

Boston Seniority

Elderly Commission

Thomas M. Menino, Mayor of Boston



FREE

**2012
Volume 36
Issue 6**

June

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Check out our website
www.cityofboston.gov/elderly

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Boston Seniority

Volume 36 Number 6

Published by the City of Boston

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Printed by MacDonald & Evans

Boston Seniority is supported in part by The Executive Office of Elder Affairs.

Mayor's Spotlight

Mayor Menino Launches Boston Moves for Health, Million Pound Challenge

Mayor Thomas M. Menino and Barbara Ferrer, executive director of the Boston Public Health Commission, launched Boston Moves for Health, an ambitious campaign to improve the health and fitness of the city of Boston. Mayor Menino challenged Bostonians to collectively lose one million pounds and walk 10 million miles as part of the initiative.

Joined by the campaign's lead sponsors Blue Cross Blue Shield, Harvard Pilgrim Health Care, and Partners HealthCare, the Mayor unveiled www.BostonMovesForHealth.org. This free online resource allows participants to set health goals, record their individual progress, find community resources to help keep them on track, connect with friends and neighbors to share tips and workout routines, and view the city's progress toward meeting the challenge goals.

"Together, we have come a long way toward making Boston a healthier city, and Boston Moves for Health is the next step forward," said Mayor Menino.

Boston Moves for Health aims to make significant progress in reducing the obesity rate in the city. The initiative has four main goals:

1. Increase opportunities for adults to be more physically active, eat healthy foods,

and reduce their consumption of sugary drinks;

2. Increase opportunities for children and youth in childcare settings, schools, and out-of-school-time programs to be physically active and to be offered water with meals and snacks;

3. Increase the number of workplaces that promote and provide healthy beverages and offer employees opportunities to attain/maintain a healthy weight; and

4. Increase the number of neighborhood residents participating in programs that promote healthy eating and/or active living.

At the kickoff event, Dr. Ferrer presented an action plan to promote healthy weight and healthy communities in Boston. The plan's objectives focus on increasing physical activity and healthy eating for people of all ages.

In the coming months, the initiative will expand to include a corporate challenge; community events such as yoga on City Hall Plaza and zumba at community centers; physical activity challenges at schools; walking groups in every neighborhood; and other ways to get involved throughout the City.

Join the Mayor's the challenge at www.BostonMovesForHealth.org, and share your healthy tips, favorite workout routines, and successes at [Facebook.com/HealthyBoston](https://www.facebook.com/HealthyBoston) and on Twitter [@HealthyBoston](https://twitter.com/HealthyBoston) [#BostonMoves](https://twitter.com/HealthyBoston).



Planting with Pride for Our Lost Service Men & Women

An Honor to Attend By: Kelley Stout, Boston RSVP Director (617-635-1794)

We all know that the Memorial Day holiday was celebrated on Monday, May 28th this year, but do you know what took place on Wednesday, May 23rd on the Boston Common? The Massachusetts Military Heroes Fund hosted a community building event near the Soldiers and Sailors Monument. Their goal was to plant 33,000 flags to mark the 150th anniversary of the Civil War. Each flag planted represented a brave service member from Massachusetts that lost his or her life defending our country since the Civil War. It was an event that brought tears to people's eyes and put pride in their hearts.

The Boston RSVP and Boston Senior Companion programs from the Elderly Commission were lucky enough to be able to participate in the event. Sixteen RSVP volunteers and two Senior Companion volunteers joined four staff members in planting flags. Together we planted approximately 1,200 flags in the "sea of flags." Some of the volunteers that came to plant the flags are veterans themselves. It was a great event that brought together so many different people to do something meaningful and close to their hearts. We met a young woman from Cape Cod that recently lost her husband in action, and got to thank her for his service, and for his and her ultimate sacrifice for our great country.

We were also joined by Armando Silva and Jose Rios of the New Bostonians Office, The City of Boston Veterans' Services

Commissioner Francisco Urena, and Veterans Affairs Secretary Coleman Nee. It was a wonderful collaboration of joy and honor to be able to participate in such an event for our service men & women.

The hammers, screw drivers, and gardening gloves required for this event were generously donated by The Home Depot in West Roxbury and Ace Hardware in Charlestown. Many thanks to Damien and Wyatt for your help with supplying the tools we needed.

The weather was absolutely beautiful for the event. It was sunny and warm, and the backdrop was gorgeous. We were positioned next to the hillside and in front of the merry-go-round to plant our section. Everyone that passed had stopped and asked about the event and how to get involved. The Massachusetts Military Heroes Fund staff & volunteers were extremely supportive to our group; making sure we had supplies and water and knew what we needed to do to get started. This has been my favorite service activity so far this year and I plan on volunteering for this event every year. And of course, I will be inviting all of my volunteers to participate with me. For anyone interested in learning more about the event, please visit the Massachusetts Military Heroes Fund website at: <http://www.massmilitaryheroes.org/community-building-events>. If you would like to volunteer on Team Boston RSVP/SCP next year, just let me know!!



Above photo - Left to right:

Francisco Urena - City of Boston Veterans' Services Commissioner, Lourdes Lopez - Staff assistant to the Green Initiative, Anita Jones - RSVP volunteer, Marcia Colbert - SCP volunteer, Dorothy Scott - SCP volunteer, Kelley Stout - Boston RSVP director, John Jepsen - RSVP volunteer, Mary Jepsen - RSVP volunteer, Gloria Rice-Stuart - Boston SCP director, John K. Murphy - RSVP volunteer, Coleman Nee - Veterans Affairs Secretary



The Moral Imperative to Treat Pain

By: Myra Christopher

Last summer, the Institute of Medicine (IOM) issued a groundbreaking report, *“Relieving Pain in America: A Blueprint for Transforming Prevention, Care, Education and Research.”* The publication and recommendations are based on the underlying principle that effective pain management is a moral imperative, a professional responsibility, and the duty of people in the healing professions. For the first time, a national report considered the broad and devastating effect that pain can have on a person, beyond physical hurt. It also looked at the impact of undertreated pain on our society as a public health issue. The report calls on doctors and nurses to provide better care for the more than 100 million American adults who live with persistent pain.

Pain can be complex, and as unique as the person dealing with it. The way that a person perceives their pain, its’ intensity and treatment effectiveness are related to physical, mental and social factors, including:

1. Biological – such as age, gender, genetics and other diseases involved;
2. Psychological – a person with pain

may have anxiety, fear, guilt, anger, depression or concerns that they are helpless to manage it; and,

3. Social – do family, friends and caregivers support a person with pain or criticize? Are there cultural or religious beliefs that lead someone with pain to think that they are weak? Do they have access to medical care?

A recent survey from the American Pain Foundation found that 96% of people 55 and older who report issues with pain have sought the help of a healthcare provider to deal with it. Yet, many of them do not get relief. They are told by healthcare professionals there is nothing they can do or worse yet that there is nothing wrong – “it’s all in your head.” This is not true. In the vast majority of circumstances pain can be successfully managed. It takes time and commitment on the part of healthcare providers and patients, but pain can be controlled. When looking at the factors that affect how a person experiences pain, it becomes more apparent that there is rarely a single treatment option that will help you “get back on your feet.” Unfortunately, seniors also face many of the barriers to good pain care evaluated by the IOM, including:

Provider attitudes and training – A number of barriers to effective pain care involve the attitudes and training

of doctors, nurses and pharmacists. Many people, including healthcare professionals, believe that pain is a part of aging which is not true. Pain is often associated with diseases and injuries that may be more prevalent among those of us who are aging, but there is no evidence that aging itself “causes” pain. Most people in pain are cared for by primary care physicians who unfortunately receive little training and have little experience with best practices in pain management. In addition, medicine today focuses on physical causes of pain and cures. Doctors and nurses are not usually trained to look at other issues that may be contributing to pain like conditions in our homes -- stairs that have to be climbed or the lack of a shower or grab rails in a bathroom.

Insurance coverage – Costly visits to providers, expensive medications, and procedural interventions like steroids shots in your back or joints—all common types of treatment for pain—are not readily obtained by even by those of us covered by Medicare. Lack of insurance coverage and co-pays may contribute to disparities in care. Insurance often does not cover integrative or comprehensive approaches that represent the best care for people with the most difficult pain problems.

Cultural attitudes of patients - Myths and stereotypes about chronic pain, people

who live with chronic pain and common treatments are prevalent. Seniors often feel like pain is just a normal part of aging. Perhaps their doctor has tried to address the problem, and they want to be a “good patient” and not report the failure. Or sometimes people are told “it’s all in their head” when nothing shows up on an X-ray or MRI. Patients and their families are often afraid that the person in pain will become addicted to medications. They may fear the pain signals a serious problem they do not want to acknowledge, or they may not want to distract the clinician from treating an underlying condition. Unfortunately, some people even believe that pain is punishment for something they have done wrong in their past.

Regulatory barriers – state laws that regulate the practice of doctors, nurses and pharmacists and try to limit drug abuse can unintendedly reduce access to pain treatments, including prescription medication, for those who desperately need them. People who live with pain are often left to suffer as a result of policies and laws designed to severely restrict access to pain medication in an effort to reduce addiction. Instead of fostering an environment where pain is addressed from a comprehensive, patient-centered standpoint, in some cases pain policy has contributed to the acceptance by providers and patients that it’s OK to let pain go untreated.

Considering the complexities of chronic pain, the IOM report recommends an “integrated” or comprehensive approach to pain management. When seniors and their caregivers are deciding together how pain should be treated, they should consider an approach that is informed by evidence, is patient-centered, and focuses on the whole person—mind, body, spirit, in the context of a person’s environment. People looking for solutions might be hoping for a “quick fix,” but managing pain that has existed for a long time usually takes time and commitment by both the healthcare professional and the patient. It is rare that just a pill or one treatment of any kind will stop pain. It may take pills and shots but it may also take diet and exercise. Spouses, children and caregivers all play a role in a person’s pain care and can be important advocates for helping to manage pain. However, it’s also important to recognize that family issues, feelings of isolation and anxiety might be contributing factors to making pain worse.

The IOM committee calls upon government agencies, healthcare providers, healthcare professional associations, educators, the insurance industry and patient advocacy groups to lead the transformation in the way that pain is addressed in our country.

But you have to be part of changing the way we treat pain too. An important part of the recommendations focus on empowering patients to self-manage their pain, with the help of properly educated physicians and healthcare providers. By recognizing that pain is not just a normal part of aging and knowing that it’s worth evaluating other areas that might be making your pain worse, you can start taking an active role in your pain care today. Three of the most important things you can do are to remain hopeful, keep moving, and don’t give up. Although many believe chronic pain cannot be cured, it can be managed.

To learn more about pain, aging, and ways to talk openly about healthcare decisions, visit the Center for Practical Bioethics at www.practicalbioethics.org.

Myra J. Christopher was a Committee Member on the Institute of Medicine’s “Relieving Pain in America” report. Ms. Christopher holds the Kathleen M. Foley Chair in Pain and Palliative Care at the Center for Practical Bioethics. Prior to Dec. 2011, Ms. Christopher was President and CEO of the Center for Practical Bioethics since its inception in 1985.



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Diabetes

Everyone has or knows someone who has diabetes. In fact, millions of Americans have diabetes.

I have listed several facts about diabetes that all should know.

1. Diabetes is a chronic (lifelong) disease. There are high levels of sugar in the blood.
2. Insulin is a hormone produced by the pancreas to control blood sugar.
3. Diabetes can be caused by too little insulin, resistance to insulin, or both.
4. A sugar (glucose), enters the blood stream, the pancreas makes insulin.
5. This insulin moves glucose from the blood stream into muscle, fat and liver cells, where it is used as fuel.
6. People with diabetes have high blood sugar because their body cannot move sugar into fat, liver and muscle cells to be stored for energy. Why? Their pancreas does not make enough insulin, their cells do not respond to insulin normally, or both.

Diabetes is always a big topic when talking with friends. Why? Many Americans have diabetes and there are many more who don't know they have it.

One interesting topic is where to store insulin. The American Diabetes Association recommends:

1. Insulin is often stored in the refrigerator. It may be more painful if injected cold.
2. Insulin stored at room temperature will last about one month.
3. Never keep insulin in extremely hot or cold temperatures. This means in your car or freezer.
4. Always check expiration dates. Discard all insulin that has expired.
5. Don't use insulin that has formed crystals or clumps and inspect bottle before using.

I, too, am a diabetic so I am adding some tips that may help you.

1. I take insulin twice a day. I suggest that you leave the insulin bottle on your kitchen table or counter or bedside table so you cannot miss seeing it.
2. I carry a bottle of insulin with 2 syringes in a sandwich bag and my daily dose written on a card. In an emergency, the EMTs will see the insulin and know you are a diabetic and your correct dose.
3. I carry a list of my meds, updated medical history and names of all my doctors with me. It saves a lot of time when you see a new doctor because they always ask about your medications, doctors' names, medical history, etc.
4. I carry a large purse but you could do this on a card placed in your jacket or purse.

Diabetes is a very serious disease. Your doctor will do a fasting blood sugar to see what your blood sugar is and if you might be on the road for diabetes. Diabetes that is treated early has the best outcomes for all patients.

A very Happy Father's Day to the fathers, uncles, brothers, grandfathers and the kind men who have made our lives worthwhile.

Thank you!

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Tula Mahl
at 617-635-1922

Pirates & Patriots Hit Boston's Waterfront



occupied America's largest port city plying their trade – legal and illegal – as Boston marched toward independence. Fabulous stories of Boston's 18th century men and women who lived and worked here and the actions they took to separate from the most powerful country in the world, and the importance of their acts and contributions to Boston's preeminent position pre- and post-Revolution are told during this exciting tour.

Many who sailed under the Black Flag during the Golden Age of Piracy hailed from Boston or passed through its harbor. The Freedom Trail® Foundation offers an unparalleled opportunity to experience these swashbuckling stories along Boston's bustling waterfront on its newest Pirates & Patriots Tour. Led by one of Boston's Freedom Trail Players® in full period garb, this 90 minute tour takes you deep inside the murky depths of piracy and privateering through the 18th century and more.

The Pirates & Patriots Tour, the newest Freedom Trail Foundation tour, steps off on May 1 at 11:30 a.m. daily from the ArtsBoston Booth at Faneuil Hall and concludes at the Boston Tea Party ShipsSM & Museum Visitor Information Center. Better still, beginning June 1, more chances to explore the world of piracy will be offered daily at 2:00 p.m. from the Boston Tea Party ShipsSM & Museum Visitor Information Center bringing one back to Faneuil Hall to explore the Freedom Trail.

Landlubbers and jack tars, pirates and privateers, Tories and revolutionaries, impressed sailors and smugglers all

All Freedom Trail Foundation walking tours with 18th century costumed guides, including the Pirates & Patriots Tour, are affordably priced at \$13 for adults, \$11 for seniors/students, and \$7 for children. Tickets for the new tour are available at the Boston Common Visitor Information Center, ArtsBoston Booth at Faneuil Hall, and Boston Tea Party ShipsSM & Museum Visitor Information Center (Congress & Pearl Streets), or discounted online at TheFreedomTrail.org. Private and group tour outings are also available, and the tour is great for birthday parties.

For more Freedom Trail information and to buy tickets, interesting books, a downloadable audio tour, or other items, and learn about special Freedom Trail hotel packages, please call 617. 357.8300 or visit TheFreedomTrail.org.



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**Corrections from the
May 2012 Issue**

Page 10:

Health, Wealthy & Wyse

Once you have registered, your phone number will be included on future lists unless you request to have it removed. No need to re-register.

To register for the Massachusetts Do Not Call list, you may call 1-866-231-2255

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AIER Economics for Everyone

The correct number to call to receive a free copy (limited supply) of "If Something Should Happen" is 1-888-528-1216 ext 0.



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ACROSS

- 1. *Usually second half of "Law & Order"
- 6. Nada
- 9. Do, re or mi
- 13. All plants and animals
- 14. Dental group
- 15. _____ of Honor
- 16. On the move
- 17. Scottish hero Rob
- 18. Egg-shaped object
- 19. *What survivors and losers have in common
- 21. Often considered wise
- 23. Makes feathers stick
- 24. "The ____ of Life," movie
- 25. Pipe material
- 28. Forbidden
- 30. Crushed grain of various cereals
- 35. *What "CSI" does on CBS on Wed. nights
- 37. Original Cohiba producer
- 39. It's delayed in summer
- 40. Christmas season
- 41. *In search of an apprentice
- 43. Italian money
- 44. Remote in manner
- 46. Attorney's bargain
- 47. Disparaging remark
- 48. Praying insect
- 50. Not in favor of
- 52. Printing unit, pl.
- 53. Scoff
- 55. *They know drama?
- 57. *What Aguilera judges
- 59. *One show has 60 of these
- 63. Laughing predator
- 65. *Everybody used to love this actor
- 67. Visual or picture
- 68. Related to oats
- 69. Overnight lodging
- 70. Water wheel
- 71. "Odyssey," e.g.
- 72. Approximated landing time
- 73. *He was the dad in "Family Ties"

DOWN

- 1. Type of ski lift
- 2. "____ and shine!"
- 3. Tiny amount
- 4. Like Tower of Pisa
- 5. Cowboy's rope catcher
- 6. "Not a" or "never a"
- 7. *Bachelor's last words?
- 8. Extra shirt, e.g.

- 9. *Actress Campbell, formerly of "Party of Five"
- 10. Smell
- 11. Mai ____
- 12. Old age, archaic
- 15. *Like the Pritchetts
- 20. Parcel of land
- 22. Drumstick
- 24. Shaped like a tube
- 25. *Flight's glory days
- 26. Oscar nominee _____ Davis
- 27. Famous king of Thebes
- 29. Stomach reflex
- 31. Rembrandt's medium
- 32. Nimble
- 33. Monotonous hum
- 34. *They salsa and rumba
- 36. One-armed bandit
- 38. Prayer's end

- 42. Singer LaBelle
- 45. Fiji native
- 49. Part of a min.
- 51. The 9th in baseball, e.g.
- 54. Fear-inspiring
- 56. Cancer symptom
- 57. Obama's right
- 58. Singles
- 59. Asian starling
- 60. Tropical edible root
- 61. Knight's chest plate
- 62. Neptune's domains
- 63. Gardening tool
- 64. High-pitched bark
- 66. Marching insect

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The Seating Arrangement of Destiny

By: Brittany Capozzi

We have the capability to immortalize with just a pen and paper; memories, relationships and experiences can outlive us when it comes to the written word. As a young female writer, clicking away on the keyboard, I realize that to create a timeline of one's life and list facts about that individual would only create the shell of the person. So, my responsibility as a granddaughter is not to create a eulogy in my grandmother's honor but to connect the dots of strength and destiny that run in my family.

I recall standing by my grandmother when she was just hours away from her last breath. Realizing that I didn't have a certain story about us in mind, an image of my grandmother's kitchen table appeared. Around the table sat my grandmother, father, and I. The picture re-surfaced over and over until I finally took her hand and whispered, "Dad was sent to you for a reason. He gave you 90 years that no other son or daughter could have given you." Little did I know that the image and the string of sentences were the seeds needed to create this piece.

The order of the three of us around the table holds significance. My father,

seated in the center, is the fulcrum of the three generations. For instance, when it comes to my grandmother to his left, he has been the answer to the question, *how does one keep a life going?* For years my father put his life on hold to keep her alive and healthy. No matter how exhausted he became with day to day issues and monotonous pleas not to be placed in a nursing home, he was able to keep her in her own familiar surroundings of her home, which was the key factor of her longevity. The people and personal things that she knew and loved kept her spirits high. He turned any and all worries into bouts of laughter. At age 90 she needed to be reminded of where safety and unconditional love had been found: in her family and in her faith.

Sitting on my father's right side, I realized he was the answer to my question, *how does one foster a life of ambitions?* Without realizing it, he passed on his perpetual strength to me needed while taking care of my grandmother. In the hospital I learned to be unafraid of saying good-bye because I recognized that our strength and values as a family continues. Not only have I observed the differences between relationships but also the fact that the three generations at the table faced challenges at birth.

Being a premature baby in 1921, everyone assumed my grandmother

would be buried with her own grandmother in a matter of days. But her will to live was stronger than external assumptions; she outlived everyone who doubted the possibility. Without the will to live she would not have had the opportunity to give my father the family he deserved. He spent his first two years in an orphanage in Italy and by adopting him, my grandparents saved his life. It didn't matter what his name was prior to coming to this country because he used Capozzi with respect and held an authentic identity behind it, mirroring the morals of his parents.

From one birth to another, my grandmother and father both found the strongest part of themselves, and their courage. From knowing about their hardships to dealing with other surprises life had to offer, they've shown me that I,

too, have carried the same strength since my first day. For someone who suffered a stroke at 24 hours of age, I surprised myself by re-introducing my mind to my body. After spending years with dormant energy and assuming I could not do certain tasks, I have come across my hidden love for dance therapy movement.

Two parallel stages of life were placed on either side of my father; my grandmother as a dependent, holding on to love and safety, and the independent person that I have grown into-questioning each path that I walk. Though my grandmother and I were in opposite points in our lives, my father tied us all together. As far as I can tell, we are here to share the casual and the mundane, such as sitting at the table with family, to find significance in our world.

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Healthy Recipes

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Melissa Carlson, MS, RD

Chimichurri Chicken

Ingredients:

- 4 skinless, boneless chicken breast halves
- 3 tablespoons cooking oil
- 12 ounces fresh young green beans
- 3/4 cup packed Italian parsley
- 1 tablespoon cider vinegar
- 2 cloves garlic, halved
- 1/4 teaspoon crushed red pepper
- 1 lemon, peel and juice

Directions:

1. Brush chicken with 1 tablespoon of the oil; sprinkle 1/4 teaspoon each salt and black pepper. On charcoal grill, cook chicken on rack directly over medium coals for 12 to 15 minutes or until no longer pink, turning once halfway through grilling time.

2. Place beans in microwave-safe 1-1/2-quart dish. Add 1 tablespoon water. Cover with vented plastic wrap. Cook on high 3 minutes; drain.

3. For Chimichurri sauce, in small food processor bowl combine parsley, the remaining oil, the vinegar, garlic, 1/4 teaspoon salt, and red pepper. Process

until nearly smooth. Serve chicken and beans topped with Chimichurri sauce, lemon peel, and juice. Makes 4 servings.

Serves: 4

Calories - 281 per serving

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Boston Fire Department on
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Gorgonzola and Walnut Stuffed Apples

Ingredients:

- 4 medium cooking apples, such as Granny Smith or Jonathan
- 1/4 cup crumbled Gorgonzola, Stilton, or Roquefort cheese
- 1/4 cup chopped walnuts
- 2 tablespoons butter or margarine, melted
- 4 teaspoons honey

Directions:

1. Core apples almost to the bottom, leaving approximately 1/2 inch. Remove 1 inch of peel from the top of each apple.
2. In a small bowl stir together Gorgonzola, walnuts, and melted butter.

Fill each cored apple three-fourths full. Drizzle 1 teaspoon honey into each. Add remaining filling to apples. Place apples in a disposable foil pan.

3. For a charcoal grill, arrange medium-hot coals around edge of grill. Test for medium heat over center of grill. Place apples on rack in the center of the grill. Cover; grill for 30 to 40 minutes or until tender. (For a gas grill, preheat grill. Reduce heat to medium. Adjust grill for indirect grilling. Place apples on grill rack. Grill as above.)

4. Drizzle each serving with additional honey; serve warm.

Serves: 4

Calorie - 226 per serving



The Elderly Commission

Seniors are you eligible?

Food Stamp requirements have changed for most senior applications. The Department of Transitional Assistance no longer counts -

- * savings or retirement accounts
- * your car * your home
- * or other assets

For more information or to complete an application contact:

Lorna Pleas at 617-635-4335

Need a Ride?

Senior Shuttle

617-635-3000

Scheduling Available:

Monday - Friday

8:00 a.m. - 4:00 p.m.

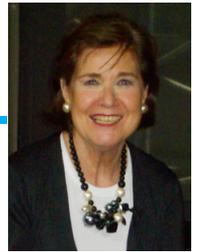
Please give at least 2 business days advanced notice. Priority is given to seniors scheduling rides for medical appointments.

(Some restrictions may apply)

JACK AND JILL

“Don’t Retire, Inspire”

By: Augusta Alban



Rummaging in an old friend’s attic in Maine last weekend, I came across a well-worn book entitled “Jack & Jill”. The copyright was 1880. The author was one of my favorites, Louisa May Alcott. Across from the title page was a pen and ink drawing of a snowy day with lots of happy children sledding down a hill. This followed:

**Jack & Jill went up the hill
To coast with fun and laughter
Jack fell down and broke his crown,
and Jill came tumbling after.**

All this time we thought Jack was working hard to get water for Jill. The rhyme states he went up the hill so he could coast down with fun and laughter. Is this the beginning of what we know now as Product Placement? We were led to believe Jill needed to drink water, so up Jack went. Could this have been the beginning of the saying “eight glasses of water every day,” or was it suggesting kids should do more useful chores?

Oh let us count the ways we have been misled on a daily basis. Movies, TV, the Web, and Facebook all contribute to persuading us into believing some manufacturer’s product is just what we need to be happy, healthy, and wise. Without it, we are doomed to a life of depredation.

No one carried around bottles of water until we saw a beautiful young blond actress named Sally schlepping a huge bottle of water and hanging around with an actor named Harry. For sure that was product placement.

Believe it or not, the media is back on the water thing, but in reverse. Now we are told that we don’t need to drink eight glasses of the stuff: we get enough water by eating those fruits and veggies. What is going on, I wonder. Have we made the water so dirty and undrinkable, that we are running out of clean water? Have the water companies bottled all the good stuff? How is it for generation after generation we had to drink water and now we don’t need it any longer?

The media is so rushed to get “THE NEWS” as they call it, no one checks on facts. They don’t care to. The bottom line is that movies, TV, Twitter, and the web are all in a rush to SELL THEIR PRODUCTS. They don’t care what is good for me.

The more research I did the more confused I got. Then I remembered a lovely old man, it was my pleasure to work with many years ago.

One of my many careers was that of head

buyer for a national men's wholesale clothing company. My office was with the "big boys": well-dressed, full-of-themselves men, drinking lots of coffee and puffing on cigars and cigarettes. My only escape from the smoke and **bull** was the huge warehouse just outside the corporate offices. Deep in the center of this warehouse was a secure locked section called "the cage". Due to shoplifting, there were lots of restricted areas. Happily, the rules did not apply to me, so most all my breaks were taken in the quite peaceful, restricted secure cage.

In the very center of the cage was a small clearing with something that could be used as a desk. It held a little office lamp with a rounded dark green glass shade on a brass base. One morning, sitting on a huge shipping carton I suddenly felt I wasn't alone any longer. A soft calm voice asked, "Is your day going well?" "Lovely," I replied. "Do I know you?" "I am the oldest employee of this company," he said. I could believe him: he had to be well over 80. He was lean, stood straight, was well-dressed, had clear blue eyes, a full head of white hair, and the biggest and best smile I have ever seen.

As the weeks passed, the cage took on new meaning. Our conversations became more and more interesting and delightful. He had outlived four wives; he had many children, grandchildren, and great grandchildren, so many I can't

recall the number now. His personal history was filled with all that life has to offer us. And the events of his life were like so many others: losses, wins, fun, challenges, loves, joy, good times and laughter. His life was not unlike most people's lives that had lived a long run: but this man really sparkled. I looked forward each day to sitting on the rickety old stools and drinking tea.

I thought I knew him well enough to ask his age and his secret to a long life. "Oh well," he said, "That is easy. I love life and I love living it. I drank whiskey from morning to night, used to go out dancing every night until two or three; I loved woman and lots of them. After the fourth wife died, I decided to be **healthy**. I decided to give up the dancing and drinking." When was that? I asked. "Well over 20 years ago now," he said. I had to ask him: How old are you? "Almost 100. Well, time to go," he said. "See you in the morning!" On the way back to my office, I stopped. "Twenty years ago -- twenty years ago!!" I said. The old man was past 80 when he decided to be healthy. Who knows really?

Maybe one of the secrets is to "love life and really live it" and maybe another is to think like Julia.

Julia Child said eat everything -- just in moderation!

The Best 15 Minutes: Making the Most of Your Doctor's Appointment

By: Juergen Bludau, Chief of Clinical Geriatric Services at Brigham and Women's Hospital

Some changes in our aging body cannot be reversed no matter how much we would like to believe the promises we hear on television or read in magazines and newspapers. The best way to accept this fact of life is to become an informed partner in your health care.

First, learn as much as you can about your medical condition. However, choose your sources carefully. The amount of information on the Internet is overwhelming, and some of it is not based on facts.

Second, ask questions. Do not be afraid to ask your physician if you do not understand something. Medicine is often very complex and difficult to understand. Third, if you are concerned about the plan of care, go for a second opinion. Sometimes, speaking to another physician can help you better understand your options and alleviate your concerns. In addition to being well informed, you

must be able to speak openly with your physician for a successful partnership. Open communication requires trust and honesty from you and your doctor. In my practice at Brigham and Women's Hospital, I appreciate it when patients tell me what they can and are willing to do, and what they can accept and live with. Ask for straight answers to your questions: "Is my condition treatable? Is there anything I should be doing differently? Why do I need this medication? Are my concerns justified and my expectations reasonable?"

Typically, the time you have with your physician during an office visit is limited. Therefore, being prepared can help you "stretch" the time. Plus, you should remember that during this time, your doctor needs to ask certain questions, as well as conduct a physical exam.

Being organized and writing down your questions before your visit can help you and your doctor make the most of the time. Prioritize by listing your most pressing questions and concerns first.

During every office visit, make sure to

mention if you have seen any specialists, if you have had any changes in your medications, and if you have noticed any functional changes. Ask your doctor if you need any health screening exams or tests. If you are accompanied by a caregiver, ask him or her to voice any concerns or changes about your caregiving needs. Encourage your caregiver to be honest about his or her own needs and limitations in providing care and support.

Make sure to bring copies of any laboratory results or reports from

specialists you have seen since your last visit.

Most importantly, listen carefully to any explanations and recommendations. Taking notes during your visit can help you remember your doctor's advice so you can follow the instructions. You can also ask for written instructions for later reference. Bringing along a relative or friend is helpful because "four ears hear better than two." And again, do not be afraid to ask if you do not understand something.

Don't Retire, Inspire!

Hosted by Augusta Alban

Tune in to find out how Boston seniors are INSPIRED everyday

On BNN channel 9 on Fridays at 2:30 p.m. and repeated on Saturdays at 11:00 a.m.

On Boston City TV, Comcast channel A-24 and RCN channel 16, Tuesdays and Saturdays at 5:00 p.m.

Collaboration between Mayor Thomas M. Menino, the Elderly Commission & Suffolk University

Solution to Crossword on Page 14

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Caregiving Preparedness Paving the Way for an Unknown Journey

By: Jody Gastfriend, LICSW
VP of Care Management
Care.com

You know it will happen one day but it's surprising just the same to find that you – the child are now responsible for caring for your parent as he/she ages. Whether it's the onset of illness, an accident or simply the passage of time, the moment comes and many of us don't know where to begin. You are not alone. According to a 2009 study by the National Alliance for Caregiving and AARP, more than 65 million people in the U.S. provide care for a chronically ill, disabled or aging family member or friend. Making informed decisions about the care of a loved one often requires more time and knowledge than many caregivers have. But with the right help and guidance, the journey can be made easier for all involved.

At Care.com, an online resource connecting families and caregivers for senior care, child care, special needs care, pet care, housekeeping and more, we know that taking a proactive approach to caregiving can open up more options, and, should the time come, mitigate a potential family crisis.

Though the adage of caregiving is to “expect the unexpected,” there *are* steps

you can take to prepare more effectively:

- **Have conversations early and often.** It is important to understand your parents' preferences as they age and not make assumptions about the type of care they may or may not accept.
- **Respect your parents' autonomy.** It is better to start a conversation with an empathic statement such as, “I am worried about you because...” rather than an admonition. “If you continue to live alone, you may fall, break your hip, and end up in a nursing home.”
- **Learn about the different types of care and payment options.** Many caregivers panic when they realize Medicare won't pay for long-term care in a nursing home, which on average costs \$75,000 per year.
- **Resistance is common.** Try to introduce support incrementally; for example, a caregiver once a week to clean up, help out, or drive a parent somewhere so it feels comfortable and unobtrusive.
- **Seek out expert help.** The assistance of a social worker, geriatric care manager, financial advisor or elder law attorney can go a long way in helping guide you through the legal, financial, and emotional challenges of caregiving.

- **Take care of yourself.** As simple as it sounds, many caregivers skip this important step and burn themselves out. You cannot care for others if you neglect your own needs.

By proactively addressing the logistical tasks of caregiving, you set the stage to enjoy time with your parents as they age and require help. It will be comforting to know that as a result of planning ahead, you were better able to provide the best care possible and more effectively navigate the caregiving journey.



Basketball



Seniors over age 60 who are interested in playing Basketball are welcome to join us every Thursday from 10:30 a.m. to 12:30 p.m. at the Roslindale Community Ctr, 6 Cummings Hwy

You can just shoot around or you can participate in 3 on 3 Half Court games.

For more information call Ed Conway at (617)327-6831 or e-mail him at edconway14@yahoo.com

Ernie Deeb Day

By: John H. O'Neill III



Ernie Deeb Day was celebrated on June 6th. The Boston City Council honored Deeb some years ago. Ernie, as he is known, served bravely in World War II, and then went on to have a long career in the Boston Fire Department.

The ladder truck, years ago, was in two sections, first the main part, and then another unit operated by a firefighter known as the “tiller.” Deeb worked as the “tiller” on Ladder 6, before joining other companies. A firefighter is usually connected with an “Engine Company” or a “Ladder Company.”

Although he is retired, Ernie Deeb has been managing a fire safety program for seniors. The Fire Safety Program is financed by the Boston Fire Department. “Time marches on” is a phrase Ernie uses while managing his program. He has an office in the Elderly Commission in City Hall.

**Information on Debtors’
rights under the
Attorney Generals’ Regulations
940 C.M.R. 7.00–7.10.**

Submitted by: Wynn Gerhard and Peter Beebe
from the Greater Boston Legal Services,
Elder Law Unit.

On March 1, 2012, the Attorney Generals Office, headed by AG Martha Coakley, amended Massachusetts’ Debt Collection Regulation in order to protect debtors from modern predatory collection practices.

If you have outstanding debt, some of the changes that you should be aware of are as follows:

I. Contact with Creditors Regarding Your Debt

1. When a creditor contacts you, he or she **MUST** provide you with the creditors **real business or company name**. A creditor **MAY NOT** use a made-up name or any other name that cannot properly identify the Creditor. Also, an individual who contacts you on behalf of a creditor **MUST** use **his or her real name or a personal identifier** that is unique to that individual.

2. A creditor is now **ALLOWED** to **call you** or **text message** you on your mobile phone in order to collect an outstanding debt. However, the creditor is **NOT**

ALLOWED to charge you for this call or for any text message(s) sent to you. Also, a creditor is **NOT ALLOWED** to charge you for any data fees or any other similar services associated with the creditor’s attempt to collect the debt.

3. Although a creditor is allowed to contact you at your home on your home phone, mobile phone or by text message, a creditor **MAY NOT** do so more than **two times in any seven day period**. A creditor may also contact you outside your home but **MAY NOT** do so more than **two times in any 30-day period**.

II. The Collection of Time Barred Debt

1. A creditor **MAY NOT** collect or attempt to collect a debt that is not enforceable because the time limit for enforcement has expired, without providing you with a **DISCLOSURE**. A debt that cannot be enforced because of time limits is called “**time barred**.”

- A. The disclosure **MUST** provide you with the following information:
 - o (1) You have a right **against enforcement** of the debt; and
 - o (2) The possibility that the debt **may become enforceable** if you:
 - (a) **make a payment;**
 - (b) **agree to a payment plan;** or
 - (c) **waive any of your rights regarding the debt,** including

your right to trial.

III. The Validation of Your Debt

1. If a creditor contacts you regarding the collection of an outstanding debt, that creditor **MUST** provide you with **validation information** regarding the debt in question within **five business days**. The validation information **MUST** include the following:

- A. The **amount of debt** you have; and
- B. The **name and address** of the creditor.
- C. A creditor **MUST** also provide you with written notice that the debt will be **assumed valid if you do not dispute the debt within 30 days**. This notice must also inform you that if you dispute the debt within 30 days, the creditor **MUST** provide you with the following items relating to your debt:
 - o (1) **all documents;**
 - o (2) **all ledgers;**
 - o (3) **all account cards/statements;**
 - o (4) **the name of original creditor;**
 - o (5) **all records;** and
 - o (5) **all judgments associated with the debt.**
- D. If the creditor **DOES NOT** possess these items, the creditor **MUST STOP** all collection proceedings until the creditor

attempts to locate and send you these items.

IV. More Information

For more information regarding your rights as a debtor under the amendment to 940 C.M.R. 7.00-7.10, contact the Elder, Health & Disability Unit at Greater Boston Legal Services by phone at 1 866-778-0939 or at our offices located at 197 Friend Street, Boston, MA 02114.

Do you have knee pain?

Interested in taking part in a Research Study?

We offer a **Strength Training Program** for persons with knee arthritis at **Boston University**

To take part in this research study you must....

- have **knee arthritis**
- be 55 years or older
- be willing to participate in a **Strength Training Class** 2 x per week for 6 weeks
- attend 4 visits at **Sargent college**
- continue to **Strength Train** at home for 2 years

For more information call
617-353-2725
ENACT - BOOST STUDY



Stipend available

The Unknown Precancerous Skin Condition that Affects 58 Million Americans

Education Lags Around Potentially Pre-Cancerous Condition Most Common In Older Adults

When you are 20 years old and you look in the mirror, chances are you are seeing a face with clear skin. But as you age, your skin may start showing the appearance of some pigmentation commonly known as “sunspots” that will probably increase in number as you age. What most people don’t know is that some sun spots could be diagnosed as actinic keratosis, a skin condition that affects 58 million Americans and has the potential to progress to squamous cell carcinoma (SCC), the second most common skin cancer.

“Education around melanoma and other skin cancers has been very strong, but actinic keratosis remains relatively unknown,” said Dr. Ellen Marmur, Associate Professor and the Chief of Dermatologic and Cosmetic Surgery at The Mount Sinai Medical Center in New York City. “Despite the fact that most AKs remain benign, approximately 5-10 percent develop into squamous cell carcinoma within an average of two years. Since there is no way to know ahead of time which ones will become cancerous, it is very important to seek a dermatologist’s care. Frequent

skin examinations are the key to early detection and prevention.”

Dr. Ellen Marmur is working to create awareness of actinic keratosis by promoting the Spot Signs of AK campaign, which is a disease awareness campaign developed by DUSA Pharmaceuticals to educate the public about AKs. The campaign website, www.SpotSignsofAK.com, contains valuable information on the condition, what to look for, how to find a dermatologist as well as information on the range of treatment options available. AKs are rough-textured, dry, scaly patches on the skin that can range in color and vary in size. They are the result of years of cumulative sun damage and most often appear on parts of the body that are most exposed to sunlight such as the face, scalp, ears, neck, hands and arms. AKs are most common in older adults who have spent a lot of time in the sun during their lives. However, even routine activities such as walking the dog or grabbing your mail can lead to sun damage. People who develop AKs typically will not develop just one. The condition will present in numerous “spots” or will continue to present intermittently over time.

“People who get AKs typically do not get just one,” said Dr. Marmur. “The years of sun damage affect entire regions of the skin. This is just further reason for adults who think they have AKs to speak

with their dermatologist. And if you don't have a dermatologist, find one."

For more info on AKs or to find a dermatologist near you, visit www.SpotSignsofAK.com.

Fuchs A., Marmur E. The Kinetics of Skin Cancer: Progression of Actinic Keratosis to Squamous Cell Carcinoma. *Dermatol Surg.* 2007;33;1099-1101.

Notice from the Boston Election Department

Dear Community Members:

Please be advised that the Boston Election Department's team of annual listing (City Census) officers will be visiting each neighborhood throughout the next few weeks to update the annual listing of residents. Every City and Town in the Commonwealth of Massachusetts is mandated by law to conduct an annual listing. Information obtained during the listing process is forwarded to the Office of the Jury Commissioner for use in compiling jury pools, and is also used as an indicator of the population changes in the City. The information gathered also helps to ensure the accuracy and the integrity of the voting list.

The Listing Officers will go door-to-door in neighborhoods, and are easily identified by their City-issued photo-IDs and bright orange vests. They will confirm basic information for each address: name, occupation, and birth date of each occupant age 17 and older. If there are new residents at the address, the Listing Officer will obtain the appropriate information, and will also drop off voter registration forms for those who may want to register to vote.

Thank you for your time, and please do not hesitate to contact the Boston Election Department at 617-635-3767 should you have any further questions or concerns.

If you have not responded to the Annual Listing yet, please visit this website to update your information: http://www.cityofboston.gov/elections/annual_listing.asp.

Sincerely,
Boston Election Department

La Primavera Restaurant in Roslindale

A special thank you to Eleni, Kosta and Katie



A CULTURE OF CARING

**BECAUSE SPIRIT AND PASSION
HAVE NO AGE LIMIT**

The MCCA is proud to support the
18th Annual Greater Boston Senior Games.



James E. Rooney
Executive Director



Salute to Seniors in Dorchester





\$5
annual
membership!

Get Your Hubway Membership!

What is It?

Hubway allows you to access hundreds of bicycles at stations across Boston. Hubway is a simple, low cost and reliable way to get around the City!

Join

Boston Public Health Commission is providing subsidized annual memberships for low income Boston residents at \$5.00/year, which includes a free helmet. Get your subsidy code by calling 1-617-918-4458, and then redeem your code when you register at TheHubway.com or by calling 1-855-(4 HUBWAY).

Take

Use your key to access a bike at any New Balance Hubway station. To find a station, look for a Boston Bikes Map at www.bostonbikes.org or go to www.thehubway.com.

Ride

Don't forget to bring your helmet. included. This is plenty of time to:

- Run an errand
- Connect to the T
- Get some exercise
- Ride for fun!

The first 60 minutes of every trip are

Return

Return the bike to any New Balance Hubway station within the free time period. Repeat as many times as you like.

\$5 Subsidized Annual Membership*

(Includes A Free Helmet.)

Open to all Low Income Boston Residents.*

1. Get your subsidized membership code and free helmet by calling 1-617-918-4458, or 1-617-534-5690 for non English speakers.
2. For safety and riding lessons contact Boston Bikes 1-617-918-4456

*You must be 16 or older to apply.

Note: Do NOT order your helmet through Hubway! A free helmet will be sent to you once you redeem your subsidized code.

Subsidized Annual Membership: \$5*

*for low income residents only, includes free helmet.

Usage Fees (per trip)

0–30 minutes NO CHARGE (+30 minutes free grace period)
61–90 minutes \$1.50 additional
91–120 minutes \$4.50 additional
Each additional 30 minutes \$6.00

Your cost equals your one time only membership fee, plus any usage fees incurred when riding over 60 minutes.

www.facebook.com/Hubway

Twitter: @Hubway

TheHubway.com



Thomas M. Menino, Mayor
City of Boston

