PVD can cause health issues, such as vitreous hemorrhage, retinal detachment, epiretinal membrane (macular puckering), or macular hole. In such cases, the flashes and floaters may be accompanied by decreased or distorted vision or can lead to permanent vision loss. It is important to see a doctor if you develop new floaters or flashes or experience distorted vision.

Now you know about posterior vitreous detachment too and, if you are one of those who suddenly noticed an onslaught of floaters, remember that day.

Reviewed by Dr. Robert Steinmetz,
Ophthalmologist
Southern Vitreoretinal Associates,
Tallahassee

GET MOVING: SITTING TIME LINKED TO HIGHER RISK OF DEATH FROM ALL CAUSES

A study from the American Cancer Society finds a link between long periods of leisure time sitting and a higher risk of death from all causes, including 14 of the 22 causes of death measured by the study. This includes 8 of the 10 most common causes of death. The study was published online June 29, 2018 in the American Journal of Epidemiology.

Previous studies have linked prolonged sitting time with death from cancer, heart disease, and “all other causes.” To examine the other causes of death in detail, the new study used data from the American Cancer Society CPS-II Nutrition Cohort, which included 127,554 people who had no major chronic diseases when they joined the group, and who were followed for 21 years. During the study’s follow-up time, 48,784 people died.

Risks of death among those who reported the most leisure time sitting were higher from cancer, coronary heart disease, stroke, diabetes, kidney disease, suicide, lung disease, liver disease, peptic ulcer and other digestive disease, Parkinson’s disease, Alzheimer’s disease, nervous disorders, and musculoskeletal disorders.

Screen time has increased sitting time

As technology has advanced during the last few decades, sitting time has increased. One Australian study estimated that 90% of non-work time was spent sitting, and more than half of that sitting time was spent on the computer or watching TV. Previous studies have shown that prolonged sitting time raises risk of death even for people who get healthy

amounts of moderate or vigorous physical activity when they aren’t sitting.

In the American Cancer Society study, prolonged leisure time sitting was associated with a 19% higher rate of death from all causes combined compared to sitting less than 3 hours per day. The study defined prolonged sitting time as 6 or more hours a day.

According to lead author Alpa Patel, PhD, American Cancer Society Sr Scientific Director, Epidemiology Research, “While we still have yet to understand how to quantify what a safe amount of sitting time may be, what is clear is that individuals should take any opportunity to take breaks in sitting time and cut down sitting time to whatever degree they can.”

Possible explanations

The study was not designed to find out why excess sitting time is linked to an increased risk of death. However, the authors offer several possible explanations.

- Time spent sitting might be taking the place of activity, including light levels of daily activity. Health effects of light levels of activity have not been studied.
- Time spent sitting may be associated with other unhealthy activities; for example, snacking while watching TV.
- Time spent sitting has a negative impact on the body’s hormone levels and the way the immune system works. This may be a factor in the link between sitting time and mortality.

Tips for getting more movement into your day

According to Patel, the study adds to the collective body of evidence that reducing sitting time is important for a healthy lifestyle. She said, “Advances in technology

- Standing and folding laundry while watching TV
- Doing a few simple exercises or stretches while you watch
- Getting up and doing something instead of skipping through TV commercial breaks
- Taking short breaks at work to walk around your office building
- Walking up the escalator or stairs instead of taking the elevator
- * Using the farthest bathroom from your desk.

have encouraged us to be sedentary, so we need to be mindful about finding ways to move.” Patel says adding a few minutes of activity to break up sitting time throughout the day at work and during leisure time can add up. She suggests:

The American Cancer Society recommends adults get at least 150 minutes of moderate-intensity or 75 minutes of vigorous-intensity activity each week (or a combination), preferably spread throughout the week.

For kids, the recommendation is at least 60 minutes of moderate- or vigorous-intensity activity each day, with vigorous-intensity activity occurring at least three days each week.

WHY YOUR PERCEPTION OF ‘OLD’ CHANGES AS YOU AGE

Bruce Horovitz, Kaiser Health News, 2019

My perception of old age is inextricably linked to my grandmother. When I was a kid, I thought this 65-year-old, white-haired woman whose entire body wobbled when she walked was very old. Now that I’m 66, my personal perception – or perhaps, misperception – of old age has changed. I suspect I’ve got lots of company.

Many of us are convinced that while everyone else is aging, that person we see in the mirror every morning is magically aging at a somehow slower pace. The age confusion can start early. A 2018 Michigan State University online study of respondents ages

10 to 89 revealed that most think middle age begins at 30 – and that old age begins at, OMG, 50.

Another study, from the University of Zurich published in 2011, determined that older adults often try to avoid the negative stereotypes of their age group by distancing themselves from their age group. Yet another study, from Columbia University, in 2018 found considerable evidence that when confronted with negative age stereotypes, older adults tend to distance and disassociate themselves from this negative stereotype.

Call it what you will, but this gray-haired group of boomers and beyond – myself included – is having a hard time accepting the realities of aging. Yes, we are mortal, but we're not quite believing it. The great irony, say experts on aging, is that this flirtation with a slightly different reality from our aging peers may, in fact, be a healthy thing.

“Baby boomers are redefining what aging is and what old age looks like,” said Jennifer Ailshire, assistant professor at the Leonard Davis School of Gerontology at the University of Southern California. William Chopik, assistant professor of psychology and principal investigator of the Michigan State study, knows this better than most of us. “People – particularly older people — usually say they feel younger than they are,” said Chopik. “People who report feeling younger actually tend to live longer and healthier lives — and they don't tend to have as much of a pattern of decline.”

In most cases, people say they feel about 20% younger than they really are, according to the Michigan State study of more than 500,000 people. This keeps ramping up as folks age, he said. Beginning at age 50, he said, many say they feel about 10 years younger.

The fact we're generally living longer than we used to also plays a role, experts say. “As our life spans get longer, so does our view of old age,” said Chopik. “How we view ourselves changes constantly as we age.”

For me, it's been more like a sentence to self-motivate. At age 66, when I look in the mirror, I may not see a 46-year-old staring back at me — but, perhaps, someone closer to 56. Maybe it's because I'm so lousy at sitting still. I'm out walking my dog at 6:15 a.m., lifting weights in the gym by 7:30 a.m. and swimming laps in the pool before 9 a.m.

five days a week. Welcome to my nonstop world that seems to somehow keep old age partially in check.

While it might not sound like your world, consider Theresa Paulus — the mother-in-law of USC's Ailshire — who seems to be constantly in motion, too.

The 63-year-old Tempe, Ariz., resident's morning bicycle workout, alone, makes my daily workout schedule look lame. She's typically up by 5 a.m. and quickly out on her Trek bike for the next hour — or more — on a 10-mile-long excursion. If the weather is lousy, she'll instead find her way to the spinning class at the local gym before heading to the weight room.

“I honestly feel like I'm in my 40s,” said, the full-time nursing home caregiver, who three years ago at age 60, got her degree in health service management from Arizona State University. “I haven't slowed down one bit from the exercise routine I did at 40.”

In fact, she may have upped it a bit. Not the distance, mind you, but every day she tries to challenge herself a bit. “Each time I ask myself, can I get there and back just a little bit faster?” she said. She may be passing it along to the next generation, too, as she has taught her two granddaughters how to ride bikes.

Paulus' ability to rebound from injuries is legendary among friends and family. On a recent walking tour of Ireland's Cliffs of Moher, she twisted her ankle but continued days of walking — only to discover when she got home that she'd broken her foot.

Back in 1969, while training on her bike, she was hit by a car — but escaped without so much as one broken bone. And after a moped accident in 2010, she crushed her leg and was

advised by her doctor that she'd always walk with a limp — and a cane. She proved the doctor wrong and was soon racing bikes again.

Her daughter-in-law, USC's Ailshire, isn't surprised by any of this. After all, she said, some baby boomers' bodies can perform as if they are between two to 15 years younger than their actual age.

Paola Sebastiani, 55, is living proof. She barely qualifies as a baby boomer, but when asked how old she feels, the professor of biostatistics at Boston University said she doesn't even feel 40.

Perhaps that's because she walks 2 miles (in Birkenstock sandals, no less) to and from work every weekday. Or maybe it's because she's adamant about eating no red meat and tries to eat avocado daily. Or perhaps it's her who-gives-a-flip attitude. "My mom would have never worn jeans at my age — but I

wear them all the time," she said. Her point: Folks with a positive attitude toward aging often age more slowly.

Which brings us back to my dear grandmother. The most familiar smell from her kitchen was that of the fried chicken crackling on the front burner every Friday evening. I can't remember even once seeing her exercise. Action, in her world, was a game of cards. And, as was all too common in her day, she thought that her smoking habit helped her to relax.

Is it any wonder she was old at 65?

So, at 66, I've given up on most fried foods. I've never smoked. I don't sit around much playing cards or watching TV. And all the time I spent walking our dog, lifting weights and swimming laps this morning I view as an invisible shield that protects me from looking into the mirror and seeing an old man staring back. Instead, I still see me.

THE FOUR VACCINES OLDER ADULTS NEED

Why you should get them and how well they work

By Hallie Levine

Consumer Reports 2018

If you skip certain vaccines, you have plenty of company. Research shows that many older adults aren't getting the protection they need.

About 30 percent of people 65 and older skipped their flu shot last year, about two-thirds didn't receive the recommended shingles vaccine, and 43 percent aren't up to date on tetanus shots, according to a 2017 report from the Centers for Disease Control and Prevention.

But these vaccines are important for this age group. "As we get older, our immune system becomes much less robust, which means we're not just more at risk for getting diseases like the flu and shingles but of developing

life-threatening consequences from them," says William Schaffner, M.D., an infectious-disease specialist at Vanderbilt University in Nashville, Tenn.

How Effective Are Vaccines?

The weakening immune system that age brings could also make vaccines somewhat less effective. "Your body doesn't respond with quite as many antibodies as it would if you were younger," Schaffner says.

And no matter what your age, vaccines don't necessarily provide complete protection. Some, such as the tetanus shot, are reported to be 100 percent effective. But the flu shot generally cuts your risk of getting influenza by only about half. The

effectiveness of certain vaccines also wanes over time, which is why boosters are recommended for certain diseases.

Still, “half a loaf of bread is better than none,” Schaffner says. “If you get vaccinated and still get the flu—or other illnesses, like shingles—your illness is probably going to be much milder than it might have been. You’re much less likely to develop a life-threatening complication, much less likely to be admitted to the hospital, and much less likely to die.”

Here, the four shots that all older adults should be up to date on (your doctor might recommend others based on your health and preferences) and smart strategies to help you maximize vaccine effectiveness.

Flu Vaccine

The once-a-year flu vaccine is a must for older adults. Up to 85 percent of seasonal flu-related deaths are for people 65 and older, according to the CDC. And during last year’s severe flu season, older adults made up about 58 percent of people hospitalized for flu. The vaccine typically cuts risk by 40 to 60 percent. But rates can vary year to year depending on how well experts predict which strains will circulate in a given flu season. Last year the shot was only about 40 percent effective.

To improve your chances of escaping the flu, consider a vaccine designed for people 65 and older. According to the CDC, the Fluzone High-Dose vaccine contains four times the amount of antigen in regular flu shots. A 2014 study in the *New England Journal of Medicine* found that older adults who had this shot were 24 percent less likely to catch the flu than those who received a standard shot.

The second such vaccine, Fluvad—designed to elicit a stronger immune system response than the traditional flu shot—has also been shown to offer more protection to seniors.

Flublok Quadrivalent, approved in 2016, appears to be more effective in older adults than the regular flu vaccine as well. Research published in *The New England Journal of Medicine* last June found that people 50 and older who received Flublok were 30 percent less likely to get the flu than those who received the standard vaccine.

Early fall is the ideal time to be vaccinated because flu season usually starts in late October and it takes about two weeks to fully build up immunity. But it’s never too late. “The flu usually peaks in February and then can circulate until April,” Schaffner says.

Pneumococcal Vaccine

Older adults are more likely to develop complications such as pneumonia, blood infections, and meningitis from pneumococcal bacteria, says Kenneth Schmader, M.D., chief of the division of geriatrics at the Duke University School of Medicine. Pneumococcal disease kills about 18,000 adults 65 and older each year.

Two vaccines protect against pneumococcal disease—PCV13 (Pneumovax 13) and PPSV23 (Pneumovax 23). The CDC recommends that all adults 65 and older have both shots, a year apart, with the PCV13 first. It protects about 75 percent of older adults, and PPSV23 shields up to 85 percent of healthy adults from invasive pneumococcal disease.

But only about 18 percent of older adults get both vaccines, according to a study published

in July 2017 in the CDC's Morbidity and Mortality Weekly Report.

If you have diabetes; asthma; chronic lung, heart, kidney, or liver disease; or wear cochlear implants, talk to your doctor about earlier vaccination.

Shingles Vaccine

Shingles, or herpes zoster, occurs when the chickenpox virus—dormant in almost all adults who had chickenpox in childhood—reactivates in later life. The condition often brings a blistering, painful rash.

The blisters usually scab over in seven to 10 days and clear up in two to four weeks. But about 20 to 25 percent of people continue to experience mild to severe nerve pain (postherpetic neuralgia, or PHN) that can linger for months or even years. “That’s the most debilitating part of the disease,” Schaffner explains.

A new shingles vaccine, Shingrix, is now available, and evidence suggests that it works better than the earlier version of the shingles vaccine, Zostavax. According to the CDC, getting the two recommended doses of Shingrix (spaced two to six months apart) is more than 90 percent effective at preventing shingles.

Healthy adults 50 or older should receive Shingrix—even if they already had shingles, and even if they already received Zostavax.

You might have a little difficulty finding Shingrix; high levels of demand have led to shortages. Call ahead to ask if your pharmacy has it in stock—if not, try another store. The CDC's Vaccine Finder tool may help.

Tdap Booster

If you didn't have the Tdap (tetanus, diphtheria, and pertussis) shot—the booster for the childhood DTaP vaccine—as a teen or an adult, get one now.

Making sure you've had the Tdap booster is especially important if you'll be spending time around an infant. Pertussis, or whooping cough, is a highly contagious bacterial respiratory-tract infection that can be life-threatening for children younger than 12 months.

And though it can cause significant symptoms in adults, some might have the illness without knowing it. Note that it takes about two weeks for the whooping cough part of the vaccine to become fully effective.

“Even if you were vaccinated against pertussis as a child, protection wanes over time,” Schmader says. In fact, though the Tdap vaccine appears to safeguard most people from tetanus and diphtheria, and about 80 percent from pertussis, a 2016 Canadian study found that pertussis protection fell to 41 percent after eight years.

If you had the Tdap 10 or more years ago, get a booster against tetanus and diphtheria, called Td. You can get the Tdap only once, unless you're pregnant.

SIX VERY HEALTHY FOODS YOU SHOULD BE EATING REGULARLY

BY JESSICA MIGALA
MYFITNESSPAL, 201P

Most trendy diets share a list of off-limit foods, which can range from beans and dairy to whole grains and sugar. However, there are some foods considered so nutritious they make practically any approved list. Thinking in those terms can be more helpful for reaching health goals. “Thinking about what you can’t have feels restrictive. But shifting your perspective to what you can add in is a healthier mindset,” says Jill Keene, a registered dietitian nutritionist and certified personal trainer in New York City.

Google anything from keto to Paleo to Mediterranean and the biggest thing you’ll see is a push to focus on fresh, whole foods. “The big-three types of foods that can make up most any diet are lean proteins, healthy fats and vegetables,” says Keene. Here are six go-to foods you’ll find on any approved list:

The **Mediterranean diet** is rich in leafy greens (spinach, kale, chard, dandelion greens) and for good reason: Not only are they a non-starchy veggie (ideal for very low-carb diets), but they’re full of important vitamins and minerals like vitamins C, A and K, as well as iron. Try them in a breakfast skillet, smoothie or meal-worthy salad. Whether you’re on a high-, moderate- or low-fat plan, nutritionists advise honing in on healthy fats.

Avocado fits the bill, as it’s rich in monounsaturated fats (MUFAs) that are associated with cardiovascular health, says Keene. Plus, it’s a surprisingly rich source of GI-friendly fiber. One half of the fruit packs

nearly seven grams. Try using it in everything from chicken salad to sweet potato toast and even brownies.

Salmon is one of the top sources of omega-3’s, fatty acids that benefit the heart by slowing accumulation of plaque that gums up arteries and better lipid profiles and blood pressure, according to the American Heart Association. The AHA recommends consuming two fatty-fish meals per week.

People who regularly consume **nuts** are less likely to gain weight over a five-year period or be overweight or obese, according to a study in the European Journal of Nutrition.

Walnuts are particularly special because they contain a type of omega-3 called alpha-linoleic acid (ALA). They’re also a good way to eat more fiber and are rich in magnesium, which plays a key role in more than 300 biochemical reactions in the body.

In the era of coconut everything, **olive oil** is an important staple in some of the top-ranked diets including DASH and the Mediterranean diet. Incorporating it in your diet as one of your go-to healthy fats pays off: Research shows people who do so may lose weight and reduce belly fat.

As a source of natural sugar, people remain wary that eating **berries** may cause weight gain. The reality is that, in moderation, fruit — especially berries — can add a source of satisfying, subtle sweetness to any eating plan. Raspberries, blackberries, blueberries and strawberries are rich in disease-fighting polyphenols and are lower-carb.

FOR A SUCCESSFUL LONG-RANGE WEIGHT LOSS PROGRAM, COMBINE DIET AND EXERCISE

U.S. News & World Report

By K. Aleisha Fetters, Contributor 2017

Do You Really Need to Exercise to Lose Weight?

CAN YOU lose weight without exercising? Plenty of sweat-averse dieters out there sure hope so. And who hasn't heard that whole "weight loss is 80 percent diet, 20 percent exercise" stat?

Experts anything but agree on the actual split, but it's hard to ignore the fact that when it comes to losing weight – and keeping it off – diet and exercise have two totally different roles.

Cutting Calories

To lose weight, you need to burn more calories per day than you eat. Called a caloric deficit, it's the bottom line of weight loss, and there are two ways to make it happen: Burn more calories or eat fewer calories. Exercise obviously belongs to the "burn more" camp, while dieting is all about lowering your caloric intake.

However, it's far easier to achieve that caloric deficit through dieting compared to exercising. Think of it this way: Healthy weight loss generally involves a caloric deficit of about 500 calories per day. To achieve that, you could either run for roughly five miles or switch out your morning blended coffee drink for a cup of straight, black coffee. The choice is obvious.

"In general, with high-volume physical activity of at least four to five hours per week, combined with no change in your nutrition and no anti-obesity medications, you can expect exercise to add about 3 kilograms or

6.6 pounds of weight loss over the course of four months," explains Dr. Deborah Bade Horn, president of the Obesity Medicine Association and medical director of the Center for Obesity Medicine and Metabolic Performance at the University of Texas. "For most individuals, this would be a discouraging weight-loss path."

The Surprising Perks of High-Intensity Interval Training Building Muscle

While in the grand scheme of things, the caloric burn you get from exercise isn't huge, exercise is still critical to making sure that the weight you lose is from fat, not muscle, and

helping you keep the fat off over the long term.

"Based on current clinical data, individuals that are dieting without exercising to lose weight will lose 3 to 4 pounds of muscle for every 10 pounds of weight that they lose," Bade Horne says. "In other words, 30 to 40 percent of the weight that they lose is healthy, strong lean muscle instead of fat."

While less than ideal on its face, once you consider the implications of losing muscle, you realize it's a complete assault to your weight-loss progress. Muscle is the single greatest modifiable factor in setting your basal metabolic rate, or the number of calories you burn each day just to stay alive, and research out of Columbia University shows that losing just 10 percent of your body

weight results in a significantly lower basal metabolic rate.

This makes continuing to lose weight, as well as keeping it off once you reach your goal, an enormous biological challenge. (Another study found that, to maintain their weight loss, former contestants on "The Biggest Loser" had to eat as many as 800 fewer calories per day compared to same-sized people who had never lost weight.)

"Fortunately, exercise, particularly resistance exercise, adds muscle to help counteract any potential drop in metabolism," explains Dr. Micah J. Eimer, co-director of the sports cardiology program at the Northwestern Medicine Bluhm Cardiovascular Institute. For example, in one 2016 study published in

The American Journal of Clinical Nutrition, men who combined a low-calorie, high-protein diet with high-intensity resistance training were able to effectively burn 10.56 pounds of fat while gaining 2.64 pounds of lean muscle.

More Weight-Loss Benefits of Exercise

When it comes to losing weight, the benefits of exercise extend far beyond keeping your muscle mass and metabolism up. In fact, research published in the American Journal of Physiology-Regulatory, Integrative and Comparative Physiology shows that exercise may also prevent weight regain by preventing the formation of fat cells, encouraging the body to burn calories from fat and keeping cravings at bay.

According to Eimer, exercising triggers the release of powerful satiety hormones. What's more, people who exercise tend to have an easier time following their healthy eating plans compared to sedentary adults. After all, in one New England Journal of Medicine study of 50 overweight adults, following a low-cal diet for just 10 weeks significantly lowered their levels of leptin, a hormone that helps you feel full, for up to a year later. Exercise can help mediate the damage.

Diet and Exercise: Your Best Strategy for Losing Weight and Keeping It Off

For weight loss that lasts, combine diet and exercise. Focus on achieving a mild caloric deficit (around 500 calories) through your eating plan. And then make your workouts all about building metabolism-boosting muscle, recommends Dr. Spencer Nadolsky, a board-certified family and bariatric physician, diplomate of the American Board of Obesity Medicine and author of "The Fat Loss Prescription."

To keep track of your progress and make sure that you are losing fat, not muscle (learn how to gain muscle while losing weight), Bade Horne advises ditching the regular bodyweight scale for one that also measures body-fat percentage. If, as your weight declines, you see your body fat percentage staying the same or, even better, decreasing, you know that you're on the right track for lasting weight loss.

OLLI TIMES EXTRA: A PICTORAL PANORAMA OF IRELAND

(Editor's Note: In August, OLLI travelers visited Ireland. Because the Emerald Isle is such a beautiful country, and because OLLI member Randy Soule took such beautiful pictures of the journey, it was decided that the OLLI TIMES would publish some of Randy's pictures. Special thanks to Randy

for allowing us to use his dramatic photos.

If you can guess exactly where in Ireland these pictures were taken, give yourself a gold star.)











A BIT OF GAELIC DANCING



AND A GOOD TIME WAS HAD BY ALL!!



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