## Adequate Medicaid payments can bring high-quality health care

Like clockwork each year, Roberta Hawkins, the state's best-known consumer advocate for quality nursing care and the state's nursing facility industry, came to Smith Hill, calling on the General Assembly to adequately fund long-term care.

While representing different constituencies, both Hawkins and the nursing facility industry were on the same page regarding this policy issue. Both groups strongly urged the Rhode Island General Assembly to adequately fund the state's Medicaid program. For its Medicaid dollars, the Rhode Island Department of Human Services got 24-hour nursing care; three meals per day with dietary supplements; other care services like grooming, personal care, bathing, and assistance with eating; medical supplies, such as beds and wheelchairs; social services and activi-

Some years were better than others, especially last year. Responding to a serious statewide nursing assistant shortage, Rhode Island lawmakers gave an additional \$9 million to pay for nursing facility direct care staff. However, the Rhode Island Health Care Association said that those funds did not cover the spiraling costs of operating a facility.

Liability insurance has doubled, energy costs have risen by approximately 25 percent and



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Providence-based facilities have been hit with tax increases, with some facilities being assessed close to \$100,000, noted the largest nursing facility trade group.

Now, a recently released national study supports nursing facility and consumer concerns, that the Rhode Island Medicaid program has not paid the "real" cost of providing care to Medicaid patients.

According to an independent analysis of the nation's Medicaid program by the accounting firm BDO Seidman, the Ocean State's Medicaid program underfunds its nursing facility industry by more than \$25 million annually, or about \$10.04 per patient day.

According to the national

study, most states fail to adequately account for escalating Medicaid costs. They do this by using cost inflators that are not reflective of actual nursing facility cost increases and by using extremely outdated data.

For instance, Rhode Island uses data reflecting 1991 costs in setting rates for most nursing facilities.

"The most disturbing finding of this study is that the state is reimbursing seniors' long-term care for substantially less than the acknowledged cost of that care," says Alfred Santos, RIHCA's executive vice president. "Medicaid pays just slightly more than \$4 per hour per patient — less than most people pay a teen-age babysitter," Santos charges.

Adds Hugh Hall, administrator of the Cherry Hill Manor, the cost of care in his facility is higher than most because of the acuity of his residents. Being underpaid by Medicaid by \$40 dollars per day significantly impacts the operation of his Johnston-based, 172-bed skilled nursing facility, Hall says, noting that it forces the facility to look for other sources of payment to compensate for the state's shortfall.

Hall called for a national commitment to adequately pay for care provided to the elderly and the younger subacute care population coming into nursing facilities "In Rhode Island, we're working to educate the General Assembly so they understand the shortfall of the current Medicaid system," he said, specifically noting the impact of not keeping up with annual cost changes affecting nursing facilities and not recognizing more immediately the capital costs required to maintain a physical plant.

Roberta Hawkins, executive director of the Alliance for Better Long-Term Care and the state's ombudsman, brings the Medicaid payment issue down to a personal level: "How would any person like to have their salary based on 1991 costs?"

"As a society, all of us are responsible for the care being provided to nursing facility residents. If we don't provide the money to provide the best of care, we are partially responsible for that care not being provided," Hawkins says.

"While we are demanding the highest quality of care to be delivered in Rhode Island facilities, we are not ensuring that the facility is being paid adequately to reach the quality that we are demanding from them," Hawkins says.

"While there may be areas where a facility can save money, it should certainly not come from a facility's budget to ensure appropriate staffing levels or to pay for qualified nursing staff.

"Nursing facilities are between

a rock and a hard shell because they cannot recruit staff because of low wages that result from the current Medicaid reimbursement system, and they cannot hire additional staff, either."

Lt. Governor Charles J. Fogarty, who heads the state's Long-Term Care Coordinating Council, states that the General Assembly is now working to address the concerns of consumers and providers over the state's inadequate Medicaid reimbursement policy.

Fogarty stated that he serves on a work group, administered by the state's Department of Human Services with members from the House and Senate, to review the state's current reimbursement Principles for Nursing Homes and other components of the long-term care system. The state-level work group has been meeting for several months and came into existence as a result of lawmakers confronting the severe certified nursing assistance shortage in nursing facilities, the Lt. Governor said.

Fogarty states the work group is in the process of considering the hiring of a consultant to ultimately shape state reimbursement policy on Medicaid.

"This issue will not go away," he said, noting the state's growing aging population. "Nursing facility residents are now sicker and require more intensive care than they did 15 or 20 years

ago."

Jane Hayward, director of the state's Department of Human Services, says that her agency recognizes there is a myriad of issues relating to nursing facilities and the long-term care continuum the state must address. The legislatively mandated workgroup is expected to develop proposals on reforming the state's Medicaid system and entire long-term care system by spring, Hayward adds.

When something is broke, fix

No Rhode Island company can survive for long with their revenues not covering their operating costs.

Now it is time for the state to follow this longtime sound business principle when it revamps its ailing Medicaid program. With adequate state funding, Rhode Island regulators can rightfully better demand quality from nursing facilities. With more money in their coffers, facilities had better produce that quality of care, too.

The message should be clear to the nursing facility industry — it's now time to get the bang for the buck.

## Age-beat journalism brings issues affecting seniors to light

Some people ritually read the sports or business sections, browse the stock listings, or even glance at the comics. But a growing number of middle-aged and senior readers are turning to the print or electric media for the latest info on aging.

With the graying of America, news organizations are creating the age beat, where journalists cover various aspects of aging, including lifestyles, health care, politics, ethics and even economics. A newly released national survey published in the San Francisco-based Age Beat, a newsletter disseminated to 700 journalists who cover aging, reflects this growing trend.

Out of 580 non-random surveys sent to Age Beat readers, 152 responses were received. "This was better than a one-infour response rate," stated Paul Kleyman, editor of Aging Today, the newspaper of the American Society on Aging and national coordinator of the Journalist Exchange on Aging. The group was started in 1993

According to Kleyman, the third Age Beat survey findings



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indicated about 60 daily newspapers around the United States have a reporter partly assigned to the coverage of aging; 16 use a full-time reporter to cover the issue; and 24 newspapers use columnists.

Although the findings of three surveys of age-beat reporters reflect a small growth of coverage in aging, it has been steady, Kleyman says. While the age beat does not have economic clout in newsrooms (it is difficult to sell advertising around aging), this steady growth has occurred over the last 10 years, through two economic slumps.

There are more journalists covering the aging beat than last year, according to the the survey report.

The slow-but-steady growth of the age beat in journalism is a result of journalists — and their parents — aging, Kleyman noted. "Some of these aging journalists are finding this a very important area and have taken it upon themselves to begin to cover these issues.

"There were more stories about aging because they are important to people's lives — including those of reporters and editors," Kleyman observed. Thus, more than 90 percent of the survey respondents say that they are now having direct personal experiences with the issues of aging, both personally or in their families, he said.

Many of the respondents became interested in covering aging after they had to help their aging parents find a nursing home or move into a retirement community, Kleyman said. "In doing this, they learned there is a huge amount of information they had to dig out and learn — [information] most of the public is unaware of.

"Today's journalists believe their personal experiences do not affect their objectivity in writing stories," noted Kleyman. Experience gives them both the perspective and information they need, but they still can approach each story with balance, he added.

Kleyman said that journalists on the age beat will care about the issues enough to follow them over a longer period, and they will develop more sources and a greater depth of knowledge and understanding.

"This is why they will write stories that are more technically accurate and factual," he said.

According to the survey, agebeat reporters who are devoting more of their time and energy to covering aging issues are generally veteran reporters. On average, the respondents have more than 20 years of professional experience as journalists.

Ageism occurs even in the news media, said Kleyman.

"There is an attitude that all stories must have focus on medical and health care," he said. "This ageism centers on an attitude that getting older is getting sicker and becoming a burden on your family. This is not so."

The Age Beat survey also found that, consistently across the board, 50 percent of the stories being written by age-beat reporters relate to health and medical issues. The other 50 percent cover different aspects of senior life.

"Aging is about everything that people experience in their older years," said Kleyman. "Stories range from from sex and intimacy to housing, to income issues, to crime, even to issues surrounding older drivers."

Finally, the survey revealed a growing percentage of reporters are getting more requests from their editors and producers to

tie their stories into the babyboomer generation, whose members are in their late 40s to mid-50s. However, about twothirds of the stories written by the respondents covered issues that affected those age 65 and over.

The survey results were clear. "Baby boomers are interesting, but the stories on those 65 and older stories are those that reporters feel must be told to readers," Kleyman said.

Like my colleagues on the age beat, this columnist will continue to bring you to latest, most informative coverage of aging issue you need to know about -stay tuned.

For a copy of the survey findings, send your mailing and e-mail address to: paul@asaging.org.

## AARP: In search of aging baby boomers

With the printing of a fullpage four-colored ad in last week's Newsweek magazine, the American Association of Retired Persons announced to the nation its desire to bring aging baby boomers into its rank and file. The simple ad consists of a picture of a shirtless, lean, aging baby boomer carrying his mudcaked mountain bike.

"Be Yourself," blares the ad's tag line, identifying the 50ish male with gray hair in the ad: "Peter Carlstrom, 51, cyclist, canoeist, an AARP Member."

The nation's largest aging advocacy group, representing 35 million seniors, is gearing up its efforts to recruit the growing number of the nation's baby boomers — born between 1946 to 1964 — into its membership ranks.

Baby boomers don't make compromises, says AARP's membership recruitment ad—"They make choices." Furthermore, the ad states AARP is there to help with fitness programs and to provide information on making healthy choices in a myriad of ways, including eating right and staying fit

AARP's ongoing research reveals the underlying rationale of their new membership drive for the aging baby boomer. Seventy-six million baby boomers can bring a lost of political clout,



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volunteers and membership dues into the Washington, D.C.-based nonprofit group's coffers.

And baby boomers are listening to AARP's invitation to join. According to AARP, about 16 percent of its total 35 million members are from this age group. Meanwhile, over the past two years, boomer-member households have been growing about four percent faster than the total membership.

This month, AARP's membership publication, My Generation, celebrates its first year anniversary. The glossy magazine, reaching 3.8 million Baby Boomer homes, is the first publication to address the many needs and concerns of AARP's baby boomers. Topics range from health and longevity to volunteerism and entertainment, work and family to food and sex. My Generation will be sent to AARP members whose ages range from 50 to 55. Modern Maturity will continue to be distributed to members who are 56 years and older.

Reaching out to baby boomers reflects AARP's constant internal research relating to membership development, notes Kathleen S. Connell, AARP's state director in Rhode Island.

"By studying demographics, AARP realized that aging baby boomers would impact society after age 50 in an unprecedented degree," adds Connell, who notes that their swelling numbers would have a significant impact on state and federal aging policy, specifically, the Medicare, Medicaid and Social Security programs.

Connell states that AARP's Newsweek ad stresses research findings showing that people continue to make choices throughout their lifespan. If by age 50 people haven't learned the elements of eating well, staying healthy, or planning finances for their retirement years, then they'd better start, she says.

"AARP has resources and research information in all of these areas that enable baby boomers to have the best information to make the right choices," she says.

Working closely with the Rhode Island School of Design Museum, AARP-Rhode Island will soon present the artwork of ethnic artists in several communities. Mailings and advertising in local newspapers will promote the evening classes to baby boomers throughout the Ocean State, Connell says.

It is too soon to see how active the baby boomers will become in AARP's 17 chapters throughout the state, Connell says. Will there be a communication gap between the aging baby boomers and AARP's older membership?

"No," says Connell. "The challenge of AARP leadership is getting people to work together. I think we can do that."

However, Connell senses aging baby boomers may choose to contribute differently to AARP committees and initiatives.

Baby boomers tend to be episodic volunteers who tend to come in, do a job and then get out, she says.

Those who are older volunteers tend to do a job for a number of years.

"There is room for different styles in AARP and we will accommodate the way they want to work," she says.

Rachel Filinson, Ph.D., director of Rhode Island College's Gerontology Center, recalls how

her baby boomer colleagues chuckled when they first got their AARP membership applications.

"They don't think it was relevant to their lives," and they "don't take it seriously," she says.

As a baby boomer, Filinson joined AARP for the membership discounts. But, "anytime you use a series of vowels and consonants like AARP, AAA, or AFT (American Federation of Teachers), you tend to get discounts," she says.

Filinson believes that AARP is seeking to attract age 50-plus persons to enlarge their membership base for pitching their products and services and increasing their political clout.

The Rhode Island College gerontologist notes that the nation's largest aging advocacy group knows the baby boomer generation is affluent, which allows them to easily purchase its products and services. They are even more politically active than their parents, she says.

Connell counters this perception by saying AARP is more than just a discount for products, services or meals. AARP seeks to be a leader in social change and global aging initiatives, she says, adding that the organization continues to advocate for the needs of those age 50 and

According to Connell, AARP

is a nonprofit group with a social rather than a marketing mission. This would be attractive for those baby boomers who were involved in the social activism of the 1960s.

My draft notice in 1972 signaled my passage into early adulthood. With AARP's membership solicitation scheduled to arrive in my mailbox in just two years, around my 50th birthday, this piece of bulk-rate mail effectively announces my passage into middle age.

My AARP membership application will not find its way into a circular file. No way. I will gladly write my \$12.50 check for membership dues, not because of the great discounts on hotels, motels, care rentals, online services, airfares, cruises, entertainment, flowers, computer hardware and software, or for the free subscription to My Generation. Rather, my cancelled check will be a personal statement saying that I accept the reality that I am aging gracefully.

For more information about AARP membership, call Rochelle Jennings, AARP office administrator at 401-272-0233.

## General Assembly overhauls assisted-living industry

On Dec. 21, 2001, writer Steven Stycos wrote a scathing newspaper feature, charging that elderly residents in assisted-living facilities faced hazards due to limited regulatory oversight.

Moreover, he stated that there is a lack of public understanding about this level of care. In his investigation of the assisted-living industry, Stycos found rampant problems, including inappropriate resident placement, understaffing, untrained staff and mishandling of medications.

In the meantime, a subcommittee of the state's Long-Term Care Coordinating Council (LTCCC), after working for more than two years to build a consensus, has hammered out a legislative proposal to overhaul Rhode Island's assisted-living licensing law.

Introduced at the request of Lt. Gov. Charles J. Fogarty and thrown into the legislative hopper by state Sen. Elizabeth Roberts and state Rep. Peter Ginaitt, the bills have passed both chambers in the final days of the Rhode Island General Assembly.

At press time, the bills now sit on Gov. Lincoln Almond's desk, awaiting his signature.

With the rapidly changing mission and growth of the Rhode Island assisted-living industry, the LTCCC, aging advocates and state policymakers have moved in the right direction to overhaul the state's assisted-living licensing law. They have watched the



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facilities evolve from small momand-pop-like homes providing basic board and care with minimal supportive services to larger apartment complexes that offer higher levels of personal care in some cases, offering specialized dementia care.

In just over a decade, the number of assisted-living facilities in the Ocean State has increase by 97 percent, from 35 to 69 facilities. Today, 13 of these assisted-living facilities offer special Alzheimer's care units that serve more than 300 residents.

While quickly choosing to veto the state budget, Gov. Almond should act as fast as he can to put his signature on these bills for final passage.

More than a dozen provisions in the companion measures would promote quality, strengthen consumer protection and add new state standards for Alzheimer's care.

If enacted, here's a thumbnail sketch of what would occur:

Residents requiring temporary skilled services for shortterm conditions would be able to remain in the assisted-living facility for up to 21 days or if they are receiving hospice care.

New higher standards would require that the administrator be responsible for ensuring that staffing is sufficient to carry out resident service plans. Additionally, assisted-living facilities would be required to develop and implement quality assurance programs, seek criminal background checks on the administrator and all staff who have direct contact with residents, their funds or belongings. Initial RN assessments of resident care needs, service planning and periodic re-evaluation would also be mandated.

Meanwhile, the law would also require the state's Department of Health to establish regulations for staff qualifications and training, along with creating an assisted-living administrator certification board and a new licensing level for those residences offering dementia care. Assisted-living facilities would be required to meet new standards for activities and recreational programs.

The legislation has teeth, too. Penalties for continued licensing violations would be set at a minimum of \$300 to a maximum of

\$2,000.

The state's Health Department would also be required to create new standards regarding resident contracts, including notification time-frames for increases in fees and payments. The law would also strengthen disclosure requirements of resident contracts to include criteria for occupancy and termination-of-resident agreements, service availability and all financial terms.

In a written statement, Lt. Gov. Fogarty stated, "As residents of assisted living age, their care needs become higher and their need for supportive services increases. It is important that sufficient, adequately trained staff be available to meet their increasing care needs."

Adds Susan Sweet, aging advocate and LTCCC member, the legislation emerged from a consensus of providers and senior advocates as to what higher standards need to be. Sweet believes that the passage of this legislation is a step forward for seniors and their families. "It respects and regulates the assisted-living industry to ensure that all facilities are providing the very best environment for those seniors who need some assistance," she said.

"Many good assisted-living residences already do what is required by this bill, says Sheila Sousa, executive director of the Rhode Island Association of Homes and Services for the

Aging, who stresses that this includes both the low- and highend facilities. Currently there is a wide variety of quality provided by assisted-living facilities, she said.

"Consistent quality really can't emerge until there is a consistent funding stream to support a consistent high level of services."

White the Rhode Island Assisted Living Association supported the new legislated higher standards that assisted-living facilities will be required to meet. the group disagrees with how the bill defines assisted-living residents, said Bob Henry, the group's executive director. He calls for this issue to be revised by the LTCCC. A revised definition of assisted-living resident should be crafted to identify both the amount of health care and related services that can be provided to these residents.

Maureen Maigret, Lt. Gov. Fogarty's policy director and the LTCCC's executive director, noted that once the assisted-living bill is signed into law, the state Health Department will begin its efforts to develop new standards for Alzheimer's care in assisted-living facilities. She is hopeful that a community hearing will be scheduled as early as the beginning of next year to obtain public comment.

With the impending new standards, Maigret, along with the LTCCC and senior advocates, are continuing their efforts to urge Gov. Almond and lawmakers to make funding available to hire additional staff to oversee the regulation of the assisted living industry. Maigret told All About Seniors that at least one additional surveyor who has training as a nurse should be hired.

Once enacted, assisted-living regulators would have tougher standards to enforce, but with more teeth to enforce compliance.

Sadly, long-term care providers' and senior advocates' calls for more inspectors have fallen on deaf ears. With almost a 100 percent growth rate documented for Rhode Island's assisted-living industry over the last decade, there will most certainly be more facilities coming on line. It's popularity and cheaper costs will most certainly fuel this continued consumer demand.

It's now time for the Department of Health to staff up to perform its mandated regulatory duties.

If you strengthen the regulatory standards, then make sure that you have the appropriate staffing levels for oversight. If you don't, you might just have a tragedy waiting to happen.

Herb Weiss is a Pawtucketbased writer covering aging and health care issues. His articles appear weekly in the Pawtucket Times and national publications. He can be reached at hweissri@aol.com

## Coalition calls for aging issues to be debated before elections

Promises made by political candidates must be promises kept.

With the upcoming November elections looming, a \$40,000 grant enables the Gray Panthers of Rhode Island, who are working in collaboration with the Rhode Island Forum on Aging and the Rhode Island Minority Elder Task Force, to ensure that promises made to Ocean State seniors during heated political campaigns will be kept after the candidate wins the election.

Funded by the Rhode Island Foundation, The Agenda/Election 2002 project would allow the Gray Panthers to organize the state's aging advocacy groups and providers, identify priority aging issues, solicit candidate positions through a questionnaire and hold four regional forums to further discuss posi-

With the dust settling after the November elections, this new broad-based coalition would continue its efforts to see reforms passed at the state and national levels.

Seniors would meet with elected state and federal lawmakers to remind them of their written positions on aging issues, prodding them to action in addressing them.

This project is an opportunity for consumers to set the political agenda with issues that are most important to them," said Susan Sweet, an aging advocate and member of the political advocacy effort. "With the participation and information provided by professionals and agencies in the aging network, consumers have the benefit of the experience and support of the entire aging advocacy communi-

The foundation grant was sought by the Gray Panthers after experiencing years of frustration of not seeing state and federal lawmakers address all of the senior advocacy community's

legislative goals. "While some of our modest goals were addressed, there was a lot more that we could have accomplished if senior groups were more effective in talking with [political] candidates," said Richard Bidwell, executive direc-



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tor of the Gray Panthers.

By not paying close attention to the election process, the Pawtucket-based Gray Panthers had missed opportunities to organize the state's elderly groups, he admitted.

Even though the grant was officially announced in April, the Gray Panthers, the Rhode Island Forum on Aging and the Minority Elder Task Force began to plan for the creation of The Senior Agenda/Election 2002 project last January.

We had high expectations that we would get it," Bidwell remembers. And they did.

With funding in hand, more than 15 aging groups gathered last month at Epoch Assisted Living Facility in Providence to identify key aging issues and priorities to solicit positions from state and federal political candidates. Bidwell said gubernatorial and statewide candidates (in contested races) will be asked their views on prescription assistance, affordable home- and community-based care, quality in nursing facilities and how that state can better serve Rhode Island's minority elderly.

As for congressional candidates, the questionnaire will solicit their positions on a number of aging issues currently being debated on Capitol Hill.

Meanwhile, a number of questions will focus on politicians' views on lowering rising pharmaceutical costs, specifically reducing the costs of pharmaceuticals creating an affordable Medicare Drug Benefit or by the federal government buying drugs in bulk to lower prices, or

under the Hatch/Waxman Act.

"It was easy to develop the priority list of state and federal issues," Bidwell told All About Seniors, because The Senior Agenda/Election 2002 project built on the efforts of what the state's senior groups had been working on for the last couple of

In early October, Bidwell said four regional forums will be held. The Democratic and Republican gubernatorial candidates will be invited to a11 forums. Congressional candidates will attend regional meetings in their districts. A panel at the forums will cull more information from the political candidates' positions on aging issues gleaned from filled-out questionnaires.

While there will be some questions from the floor, most of the questions will be asked by the panel," said Bidwell. "We're hoping to get their responses on how they will act on issues not just fluff [responses]."

Candidates' positions on priority aging issues, which will be discussed at these forums, will be provided to local media and to the seniors themselves through written materials. With this information, "seniors will have a better idea as to what each candidate supports," Bidwell noted.

Bidwell said The Senior Agenda/Election 2002 coalition will work hard to get seniors out to vote. When the new sessions of the Rhode Island General Assembly and Congress begin, look for aging advocacy groups to approach elected state and congressional lawmakers to make sure they act upon their previous promises.

For Bidwell, promises made during a political campaign must be kept.

To ensure this, he promised, "We'll be in their faces."

For more information about The Senior Agenda/Election 2002 project, call Richard Bidwell at the Gray Panthers of Rhode Island at 401-725-1122.

## Supporting respite care proposal is a no-brainer

According to the Rhode Island Alzheimer's Association, more than 70 percent of persons with Alzheimer's disease live at home, with 75 percent of their care being provided by family and friends.

The typical caregiver taking care of a person with Alzheimer's is in his or her 70s, has two chronic health problems, and often suffers from stress-related illnesses.

Daily caregiving for persons with Alzheimer's disease or a related disorder is a tough job. It can also be equally challenging for caregivers taking care of a child or adult family member who has chronic physical, developmental, behavioral or emotional disabilities.

According to the National Respite Coalition Task Force, respite, often the most frequently requested family support service, provides caregivers with the temporary relief necessary to sustain their own health or attend to other family members.

Respite care becomes a neces-



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sity when caregivers find themselves in a personal crisis created by job loss or ill health.

So it's not surprising that U.S. Rep. Jim Langevin, D-R.I., has sponsored legislation that would provide respite support for overburdened caregivers by making respite care services available across the lifespan.

The Rhode Island congressman, along with U.S. Reps. Jim Greenwood, R-Pa., Connie Morella, R-Md., Robert Brady, D-Pa., Bill Pascrell, D-N.J. and 35 co-sponsors recently introduced H.R. 5241, a proposal that would provide respite care services for family caregivers of individuals with special needs and promote a coordinated system of accessible respite care.

At press time, the Lifespan Respite Task Force, a broadbased coalition of more than 135 national, state and local groups, is throwing its support behind Langevin's legislative fix.

"Although caregiving is personally rewarding, it can result in substantial emotional and physical strain, as well as severe financial hardship," said Langevin. "Many caregivers are exhausted and become sick or worn down themselves."

Explaining the need for his legislation initiative, Langevin said, "Respite care relieves these family caregivers from daily caretaking tasks on a temporary or longer-term basis."

Additionally, "Caregivers

repeatedly report an unmet need for respite care and often do not know where to go to find information about reputable, available respite care or how to access various services," he said.

H.R. 5241 — the "Lifespan Respite Care Act of 2002" — would authorize \$90.5 million in FY03 for: the creation of lifespan respite programs at the local and state levels, taking into consideration models and best practices; evaluation of such programs; providing planned or emergency respite care services; and creating worker, volunteer, and family training programs.

Caregivers who are family members (including grandparents caring for grandchildren), foster parents or other adults providing ongoing unpaid care for an individual with a special need may access these respite programs.

The introduction of H.R. 5241 follows on the heels of Senate action. Last month, a similar measure (S. 2489) was unanimously passed by the Senate

Health, Education, Labor and Pensions Panel just three months after its introduction.

Jennifer Zeitzer, who serves as associate director for federal policy at the Alzheimer's Association, said, "We support the [House] proposal because it brings important attention to the issue of long-term care and respite care, and the fact that we really need to support family caregivers."

Being introduced in the House before August, congressional recess gives the proposal's advocates the opportunity to build up strong grassroots support for the measure when lawmakers are home visiting their legislative districts, added Zeitzer, who is a member of the National Respite Coalition Task Force.

When lawmakers return from August recess, their attention will be directed to a sputtering economy, a war on terrorism, reining in corporate greed and the politically charged issue of hammering out a bipartisan solution to assisting seniors to pay

for the high-cost pharmaceuticals.

A looming congressional election will further consume their energy and time.

For the sake of 26 million Americans who now care for an adult family member who is chronically ill or disabled, Langevin's legislative proposal to assist caregivers find respite care makes sense.

The Rhode Island congressional delegation must work together to keep Langevin's caregiver proposal from being shoved to the back burner of congressional debate.

For the millions of aging baby boomers who now or in the near future need this type of assistance, Congress will hopefully consider the issue a no-brainer to support and push for passage.

### Despite hardships, caregiving yields unanticipated gifts

More than 30 years ago, "The 36-Hour Day," co-authored by Nancy Mace and Peter V. Rabins, M.D., gave advice to caregivers regarding their time-consuming and often grueling chore of providing care to loved ones with Alzheimer's disease.

The title of this book, which was published in 1981, brought home the point that caregiving is not a 24-hour-a-day job.

For many, it's a 36-hour-a-day job that can result in declining health, job loss, increased stress and burnout.

But a newly published book, "The Gifts of Caregiving," reveals the silver lining behind the dark storm clouds of caregiving.

This is the fourth book written by award-winning independent radio producer, author and public speaker Connie Goldman, who was formerly on the staff of National Public Radio. Goldman's latest book takes a good, hard look at how the hardships of being a caregiver can be turned into a personal journey of hope and self-discovery.

The 209-page book contains interviews with 30 famous and/not-so-famous caregivers who tell of how caregiving for their ill, aging or disabled loved ones has transformed the difficult chore into an experience of spiritual



By Herb Weiss and personal growth.

Here are some nuggets of wisdom gleaned from the personal experiences of some caregivers who were interviewed by Goldman in "The Gifts on

Caregiving."

Rosalyn Carter, wife of former President Jimmy Carter, took care of her grandfather, and later, her mother. However, in her mother's later years, the former First Lady found that full-time caregiving was not possible because of her extensive traveling. This would later force the family to move her 92-year-old mother into an assisted-living facility, an experience she remembers as very "painful" for

them

After returning to Atlanta from the White House, Carter would establish the Rosalyn Carter Institute to begin working on family caregiving issues. Interviews with hundreds of caregivers revealed that many "felt overwhelmed, isolated, and burdened," she said.

"Almost every caregiver we talked to felt guilty if they weren't always with a loved one or on call every minute of every day."

"No matter what your personal situation, caregivers must find some space in the day just for themselves," is a message that Carter gives to caregivers reading this book.

"Make time, make space, have something outside of your caregiving that's your own," she urged.

Well-known actor Christopher Reeve was paralyzed several years ago after being thrown from his horse. His wife and primary caregiver, Dana Reeve, talked about how his debilitating accident drastically changed her life, but provided insights to her family.

"I've learned [from being a caregiver] that you must live your life fully, and well and truly appreciate what you've got," Dana said. She has learned to "appreciate the simple things" in

life

Dana said if her husband is too ill to eat dinner with the family, the family shares the meal by sitting in a circle around his bed. Dana said she believes this act sends "a powerful message that no matter what your physical condition, you are a valued member of the family and we're going to carry on in our way together."

The trials and tribulations of caregiving can provide powerful lessons to youngsters in the family as well, Dana noted.

"One of the greatest tools we can give our children is the capacity to deal with hardships and still have a happy life."

Attorney Lois Sacks told a personally touching story of moving her cancer-stricken 78-year-old mother from Florida to be closer to Sacks' home in a wooded residential area of Maryland. Sadly, no medical miracle occurred during Sacks' two years of caregiving. However, a healing of old hurts from an often difficult relationship occurred between the daughter and her terminally ill mother.

Sacks said her mother bravely lived each remaining day to the fullest, even when she was weak and tired from chemotherapy.

"My mother showed me what it meant to truly live in the face of death," Sacks said, noting that she also "learned about silence, about not needing to be doing something all the time."

Caregiving duties ultimately enriched Sacks' relationship with her husband, too, and they even became closer. Since her mother's death, the couple has reorganized their priorities and "slowed down together," she said.

Therapist Wendy Lustbader and her husband, Barry, had her very ill mother-in-law move into their home.

At first, the couple stopped going to dinner or even to the movies. As a result, she admitted their relationship dwindled to almost nothing. Like many caregivers, her husband did not want to leave his sick mother because she got lonely.

However, the first time they went out, it was very stressful, stated Wendy, but by the third time, her ailing mother-in-law gave them blessings by saying, "Have a good time, kids."

Wendy's caregiving experiences has taught her what life is really about, she said, adding that you say to yourself. "Whoa, what is life about? I'm just as fragile as this person lying in the bed. What am I doing? How am I living? What is the rest of the time that I have really for?

"I think our life today we almost need illness to be called

to life, to become fully awake, Wendy says.

Amazingly, the personal narratives compiled by Goldman provide the reader with powerful lessons, wisdom and insights learned as a result of the unforeseen and unplanned circumstances that brought them caregiving responsibilities.

Piece the heartfelt stories together and you have a detailed road map on how to overcome the hardships of being a caregiver, should this occur in your life.

Goldman said, "Caregiving can be a gift in disguise — an experience that moves you toward a more meaningful connection with yourself and with others."

Even with the challenges and burdens that caregivers face, Goldman's interviews show us there are silver linings to the stressful experiences, too.

Fore more information on the book, contact Fairview Press, 2450 Riverside Ave., Minneapolis, MN 55454, call 1-800-544-8207 or email press@fairview.org.

# Gubernatorial candidates outline positions on senior-oriented issues

Low voter turnout in the Sept. 10 primary has propelled former state Sen. Myrth York, a Democrat, into her third run for the governor's seat, this time against businessman Donald Carcieri, the state's GOP standard bearer.

Seniors must become savvy shoppers to determine if York or Carcieri are prepared to confront a myriad of issues — the Ocean State's severe budget crisis, poorly performing schools and creating a business-friendly environment for small and large companies.

More importantly, York and Carcieri must tackle policy issues affecting Rhode Island's graying population.

Assistance is on the way to help senior voters learn more about the gubernatorial candidates' positions on a variety of aging issues. The Gray Panthers of Rhode Island, working in collaboration with the Rhode Island Forum on Aging and the Rhode Island Minority Elder Task Force, will shortly host four regional forums next month to educate older Rhode Islanders about state and federal aging issues. These educational forums are funded by the Rhode Island Senior Foundation's Agenda/Election 2002 project.

Last week, the Senior Agenda/Election 2002 Consortium released both state and federal candidate positions on a number of issues, gleaned from a questionnaire sent to them before the Sept. 10 primary.

While very general in nature, a review of the candidates' responses reveal that York and Carcieri agree on every issue. The educational forums should flush out more specifics to make their differences more apparent to voters.

Both York and Carcieri support the development and implementation of a consumer-friendly Medicaid prescription waiver by the state Department of Human



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By Herb Weiss

Services.

While York pledges to "do everything to provide coverage and make government more consumer friendly," Carcieriacknowledges that "such plans will be difficult to fund." But because state policymakers are working to make this initiative budget-neutral, the issue of how to pay will not become a campaign issue.

Some believe the approval of a federal waiver may take some time to get. So seniors must ask these two candidates to be more specific as to how they will solve the problem of costly pharmaceuticals in the immediate future.

Meanwhile, York and Carcieri are on the same page when they both call for additional prescription subsidies and discounts for moderate-income elders. Both call for use of state's bulk purchasing to negotiate directly with drug companies to get better deals. Additionally, they call for health insurers to pass their negotiated drug discounts to their members.

Both York and Carcieri support the expansion of diversity programs to better serve elder minorities. While York pledges to make diversity part of her administration, Carcieri gives no such pledge, providing only generalities. He noted, "It is important to recognize the different customs, beliefs and emotions of all our elderly."

Seniors might buttonhole the candidates by calling for more details — like how the new administration will assist minority elders to access senior programs. Senior service providers all know that elder services have a very low participation rate from minority elders and there are few senior centers that have culturally and language-appropriate capabilities.

While both York and Carcieri recognize home and community-based care as less costly and preferable to premature institutionalization, York pledges to do everything she can to provide coverage to insure availability. However, Carcieri does not advocate cutting state programs, but calls for reallocating some funds.

Seniors may also want to ask both gubernatorial candidates for a detailed blueprint of how a new administration would create and adequately fund a seamless longterm care system, with community-based services keeping seniors in their homes while providing access to quality-assisted living and nursing facility care, if required.

Both York and Carcieri call for a better trained and more culturally competent long-term care workforce, and increased funding of regulatory and ombudsman services.

York is pushing for 1,000 new nurses who are representative of the population they serve. But specifics on how to pay for the beefing-up of nursing staff in the long-term care setting are not detailed in the survey.

On the other hand, Carcieri notes his opposition to regulation in one question. However, in another addressing regulatory oversight of long-term care services, the Republican calls for "more oversight," even though the state has recently strengthened regula-

tions over assisted-living facilities.

York and Carcieri both agree the state should develop an affordable state dental program for elders. While York does not give specifics on crafting a program, Carcieri recommends this new initiative should be modeled after the Samuels Dental Center, with the private sector partially funding the program.

While York and Carcieri both support an independent Department of Elderly Affairs, York calls for a stronger department, while Carcieri seeks collaboration and coordination between DEA and other state agencies. Could collaboration and coordination lead to a mergar?

Finally, even with the state budget crisis, York and Carcieri conceptually support restoring the SSI Cost of Living increase to Rhode Island recipients by restoring state funding levels. But both candidates hedge on restoring cuts because of the state's fiscal

The work of the Senior Agenda/Election 2002 Consortium has begun to help older Rhode Islanders learn more about York and Carcieri's positions on aging issues. Stay tuned for more details to emerge on their positions following their four regional debates.

Considering the severe state budget deficit Rhode Island is facing, the gubernatorial debates on aging policy issues might not lead to any meaningful policy changes or new initiatives. While the new governor's first priority must be to balance the state budget, it is crucial that the concerns and fears of older Rhode Islanders and long-term care providers not fall on deaf ears.

Herb Weiss is a Pawtucketbased writer covering aging and health care issues for state and national publications. He can be reached at hweissri@aol.com.

#### Walkers take strides to end Alzheimer's disease

Next Sunday, 86-year old Ray Bonenfant is planning to walk three miles to raise money and public awareness regarding Alzheimer's Disease during the Alzheimer's Association 10th annual Memory Walk in Providence, Newport and Westerly.

Taking part in the Oct. 6 charitable event, the nonprofit group's largest fund-raiser of the year, is just a continuation of the Greenville resident's personal fight against Alzheimer's, a devastating disease that affects 25,000 persons in the Ocean State.

Bonenfant, a former controller at a New Hampshire-based company, began participating in the Alzheimer's Association annual fund-raiser seven years ago, shortly after his wife, Eugenie, was admitted to an Alzheimer's unit at the Village of Waterman Lake.

This was one way he could personally improve the quality of life and enhance the care and support services for Alzheimer's patients and their families.

News coverage of the impending 1995 Memory Walk caught Bonenfant's eye and he joined hundreds who came together to raise money for the Alzheimer's Association Rhode Island Chapter. By signing up 30 of his family members and friends to participate in the three-mile walk, he was able to raise about \$700

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For the last seven walks, Bonenfant, now a board member and treasurer of the nonprofit group, has been the top individual fund-raiser.

"Raising money [for this cause] brings a lot of satisfaction to me," he told All About Seniors. Memory Walk is the biggest source of income for the Alzheimer's Association Rhode Island Chapter, funding the



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group's Helpline and underwriting educational programs and assistance to the affiliated statewide support groups.

Last year, Bonenfant and 13 family members — consisting of his four daughters, grandchildren and their spouses and one greatgrandchild — raised a whopping \$8,500 dollars. That year was one of his most memorable walks, he remarked, remembering his stroll through the Roger Williams Zoo with his five-year-old great-grand-daughter.

"Sara was intrigued by the giraffe. Her eyes were just popping out because she had never seen such a large animal."

Next Sunday, Bonenfant is gearing up for his eighth Memory Walk, hoping to raise money to provide programs and services for people with Alzheimer's Disease and their families. He has already recruited 15 family members and friends to participate in the Memory Walk.

Elizabeth Morancy, executive director of the Alzheimer's Association's Rhode Island Chapter, noted that her nonprofit group is one of 150 chapters across the nation hosting the

Memory Walk fund-raiser.

Over the years, more caregivers are becoming walkers to raise funds to help 25,000 Rhode Islanders with Alzheimer's disease and their families. Morancy remembered the event 10 years ago, when about 135 walkers gathered at India Point Park in Providence to walk. The 1993 Memory Walk raised \$13,000. In the ninth year, more than 1,000 walkers came to walk in Providence at Roger Williams Park Zoo, in Newport strolling down Bellevue Avenue, and at the beach in Westerly, raising \$196.500

"We're very optimistic that we will easily reach our 2002 goal of \$200,000," Morancy said, noting that she expects more than 1,000 people to participate.

Patricia Wegrzyn, senior vice president at Citizens Bank and president of the Alzheimer's Association's Rhode Island Chapter, has walked in six Memory Walks.

"We are hoping for good weather this year," she said,

adding she is keeping her fingers crossed, hoping the fund-raising goal is met.

Increased awareness of the devastating disease brings in more walkers, ultimately raising more funds to provide the needed services to Alzheimer's patients and their family members, Wegrzyn adds.

"When you compare our small chapter to others across the nation, we do a better job on the Memory Walk and providing needed services. This is because of our staff," she said.

Get involved with next Sunday's Memory Walk and take steps to end Alzheimer's. For those interested in walking, ask your family, friends, and co-workers to sponsor you. Memory Walk brochures are available by calling (800) 244-1428 or (401) 421-0008.

Herb Weiss is a Pawtucketbased writer covering aging and health care issues for state and national publications. He can be reached at hweissri@aol.com

#### HYPERTENSION

If you are age 18 or older and have mild to moderate hypertension you could be eligible to participate in a national clinical trial

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### AARP kicks off gubernatorial debates with senior issues

The Nov. 5 elections are more than three weeks away and the two major gubernatorial candidates are appearing at invitational forums across the state to get their messages and policy positions out to the voters.

Chros

One week after the September primary, AARP-RI Ricked off the gubernatorial debates by hosting the first livebroadcast television forum of these two candidates at Tollgate High School in Warwick.

With hundreds of seniors in attendance, Providence resident and former Democratic state Sen. Myrth York, who is on her third run for the governor's office, and East Greenwich businessman Donald Carcieri, a Republican, squared off in this one-hour televised debate.

The expert panelists included Phil Zarlengo, president of AARP-RI; Jack White, a local felevision political reporter; Snigdha Vallabhaneni, a Brown Medical University medical student; and this columnist. It was led by moderator Karen Adams, a local television journalist.

This panel was charged with differentiating the positions of York and Carcieri on an array of issues, ranging from long-term care, the economy, separation of powers and drug rehabilitation.

At the AARP-RI forum, York and Carcieri portrayed themselves as political outsiders who are challenging a corrupt political system, with both opposing special breaks for political insiders, both calling for immediate change.

While both York and Carcieri addressed a wide array of questions, here are a few that



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were asked by the panelists relating to senior issues:

This columnist asked both gubernatorial candidates how they would find \$30 million to overhaul the existing Medicaid payment system, which would ensure that quality of care and services are provided to 10,000-plus nursing home residents. The federal government would pick up \$15 million, but the state would have to come with the other half. This might be extremely difficult with such a large state budget deficit.

Carcieri stressed he understands the impact Medicaid has on care because his late motherin-law resided in a nursing home for four and a half years. Additionally, he has learned more about the problems of the state's inadequate Medicaid system because of recent discussions with nursing home providers.

The Republican candidate acknowledged it will be difficult to find \$15 million to fix the system because of the state's looming budget deficit.

"Squeezing what you can

from the budget" may be the only way to shake out state dollars to fix the Medicaid system, he said.

York, on the other hand, called for enforcing existing standards and ensuring that providers are given a fair reimbursement for the services they provide. Performance audits can help make programs effective and efficient.

"There is money in the system that can be better invested," she said.

This columnist called for more detail on potential ways to raise the \$15 million needed to fix the state's Medicaid reimbursement system, urging both candidates to consider reallocating the \$14-million subsidy provided by the state to grey-hound dog owners and funds from the General Assembly's office expansion fund to pay for nursing home services to frail seniors.

AARP-RI President Phil Zarlengo asked York and Carcieri to share their ideas on how the state can fund a comprehensive, affordable long-term care system.

York stated the next governor must support the activities of the Long-Term Care Coordinating Council and called for a stronger Department of Elderly Affairs with cuts in the agency's administrative bureaucracy. She stressed the importance of the state having a continuum of care, calling for more funding of affordable assisted living.

Carcieri called for the longterm care system to become more "customer-focused." He said, "We need to get organized to keep our elderly folk in homes as long as possible."

Carcieri agreed with York that the state must work to provide affordable assisted living to seniors.

In a follow-up question, Zarlengo asked York and Carcieri if they supported a cabinet-level Department of Elderly Affairs.

York called for a stronger, independent DEA. Recently, the DEA was moved to the Howard complex in Cranston and its staff placed in different buildings. York called for the department to be located at one site, making it accessible and convenient to all its employees and seniors who seek its services.

Carcieri also supports an independent DEA, but calls for the department's expansion by giving it oversight and implementation of senior services offered by other state agencies.

"We'll pluck out of some of the other departments those services and functions that are being provided to elderly citizens and consolidate them in the Department of Elderly Affairs." This leads to confusion and inefficiency, he said.

Although there were really no extreme differences on senior issues to come out from this forum, older Rhode Islanders must continue to closely examine each gubernatorial candidate.

Quite frankly, when talking about long-term care, the candidates' positions are not black or white but differ by shades of gray.

Here's an opportunity for you to continue to do your homework.

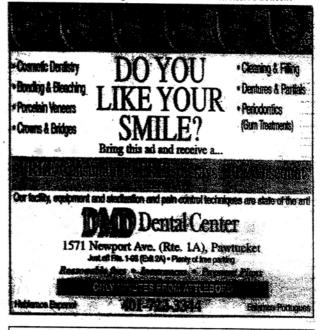
The Gray Panthers of Rhode

Island, working in collaboration with the Rhode Island Forum on Aging and the Rhode Island Minority Elder Task Force, holds the last of its four regional forums, on Tuesday at the City Council Chambers at Pawtucket City Hall at 1:30 p.m. Hopefully York and Carcieri will outline in greater

detail policy issues that will affect Rhode Island's graying population.

See you there.

Herb Weiss is a Pawtucketbased writer covering aging and health care issues for state and national publications. He can be reached at hweissri@aol.com



#### Smoker's Cough?

Subjects are needed to participate in a clinical research study to evaluate the effectiveness of an investigational drug for chronic bronchitis.

Participants must be:

• Men or women age 40 through

A4 THE TIMES

#### **SENIORS**

# High senior voter turnout could impact statewide election results

Even with the nation edging closer to war and the political control of Congress at stake, registered voters across the nation are apathetic about tomorrow's election, according to a CBS News/New York Times Poll released on Friday.

There are few visible signs that most registered voters are especially engaged in this election cycle, the pollsters say.

While 45 percent of those polled think the election is interesting, 42 percent thought their political races were "dull." Furthermore, only one in three say they are more enthusiastic about voting than usual.

According to the poll, nearly eight in 10 registered voters are paying at least some attention to the campaign in their area, but only 36 percent are paying a lot of attention.

While a third say they have more enthusiasm than usual about voting, even more - 42 percent - report less enthusiasm.

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This poll was conducted among a nationwide random sample of 1,018 adults interviewed by telephone between Oct. 27-31, 2002. The sampling error is plus or minus three percentage points.

In the Ocean State,



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Republican Don Carcieri and Democrat Myrth York are hoping for an energized electorate rather than an apathetic one to propel the winner into the governor's seat.

While Carcieri reached out to Republicans and independent voters who reside in Rhode Island suburbs, York has traveled repeatedly to the Blackstone Valley Corridor and the city of Pawtucket to solicit votes.

On Saturday, the former senator attended a Democratic rally hosted by U.S. Rep. Patrick Kennedy. At this rally, statewide and congressional

Democratic candidates came together with hundreds of their faithful party members to urge voters to give a thumbs-up to the Democratic ticket.

Yes, it is now down to the wire with the 2002 gubernatorial race in a statistical dead heat — one of last week's polls showed Carcieri with 43 percent, York with 40 percent, and 16 percent undecided.

Both York and Carcieri know that voter apathy during midterm elections can result in a lower voter turnout.

Throughout the campaign, both gubernatorial candidates have worked hard to energize their supporters and are gearing up their "get out the vote" efforts tomorrow.

In tomorrow's election, voter apathy — which could result in a low voter turnout — would be the kiss of death for either York or Carcieri.

So, the gubernatorial hopefuls are crossing their fingers, hoping their campaigns have been successful in courting Rhode Islander's older voters.

Why?

Historically, nationwide seniors have played a major role in electing political candidates because they have consistently voted in larger percentages than other age groups.

The political fate of statewide and congressional elections and ballot initiatives may well rest on senior voters, if they can mobilize large numbers to exercise their right to vote.

According to Joseph Fleming of Fleming Associates, who also serves as a television news political analyst, this voting trend is also seen in Rhode Island.

"That's why you see a lot of politicians courting the older voters," Fleming told All About Seniors.

The Gray Panthers of Rhode Island's Senior Agenda/Election 2002 project (in collaboration with 17 organizations, including the Rhode Island Minority Elder Task Force and the Rhode Island Forum on Aging) and the

AARP must be commended for their successful forums and televised debates aimed at educating seniors statewide about issues impacting Rhode Island.

Furthermore, as a direct result of the Senior Agenda/Election 2002 project—funded by the Rhode Island Foundation—both York and Carcieri, if elected, have pledged to involve the Senior Agenda consortium in the hiring of the new Department of Elderly Affairs director.

Meanwhile, quarterly meetings will be scheduled with the consortium to discuss issues that impact older Rhode Islanders.

By now, political candidates have mailed campaign literature to older voters, hoping to effectively deliver their political messages and ultimately influence their votes.

As an educated voter, you must read between the lines of campaign literature to learn more about a candidate's background and issues.

Beware of negative campaigning! As an educated voter, you need to become knowledgeable about the specific campaign issues of a race and determine who can best represent your interests.

Voting may be more difficult in heated partisan campaigns where you must separate political rhetoric and negative innuendoes from the substance of issues

Rather than not exercising their right to vote, I believe that older Rhode Islanders will flex their political muscle in the midterm elections, flocking to the polls in large numbers as they have done in the past.

If political candidates do not know of the power of the gray vote, they shortly will after the polls close tomorrow evening.

Herb Weiss is a Pawtucketbased writer covering aging and health care issues for state and national publications. He can be reached at hweissri@aol.com.



# Oral histories sought from our nation's aging veterans

With my 88-year-old father entering an assisted-living facility, I was given the scrapbook containing his army memorabilia, dog tags, and War Department identification card. As a child, I would pull this book of memories out of his bedroom drawer and steal a glance or two. Now I am the keeper of this family treasure, I have been given custody of it.

I am sorry that my many conversations with my father never really centered on his military days — the pictures in this scrapbook are recollections of my father's memories of his peers and wartime experiences, but they are just faceless men and places to me.

However, there were a few stories I remembered.

At the beginning of World War II, my mother worked at the local draft board and remembered typing my father's draft notice, with tears streaming down her cheeks

Over the years, this family story would be told around the dining room table countless times.

My father, who was in his late 20s, would never face the enemy overseas, but would spend the war stateside. He was assigned to a number of bases throughout the country, one located in New Mexico, another on the West Coast.

He became a second lieu-



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tenant after attending officer candidate school in Florida and eventually enrolled in a course at Harvard University in Cambridge, Mass. at the end of the war.

My father is among 19 million United States war veterans living today — but 1,800 of these men and women pass away each day. It is important that stories like my father's and the wartime experiences of the millions of other aging veterans be passed down to future generations.

Two years ago, Public Law 106-380 was enacted to document the experiences of military personnel in all branches of service, civilian volunteers, support staff and war industry workers.

The American Folklife Center at the Library of Congress was

charged with the duties of collecting and preserving audio- and video-taped oral histories, including letters, diaries, maps, photographs and home movies of America's war veterans, from World War II to the Gulf War and those at home who supported them.

The AARP, a major sponsor of this project, is working with the American Folklife Center of the Library of Congress to create a national archive of wartime experiences and documents for future generations.

To advise the Library of Congress on this project, a Five-Star Council, composed of veterans, elected officials, historians and journalists work to increase the nationwide visibility of the Veterans History Project.

Today, on Veterans Day, Rhode Islanders can make a commitment to participate in the Veterans History Project to preserve the nation's memory of its veterans.

Volunteers of all ages can interview war veterans and identify documents to donate to the project. Veterans who possess wartime knowledge and military knowledge can participate as both an interviewer and interviewee.

Today, libraries, museums, civic groups, veterans, history groups and universities are being invited to jump on board and participate in this project, to

both interview and gather historical documents from the homefront and battlefields that will become part of the permanent historical record of the nation.

To become an Official Partner or to obtain a Project Kit, call 202-828-8872, or go online to www.loc.gov/folklife/vets/kit. A printed version can be ordered by sending an email to: vohp@loc.gov.

The project kit will provide the interviewer with questions geared to capture recollections of life experiences and the most memorable moments in wartime. The questions, developed by the Veterans History team working with the American Folklife Center and the Oral History Association, were written to also provide an understanding of how the veteran's service impacted on their postwar life.

I will participate in this worthy project in my own way, by asking my father to share his stories and reminiscences of World War II with me while he can. Hopefully, others will seek oral histories of their aging parents or grandparents about their wartime experiences too, to pass down in their family and to the nation, also — so we may never forget.

Herb Weiss is a Pawtucketbased writer covering aging and health care issues for state and national publications.

## Greyhound subsidy could go a long way in funding senior programs, services

Now that the dust has settled after the Nov. 5 gubernatorial elections, East Greenwich businessman and Governor-elect Don Carcieri has assembled his transition team.

The pencils have been sharpened and the evaluation begins as Carcieri starts his work to whittle down the state budget deficit for the next fiscal year, estimated to be in hundreds of millions of dollars.

The incoming Republican governor has his work cut out for him as he begins his efforts to determine where he will funnel state dollars.

At press time, special-interest groups and aging advocates are sitting on the sidelines wondering what programs will be the winners or losers in Carcieri's efforts to battle a state budget gap.

It is obvious to this columnist how Carcieri can add a slice to



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By Herb Weiss

the budgetary pie. That is, the \$13.5 million revenue from the Lincoln Park video slot machines given by the state to greyhound dog owners could go a long way in helping the frail elderly throughout Rhode Island.

Here's a wish list from senior

advocates and long-term care providers of programs and services for Ocean State seniors that could benefit from an infusion of \$13.5 million.

The state must find \$15 million to overhaul the existing Medicaid payment system, which would greatly improve the quality of care and services provided to the 10,000-plus nursing home residents. The federal government would pick up another \$15 million, for a total increase of \$30 million. The \$13.5 million subsidy to greyhound dog owners could pay a large chunk of the state's share.

Also, this \$13.5 million could fund 180 assisted-living units already approved by the federal government but not funded in the state budget. That would allow 180 or more frail and low-income seniors to live in an assisted-living residence who couldn't otherwise afford it.

With drug costs skyrocketing, \$13.5 million could provide more than twice as much increased pharmaceutical assistance to low-and moderate-income seniors so they can afford the medicines that they need. It could also reimburse health care and nursing home costs for frail, sick seniors with no health coverage so they can get the care they so desperately need.

State agencies are not staffed up enough to oversee the regulation of nursing homes, assisted living and home care. Re-targeted monies from the greyhound subsidies could be used to adequately fund state and private agencies, such as the Alliance for Better Long-Term Care, to perform their mandated oversight of these long term care providers.

But that's not all. By redirecting a portion of the \$13.5 million to increase funding for Meals on Wheels, a program that provides

meals to homebound seniors, 200 people on the waiting list can be served.

Additionally, increased funding could also provide reimbursement to health care workers to at least be on the same levels as neighboring states so the severe shortage of experienced health care workers can be effectively addressed.

With a growing ethnic and minority population, additional state dollars — reallocated from the \$13.5 million subsidy to grey-hound dog owners — could adequately fund a system of services for elders of different cultural backgrounds.

Services might include meal sites, home-delivered services, programming, information and referral and other needed services that are already provided to the majority of seniors.

We must fund organizations struggling to perform these serv-

ices for older minority popula-

The Carcieri administration can keep seniors independent by redirecting some of the \$13.5 million to adequately fund home care and community-based services to provide assistance to keep seniors in their own homes. It could also be used to establish a dental care program for seniors. Most seniors have no dental coverage and many suffer from dental-related problems.

With Carcieri beginning his "Big Audit," we hope that he will place the needs of the state's frail elderly above the subsidy to owners of greyhound kennels. To many Rhode Islanders, that is the right thing to do.

Herb Weiss is a Pawtucketbased writer covering aging and health care issues for The Times. He can be reached at hweissri@aol.com.

#### Retirees have helped make Winter Wonderland a city success

With temperatures dipping into the 30s and heavy snow coming down, Jeanne Hodge, Delores Sisson, Lorraine Farley and Velma Jack sat in the Bristol Savings Bank pavilion tent, distributing more than 200 placards to sponsors of Christmas trees.

Retirees Jean Stizpeck and Rita Kenney manned the table, passing out cups of steaming hot chocolate and donut holes.

Meanwhile, Janice McHale and Henry Kinch Jr., wearing their vintage Winter Wonderland sweatshirts, along with Leroy and Betty Bertenshaw and Aaron and Pat Wishnefsky, walked among the crowds, giving counsel to those needing technical information on putting up lights, placards or information on the annual holiday festival.

Like last year, hundreds of volunteer hours were performed by the above-mentioned people, by many retirees and by scores of others who freshened up the painting on the two-story Victorian houses and the cutouts of Santa Claus, elves and reindeer, and checked nearly 80,000 lighted Christmas light bulbs on 735 strands of lights to ensure they were all



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working properly.

The retirees have worked very closely with 20 members of the Winter Wonderland Committee and others to gear up for Pawtucket's fourth annual Winter Wonderland Festival. The event runs for three consecutive December weekends. It began last Saturday and continues for two more weekends on Saturdays and Sundays from 4 to 8 p.m. at Slater Memorial Park in Pawtucket.

The wildly successful Pawtucket holiday festival, which was first held in December 1999, has attracted tens of thousands into the city's largest park.

A December 1998 visit to a California city's annual holiday display was all it took to get lifelong Pawtucket resident Janice McHale thinking about the creation of a similar event in Pawtucket

The 65-year-old, who had worked the past 38 years at Blackstone Valley Electric, then the past five years at its parent, EUA Service Corp. in West Bridgewater, Mass. remembered holiday displays at Slater Park in the early 1960s. After a while, these displays just disappeared, she said.

Coming back to Pawtucket, McHale had made up her mind to bring back holiday displays to Slater Park.

"It could easily be done here in Pawtucket, and it would look good, too," she quipped.

In the spring of 1999, a visit to Pawtucket City Hall with Mayor James E. Doyle and Jack Carney, the city's public works director, resulted in the approval of her pet project.

City Council President John Barry III, along with City Councilors Don Grebien and Raymond "Chip" Hoyas, jumped on board too, supporting McHale's vision — a Winter Wonderland Festival in Pawtucket.

While not committing city funds, Doyle pledged in-kind support. This assistance would come in the form of providing manpower and technical expertise.

The city's project engineer, the late Frank Rendine, was sought out to design 18 twostory Victorian houses. Staff in the Department of Planning would assist where needed. The Pawtucket Works and Parks and Recreation departments would set up the small Victorian Village, providing 100 Christmas trees and electricity to the site. Scores of volunteer carpenters and painters from the community would ultimately build the huge three-dimensional plywood structures.

Most importantly, local businesses brought funding to the project, providing the necessary seed money to begin this new endeavor.

Now in its fourth year, the Winter Wonderland Committee is a nonprofit group, headed by McHale, who is now retired.

The City of Pawtucket continues to be a major supporter of the holiday festival. And Winter Wonderland continues to get bigger and better, McHale told All About Seniors.

"This year, you will see 245 brightly lit Christmas trees scattered throughout the Enchanted Village, lighting displays and great performances." She predicts a talking wishing well and snowman will be a big hit with the youngsters attending the holiday festival.

McHale suggested to families that they come ride the Winter Wonderland Express, a new train ride that will be unveiled at this year's event.

As in previous years, McHale noted that those coming to Winter Wonderland will still be able to leisurely stroll through the Victorian Village, surrounded by hundreds of Christmas trees, and be entertained by carolers, bell ringers, clowns, puppeteers and musicians.

A large heated tent, sponsored by Bristol County Savings Bank, will again be the site for the festival's entertainment. Youngsters can visit Santa Claus, courtesy of Sovereign Bank (candy provided by Sherwood Brands), and even ride the popular R&D express train, courtesy of Laidlaw

Transit Bus Company. Finally, photos with Santa are only \$15, with part of proceeds benefiting the Winter Wonderland Holiday Festival

Sponsors of the Enchanted Village include the Pawtucket YMCA, Wishing Well, the Pawtucket Boys and Girls Club. Pawtucket Credit Union, Credit Union of Central Falls. Memorial Hospital, the Northern Rhode Island Chamber of Commerce. American Builders, Citizens Bank, Fleet Bank, Crown Collision, Mahoney Metal: Fabrication. Inc., the Adler, Pollock and Sheehan law firm. the Pawtucket Red Sox. The Times. Monarock Truck and Mama Spumoni's.

Of course, hot chocolate, hot cider and delicious food will be available at the festival site.

For more information, go to www.pawtucketwinterwonderland.org or call 401-726-3185.

Herb Weiss is a Pawtucketbased writer who covers aging and health care issues for The Times. He is also involved in the organization of the Winter Wonderland event. He can be reached at hweissi@aol.com.

#### **SENIORS**

THE TIMES A5

### Samaritans can help your holiday blues fade

Chestnuts roasting on a fire, green wreaths with red ribbons and brightly colored lights on decorated evergreen trees may elicit pleasant memories of the upcoming holidays, but for many seniors, these thoughts might tear open old wounds and bring back bad memories, triggering stress, tension and depression.

Not every family gathering with your children and grand-children will be as serene as a Norman Rockwell painting. Of course, everyone has heard horror stories involving holiday family gatherings.

Elaine Poncelet, LICSW, clinical therapist at the Providence Center, provided some practical tips on how to survive holiday stress triggered by upcoming family events.

"Unrealistic expectations are one of the prime culprits contributing to holiday stress," Poncelet noted on the Providence Center's Web site. "Many of us automatically expect to be happy and jolly during the holidays. When we're not, we're likely to experience a lot of disappointment, guilt and even resentment," Poncelet added.

Also, family tensions are often magnified during the holidays, she continued.

"Family members who don't get along, for example, may dread the obligatory family gatherings and find themselves having to cope with some stressful encounters."

Poncelet urges people to be realistic about their family relationships.

"Just because the holidays are here doesn't mean tense family relationships automatically change for the better," she said, stressing that family dynamics may not be different than they are at any other time of the year.

Also, set time limits, said



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Poncelet. "Look out for your emotional well-being by setting limits on difficult family time," by staying only a couple of hours and not all day long.

"If your traditional holiday activities cause you discomfort, maybe it's time to create new ones that will make you feel good and inspire new memories," she recommended.

Get into the holiday spirit by "sharing and loving," not trying to "break the bank" by buying presents, Poncelet said. This can be accomplished by focusing on the emotional or spiritual meaning of the holidays rather than the commercial side, she noted.

Finally, Poncelet said, don't ignore your stress and feelings of dread caused by attending certain family events. Acknowledge these feelings do exist and do something about them, she said, especially taking care of yourself.

Besides family stress, other factors may well play into bringing on the holiday blues.

At this time, some seniors may even feel a little depressed or have suicidal thoughts during the festive holidays, especially if they have lost a spouse and friends, experienced painful chronic illnesses or felt isolated from others.

If this happens, don't despair, because there is a place to call where volunteers will reach out to you...

Last Christmas, a Public Service Announcement (PSA) told seniors to seek out another resource to fight the holiday blues. The PSA featured a well-known songwriter, Bill Withers, who, after singing a few lines of his popular song, "Lean ors Me," urged his radio listeners "feeling low with nowhere to turn to contact The Samaritans."

Directed to the lonely, the depressed and suicidal, the PSA was an attempt to raise the awareness of The Samaritans of Rhode Island, a nonprofit program dedicated to reducing the occurrence of suicide by reaching out to the despairing and lonely.

As reported by this columnist at the release of the PSA, Denise Panichas, serving as The Samaritans' interim executive director, told All About Seniors the communications-based program, established in Providence in 1979, taught volunteers to effectively listen to people who are in crisis. Conversations are free, confidential, and, most importantly, anonymous.

A rigorous training program

teaches volunteers to feel and think without expressing personal judgements or opinions. Panichas said the listening technique, called "befriending," calls for 90 percent listening and 10 percent talking.

Panichas noted The Samaritans also offer other needed resources to caregivers and older Rhode Islanders.

"We do community education programs and also have our peer-to-peer Safe Place Support Group for those left behind by suicide."

In 2000, more than 20,000 Rhode Islanders called The Samaritans, Panichas said.

"It doesn't matter what the problem is, be it depression, suicidal thoughts, seeking resources for mental health services in the community or being lonely and just needing to talk," she added.

If you just can't shake the holiday blues, or you need someone to talk to who cares, call The Samaritans' hotline number at 401-272-4044.



### Carcieri needs to address several long-term care issues

As the new year approaches, Governor-elect Don Carcieri has begun to fill key posts in his administration, some who are business leaders with banking credentials.

While a number of names are circulating among long-term care providers about Carcieri's potential choice for Department of Elderly Affairs Director, at press time, the position is still up for grabs with no official appointment announced.

Throughout the campaign, Carcieri had portrayed himself as the political outsider who was going to challenge a corrupt political system and bring about immediate changes to the way the Ocean State does business.

Many aging advocates are wondering if Carcieri will change the way Rhode Island does business in providing programs and services to the state's growing senior population.

It will be interesting to see how the personal experiences faced by Carcieri — who acted as a caregiver to his late mother-in-law, who resided in a nursing facility — will influence his policy initiatives on fixing a broken long-term care delivery system.

Unfortunately, only one person familiar with elder service issues was tapped to serve on the Health Task Force. It is crit-



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ical that more persons familiar with elder service issues be brought on board as soon as possible.

The state must find \$15 million to overhaul the existing Medicaid payment system, which would greatly improve the quality of care and services provided to 10,000-plus nursing home residents.

The federal government would pick up another \$15 million, for a total increase of \$30 million.

During an AARP debate held before the election, Carcieri acknowledged it would be difficult to find \$15 million to fix the system because of the state's looming budget deficit. "Squeezing what you can from the budget" may be the only way to shake out state dollars to fix the Medicaid system, he said. Maybe his "Big Audit" can find the necessary state dollars to fund a comprehensive, affordable, long-term care system.

Why work a hard, demanding job as a nursing assistant when you can get more money flipping burgers at a local fastfood joint or work retail?

With 60 percent of direct patient care being provided by nursing assistants, constant turnover in nursing facilities is drastically lowering the quality of care provided to residents. Will the Carcieri administration provide additional funding to reimburse nursing assistants to at least be on the same level as neighboring states' pay so the severe shortage of experience in the Ocean State will be addressed?

Furthermore, Carcieri has called for the long-term care system to become more "customer-focused." That's a good start.

Additionally, he said, "We need to get organized to keep our elderly folk in homes as long as possible."

Demographics for the state show an increasing number of seniors needing services, including cost-effective home- and community-based services like assisted living, home health and homemaking care, adult day services and Meals on Wheels.

The jury is still out to see if Carcieri comes through with his desire to keep seniors independent in their homes without reducing support for needed nursing home beds.

Carcieri also has gone on public record calling for the provision of affordable assisted living to seniors.

Will his administration squeeze out money from the budget to fund 180 assisted-living units already approved by the federal government but not funded in the current state budget? Hopefully, yes. This new funding would allow 180 or more frail and low-income seniors to live in an assisted living residence who otherwise couldn't afford it.

With drug costs escalating, will the Carcieri administration find ways to increase pharmaceutical assistance to low- and moderate-income seniors so they can afford the medicines that they need? This issue must be directly addressed by the new administration, not solved in a piecemeal fashion.

The state Department of Health is not staffed up to oversee the regulation of nursing homes, assisted living and home care. In the Carcieri budget, will we see adequate funds allocated to this department and private agencies, such as the Alliance for Better Long-Term Care, to perform their mandated oversight role of ensuring quality of care is provided by the state's long term care providers?

If a law is on the books, fund its implementation. Now that's good policy — probably good common sense stoo.

Can Carcieri find the necessary state dollars to provide additional funding for Meals on Wheels, a program that provides meals to homebound frail seniors?

If he can, 200 people on the nonprofit group's waiting list will ultimately get a chance to eat regularly delivered nutritious meals.

Is the Carcieri administration sensitive to the state's growing ethnic and minority population? Will he ensure better access to programs and services for elders of different cultural backgrounds?

With the Department of Elderly Affairs now relocated to the Howard complex in Cranston and its staff placed in different buildings, how will Carcieri re-address this issue as Governor?

At an AARP debate, Carcieri supported a cabinetlevel, independent DEA but called for the department's expansion by giving it oversight and implementation of senior services offered by other state agencies.

"We'll pluck out of some of the other departments those services and functions that are being provided to elderly citizens and consolidate them in the Department of Elderly Affairs," he told hundreds of seniors at the event.

Will he keep his promise?

When Carcieri officially takes the helm of this state in January, he will be responsible for crafting a state budget to fund his budgetary priorities and initiatives.

As his budget takes shape, we'll learn more details of his interest and commitment to ratcheting up the quality of programs and services provided to older Rhode Islanders.

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## Survey: Many seniors delaying retirement

According to a new AARP survey, the slumping economy, combined with a continual decline in stock market values, has reduced the spending of many Americans ages 50 and older, causing about one in five with portfolio losses to postpone retirement.

As a result of this money loss over the past two years, many of the survey respondents were forced to change their lifestyles.

This new AARP survey comes at a time when the nation's retailers are reeling from not meeting this year's Christmas sales projections.

The survey found a majority (57 percent) of seniors said they budget more carefully, 32 percent said they take fewer vacations, and 29 percent have postponed making a major purchase.

Eighty percent of those questioned said they'd suffered stock losses during the lengthy market swoon since 2000. Two percent said their investments had fallen by a whopping 75 percent or more.

More than one in four - 26 percent - said they lost between 25 and 50 percent of their investments, the survey reported. Meanwhile, 10 percent of



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the respondents said they lost more than half of their money; eight percent between 50 and 75 percent of their cash and two percent more than 75 but less than 100 percent of their funds. No one said that they had lost everything.

Among the 50- to 70-year-old stockowners who said they have lost money and have not yet retired, about 20 percent said they have already postponed retirement as a result of their losses. Seventy percent of those who had postponed retirement originally had planned to retire before the age of 65, and virtually all had expected to retire

before 70.

As a result of their stock losses, only 21 percent now expect to retire before the age of 65 and 28 percent expect to retire after the age of 70.

Meanwhile, the AARP survey found the percentage of those who said they do not know when they will retire has skyrocketed from 5 percent to 20 percent in the aftermath of the market fall.

The survey said two percent of 50- to 70-year-old stock owners who are retired and have gone back to work since the market began its downward spiral in early 2000 said they did so because of their stock portfolio losses.

Among 50- to 70-year-old stockowners with losses who are currently neither working nor looking for work, 13 percent said that they may have to look for work in the future as a result of the losses.

"These dramatic findings reinforce our view that much stronger investor protections are needed," explained David Certner, AARP's director of federal affairs, in a written statement. "Congress and federal agencies need to act to give employees more power to diversify their 401(k) investments."

In addition, "corporate management must be held more accountable for their actions in the wake of the market freefall," Certner added. "And wrongdoers at all corporate levels must be subject to punishment."

Certner also said the market volatility, re-emphasized by the portfolio declines, once again points to the key role played by Social Security as a pillar of retirement security.

"Social Security remains for many the only source of guaranteed, lifelong, inflation-protected income in retirement," he said.

Kathleen Connell, state director of AARP-Rhode Island, states this survey has serious implications for public policy makers, especially if the Republican-controlled Congress pushes for the privatization of Social Security.

There is a significant number of Rhode Island retirees who rely on Social Security for most or all of their retirement income, she said.

"As the renewed debate on Social Security begins, we must be mindful that the fluctuations in the market affect peoples' lives, and that Social Security is extremely important to the financial security of seniors.

"There must be a defined benefit in Social Security and a certain amount of money that you can count on," Connell said.

"There is a renewed concern among people to build a secure financial future, and all of the advances we have made in longevity and better health will be negated if a longer life is lived in financial distress," Connell added.

AARP's survey findings will send a powerful message to the Republican-controlled Congress, making them think twice about pushing for the privatization of the Social Security program. During the next congressional session, it is expected the GOP will continue their efforts of moving Social Security away from a social insurance program to one that consists of individually controlled investment accounts.

As the AARP's survey noted, even savvy seniors with experience in playing were hit hard in their pocketbooks by the stock market slide. The current market's poor performance might once and for all derail the GOP's push to privatization.

The AARP, along with many aging advocates, claims individ-

ually controlled investment accounts are a big financial disadvantage to low-wage earners whose Social Security benefits represent a larger portion of their pre-retirement earnings than do benefits of average and higher earners.

With privatization, low-wage earners will have less to invest and might be less able to manage and diversify their portfolios as those earning higher wages.

Young adult workers who become disabled or the families of those who die would be short changed by privatization, receiving a smaller lifetime benefit than under current law because the young worker's investment account would in all probability be modest.

For today's retirees and for those who follow their footsteps, Social Security must be maintained as a stable defined benefit that can be combined with pensions and individuals savings. That's the best way to go.

## lew federal law calls for posting of nurse-staffing levels

ursing facility providers consumer watchdog groups new federal requirement costing staffing levels on y shift to be much ado t nothing.

ith the arrival of Jan. 1, all nursing facilities parating in the Medicare and icaid program will be red to begin publicly posthe number of nursing staff have on duty to care for ents on each daily shift.

he federal Centers for icare & Medicaid Services S) is developing a new rule enforces a provision of the icare and Medicaid and IP Benefits Improvement Protection Act of 2000. law requires nursing facilito post the number of sed and unlicensed nursing that includes registered sed, licensed practical nurses nurse aides.

'osting staffing information families one more piece of mation they can use to them decide which home the for their loved ones," CMS Administrator Tom ly. "This congressionally



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mandated posting falls right in line with our nursing home quality initiative by arming families with information about how nursing hoes in their areas operate."

When CMS's rule comes out of the regulatory pipeline, it will outline the required format and content of the daily postings. The agency has sent nursing facilities a suggested format for the postings, but until that regulation takes effect, facilities can use their own discretion in designing them.

The National Citizens Coalition for Nursing Home Reform, the nation's top watchdog for nursing-facility residents, gives a thumbs-up to the new CMS requirement. However, the Washington, D.C.-based advocacy group sees the law as a minimum requirement that needs some tweaking.

NCCNHR calls on families to request that facilities post the information in the different units of the facility, along with listing the names of the staff on duty. This information, while not required by the law, will help both residents and family to keep better track on who is working on a shift.

According to NCCNHR, the new law does not require the facility to post how many residents are in the facility or on each unit at the time the staff numbers are posted. By having this information, families can determine a staffing ratio to determine if the facility is meeting a state's minimum staffing requirements, if applicable.

At this time, state surveyors are not required to audit the

posted lists to determine if they are accurate. NCCNHR calls for consumer advocates to monitor the accuracy of the posted numbers, with the administrator or director of nursing being informed of inaccuracies.

Roberta Hawkins, the state's nursing facility ombudsman and executive director of the Alliance for Better Long-Term Care, sees the new requirement as a good first step.

However, "The regulation needs to go further in telling families how many staff should be on duty at the unit at each shift to be able to provide the quality of care that the resident's need," Hawkins said.

Hawkins will be monitoring this new federal requirement very closely.

"If we're seeing poor services and neglect or more falls, this will reveal that the facility does not have enough staff to do the job, even with the specific staffing level listed," she said.

Orlando J. Bisbano, Jr., administrator of East Providence-based Orchid View Manor, admits facility-specific information for families or those shopping around for a facility may be helpful. However, he is puzzled as to why Congress called for a new federal mandate that may be confusing to the public.

"It is information that is not going to be terribly helpful to consumers because there is no information for the consumer to compare it to," Bisbano said, noting that numbers by themselves will not mean anything to anybody.

Furthermore, the postings won't tell the consumer whether the numbers that they see are good or bad, he added.

Hugh Hall, administrator of Johnston-based Cherry Hill Manor and incoming president of the Rhode Island Health Care Association, agreed with Bisbano.

"It's just another regulation that really does not signify anything to the consumer," said Hall.

"We're happy to comply with this regulation, but by no means does this regulation convey any meaningful information to residents, family or visitors about the adequacy of staffing or its resultant level of quality of care." stated Hall.

But for Ed Dunn, a licensed practical nurse who serves as marketing director for D&H Therapy in Pawtucket, the posting of staffing information is just another Congressional mandate, nothing more, nothing less.

The real issue to be addressed is not a lack of consumer information, but a severe staffing shortage fueled by low pay and difficult working conditions caused by facilities not being staffed up," Dunn noted.

"The regulatory burdens and paperwork forced on the nursing staff have put the patient so far down on the spectrum that nurses hardly get to see their patients anymore," Dunn said.

So much for taping nurse staffing levels on clearly visible places in the nursing units.

## Carcieri expected to pick new DEA director soon

On Friday, Gov. Donald L. Carcieri put his new administration's imprint on Rhode Island's long-term care delivery system by choosing to replace Barbara Rayner, director of the state's Department of Elderly Affairs.

Although many of Almond's department heads were kept by the incoming Republican governor, Carcieri chose not reappoint Rayner, appointing DEA's Deborah Capuano to serve as an interim director.

Rayner will be recognized for her efforts of bringing accreditation to many of Rhode Island's senior centers.

Sitting on the sidelines, aging advocacy groups are waiting for the official announcement of Rayner's replacement. Elder service providers tell All About Seniors that former DEA directors and senior-level DEA staff have been interviewed for the position.

During Carcieri's successful gubernatorial campaign, the key role DEA has played in the delivery of programs and services to the state's growing elderly population came up at almost every debate, coffee or political event that attracted seniors and aging advocates.

At the AARP debate held before the November election.



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Carcieri supported a cabinetlevel, independent DEA, calling for the department's expansion by giving it oversight and implementation of senior services offered by other state agencies.

"We'll pluck out of some of the other departments those services and functions that are being provided to elderly citizens and consolidate them in the Department of Elderly Affairs," he told hundreds of seniors at the event.

Richard Bidwell, state coordinator of the Gray Panthers of Rhode Island, along with nine members of the Senior Agenda 2002 Coalition, have already met with Carcieri to discuss his campaign pledges.

At a Jan. 3 meeting with Carcieri and David Duffy, who served as head of the incoming governor's transition team, Bidwell and other aging advocates called on the new governor to keep his campaign pledge that DEA remain an independent, cabinet-level department.

"It appears that Gov. Carcieri will keep the department independent and allow it to retain its cabinet level status," Bidwell said.

At the meeting, Bidwell and his group of aging advocates also requested to meet with Carcieri's choice for DEA Director before the Senate confirmation hearing. Stay tuned!

"The one-hour meeting was a step in the right direction," said Bidwell, noting Carcieri was asked to appoint a competent and committed person to the DEA director's position, one who would support the priorities of the Senior Agenda 2002 Coalition.

The priorities include expanding affordable home and community-based care, improving the quality of long-term care services, creating a pharmaceutical program for moderateincome elderly, creating a dental program, restoring the cuts made to the SSI program, and providing services to better serve minority elders.

If aging advocates have it their way, no bankers or bean counters need apply for the DEA cabinet-level position.

"We want someone who knows the field of aging and the needs of the elderly and programs that serve them," said Bidwell, noting the appointed director must be able to work with the state's aging advocacy groups and support their priorities.

Paula Parker, executive director of Rhode Island Partnership for Home Care, the state trade association for home-care providers, agreed with Bidwell's call for a seasoned elder services professional taking the helm of DEA.

"It is certainly advantageous to have a director who has a good understanding of the issues that elders face along with a strong familiarity of programs and services that are already in place," said Parker, who also serves as a facilitator of Choices, a coalition of community-based providers of elder services in Rhode Island.

"Systemic change can be more expeditious if you have a leader who knows the stakeholders, understands the needs and wishes of the consumers and who is willing to engage in an inclusive forward thinking process.

"We hope he will appoint a director with a vision to restructure the delivery of services to elders with community providers playing a more significant role," Parker added.

Although Carcieri stated he would like to see elder-related services being absorbed by the DEA, Joan Crawley, director of the Leon Mathieu Senior Center in Pawtucket, disagrees.

Crawley said she hopes Carcieri calls for the incoming DEA director to immediately tackle the issue of elder abuse, specifically physical abuse and financial exploitation. She suggested DEA case workers assigned to investigating abuse cases should be reassigned to the state Attorney General's Office.

At DEA, "all too often, I have seen cases falling through the cracks," Crawley said. "Animal-abuse laws are more strictly enforced than elderabuse laws protecting the frail elderly," she added. "The elders are still at risk in the community because nothing ever comes to resolution."

Furthermore, Crawley urged

the new governor should take a closer look at who he brings in to head RIPTA, because this person will ultimately manage the state's para-transit system.

"Transportation is the glue that keeps elders in the community and out of nursing homes," she said.

One elder services professional, who prefers to remain anonymous, said "the morale is very low at the Department of Elderly Affairs. Now is the time for the new director to closely review every position and program and not be afraid to get rid of the dead wood."

She added that to get DEA back on track, Carcieri's new DEA director will need to have outstanding organizational leadership qualities and excellent interpersonal skills in order to implement the many changes and new initiatives that will be expected to come out this department.

Rhode Island is small enough of a state to find someone who might just fit the bill.

Herb Weiss is a Pawtucketbased writer covering aging and health care issues for The Times. His articles also appear in the state and national publication. He can be reached at hweissri@aol.com.

#### WALK-IN MEDICAL CARE

## AARP report: Aging baby boomers will have fewer disabilities

Aging baby boomers may be looking forward to increased longevity in conjunction with a decline in disabilities and the use of nursing facilities.

According to a recently released AARP report, these findings counter long-held assumptions that increased longevity would be accompanied

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by higher rates of disability and usage of skilled nursing facilities.

AARP's new report, "Before the Boom: Trends in Long-Term Supportive Services for Older Americans with Disabilities," is a comprehensive compilation of demographic, socioeconomic, market and policy trends occurring over the past 20 years.

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Even with today's utilization rates staying constant, researchers say the current trends indicate there will be "no age-driven tidal wave of demand" for skilled nursing care for at least two decades.

Population size differences and social characteristics of different age cohorts are changing the type of supportive services needed in senior years. According to U.S. Census 2000, the elder population will grow significantly over the next 20 years. Researchers see much of this increase taking place among the 65-to-74 age group, and those persons will be at relatively low risk for needing intensive longterm care services.

Policy makers have long expected the aging baby boomers to overload the long-term care system. The findings indicate it is not until the 2020s, when the oldest boomers, who will turn age 75, will substantially increase the demand for intensive longterm care services.

"The trends documented in this report clearly demonstrate that increasing longevity is not inevitably linked to increasing rates of disability and nursing facility utilization as was thought in the past," said AARP Policy and Strategy Director John Rother.

"Additionally, it is important to note these favorable trends have not been uniformly experienced by all population groups. In particular, it is the wealthy and highly educated population that have benefited the most."

In the 1970s and 1980s, high rates of disability and lack of



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family support, combined with low rates of wealth accumulation, created the demand for publicly subsidized long-term care services that outpaced the growth of the older population. But many of the factors that drove the rapid growth in nursing facility utilization reversed course by the mid-1980s.

Researchers added that with lower rates of disability and more financial and family resources, seniors are now demanding more service options, especially home health care and assisted living.

This has caused nursing facility utilization rates to decline steadily since the late 1970s. The favorable trends that brought about these declines are likely to continue and intensify for at least the next two to three decades.

"Before the Boom' researchers believe the next 20 years offer an opportunity for policy makers to make needed changes in the nation's system for delivering and financing longterm care supportive services.

Paula Parker, executive director of the Rhode Island Partnership for Home Care - the state trade association for home care - told All About Seniors the AARP report provides a very encouraging projection for longterm care needs. "Not only does it portend less costly services in terms of high-acuity facility care, but it also forecasts a better quality of life for healthier seniors," she said.

Parker, who also serves as a facilitator of Choices, a coalition of community-based providers, added the correlative factors of affluence and education can be linked to better preventative health care. These factors include flu shots, mammograms and other early diagnostic tests, as well as the commitment to good nutrition and physical exercise.

Susan Sweet, a consultant to a number of nonprofit groups and an elder-rights advocate, agreed, saying the report shows the need to expand home- and community-care services to form an accessible and affordable network of services to enable today's healthier seniors to remain independent and avoid premature entry into nursing facilities.

"Adequate transportation services, home health care, adult day services, nutrition programs, recreational opportunities and income supports would enable today's and tomorrow's seniors to remain active and productive community members," Sweet added.

Kathleen Connell, state direc-

tor for AARP Rhode Island, said she is pleased to see the release of the national report.

"We have the luxury of time to get ready for when the need for different kind of services, such as home and community based services, become acute, Connell says.

Connell added, "The passage of the joint resolution by the General Assembly, calling various state departments to develop a strategic plan to enhance the state's delivery of communitybased service, is a significant step in the right direction."

As to my thoughts, I hope a copy of AARP's new report and its findings lands in Gov. Don Carcieri 's in-box for his immediate review. It should not end up in a state policy maker's circular file or placed on a dusty book case.

The new governor has an opportunity to marshal the state's resources and financial commitment to create a seamless long-term care delivery system, one that would keep seniors functioning independently in their communities, while providing access to affordable, quality nursing facility care, if that level of care is needed.

Today's seniors would most definitely benefit from a seamless long-term care delivery system. So will tomorrow's seniors and every generation that follows in their footsteps.

Herb Weiss is a Pawtucketbased writer covering aging and health care issues for The Times. He can be reached at hweissri@aol.com.

# Web-based tool helps seniors find savings on prescriptions

While seniors patiently wait for Congress or the Rhode Island General Assembly to put the brakes on the rising pharmaceutical costs, last week the National Council on the Aging (NCOA)—a Washington, D.C.-based non-profit senior advocacy group—launched an Internet "quick-fix" solution, one that some consider only a stop gap remedy to this politically charged policy issue.

"We know that millions of seniors can't afford all the medications they need, and far too many are skipping doses or not filling prescriptions," said James Firman, president and CEO of NCOA

"BenefitsCheckUpRx is the first and only Web-based program allowing seniors to find out which of the more than 240 programs [that provide savings on more than 800 medications] can help them save money on their prescriptions."

Thomas Scully, administrator of the federal Centers for Medicare and Medicaid Services, added, "The administration is committed to giving seniors far more information about all of their health benefits. BenefitsCheckUpRx is another great tool in helping seniors become more educated consumers."

The development of BenefitsCheckUpRx has been supported by the Pharmaceutical Research and Manufacturers of America, Lucent Technologies/Avaya/Agere Family Care Development Fund and FJC-A Foundation of Donor-Advised Funds. American Online, Inc. hosts the Web site on a pro bono basis.

Here's how it works:

According to NCOA, almost all Medicare beneficiaries without insurance for prescription



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drugs and with an income of less than \$28,000 (\$38,000 for a couple) will likely find at least one program on BenefitsCheckUpRx. In some states, such as New York and New Jersey, there are programs available for people with even higher incomes.

BenefitsCheckUpRx provides comprehensive information on approximately 30 state-funded pharmacy programs, each state's Medicaid program, and 116 company-sponsored patient assistance programs, among others.

The use of this eligibility tool is free and a user's information is confidential.

The questionnaire does not require the visitor to enter any personal identification information, such as a name, Social Security number, address or phone number.

However, a user is required to enter a zip code in order to identify the prescription saving programs available in a specific geographical area. Users will also provide financial information, which is used to determine eligibility for programs — information

that cannot be traced back to the

A senior can easily generate a personalized report of prescription savings that he otherwise may not have known he was eligible to receive, including comprehensive information on how to apply and where to go for further information.

Also, users will be provided detailed information on local office locations and materials needed throughout the application process.

For many of the programs, visitors can also download application forms or link to Web sites that can facilitate enrollment.

Visitors to the Web site are required to simply fill out a simple questionnaire that takes less than 10 minutes to complete. Users can access the Web site from any computer with Internet capabilities. NCOA promises that a Spanish language version will be up and running by midyear.

Scituate resident Deborah Ruggieri, a caregiver, is now a true believer in BenefitsCheckupRx.

Although Ruggieri and her six siblings have worked with a physician to limit the number of medications her 73-year-old mother takes to control her diabetes, high blood pressure and dementia, medication costs still consume about 50 percent of her mother's income.

"One of the most frustrating things I have seen is my father and mother's lifelong possessions and savings being used to pay for costly medical and pharmaceutical bills," she said. "This money could have been spent on improving the quality of their lives in their later years."

Ruggieri had spent numerous hours researching prescription

drug-saving programs, but was not able to locate specific drugcost saving programs that would benefit her mother. After using the BenefitsCheckUpRx service, she hit pay dirt.

"It's a very user-friendly program," said Ruggieri, who calculated that it took about four minutes to fill out the questionnaire and to identify which cost-saving programs her mother was eligible for.

Out of the hundreds of public and private prescription-saving programs, Ruggieri found her mother was eligible for RIPAE, Rhode Island's pharmaceutical assistance program, and a rebate program offered by a drug manufacturer. She was also provided the names of generic drugs that could be substituted for the higher-priced brand name drugs.

Before filling out the questionnaire, "be prepared," Ruggieri warned, noting it is important to have a complete listing of all the prescribed medications, along with the sources and amounts of all retirement income.

Ruggieri said she was extremely surprised to learn about the drug rebate program. "The drug companies do a wonderful job offering these rebates, but not in publicizing them," she said.

Even though Ruggieri has recently benefited from using BenefitsCheckUpRx, she calls on state and congressional lawmakers to not drop their efforts to find ways to lower medication costs.

To fill out your questionnaire, go to www.BenefitsCheckUp.org.

Herb Weiss is a Pawtucketbased writer covering aging and health care issues for The Times. He can be reached at hweissri@aol.com.

#### **SENIORS**

### Former Sen. Moss' advocacy commitment will be missed

Last Wednesday evening, former U.S. Sen. Frank Moss of Utah died.

After he received his law degree in 1937 from Washington, D.C.-based George Washington University, Moss briefly worked on the legal staff of the U.S. Securities and Exchange Commission.

Throughout his legal career, he would sharpen his legal skills by working in a variety of settings. Initially, clerking at the Utah Supreme Court, he would ultimately win an election putting him on the bench of the Salt Lake City Municipal Court in 1940.

During the World War II, he would serve on the Judge Advocate General's staff of the U.S. Armory Corps in England. After the war, Moss would be elected in 1950, reelected in 1954, to serve as Salt Lake County attorney.

Two years after his unsuccessful bid for Utah Governor, in 1956, Moss would run for Senate and win, by less than 40 percent of the vote.

Obituaries in newspapers stated that the liberal three-term Senate Democrat was best known for his environmental work that included the establishment of national parks and recreational areas in Utah. Moss was also recognized for



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drafting a series of bills protecting consumers, ranging from mandating labeling on cigarette packages about the health hazards of smoking, banning cigarette advertising on radio and television, to developing minimum safety requirements for automobiles.

But for me and many of my colleagues in the field of aging, we will always remember Moss as being a true advocate for the nation's elderly.

Moss worked cosely with President Kennedy, Vice President Lyndon Johnson, who would later become President, Hubert Humphrey and Claude Perper getting Medicare and Melicaid enacted into law.

Moreover, Moss will always be remembered for being the driving force behind the establishment of the Senate Special Committee on Aging in 1961.

He also played a major role in establishing the House Committee on Aging with the late Rep. Claude Pepper. The two special committees would later put the spotlight on aging policy issues, generating both the public and political will to bring about the needed policy changes.

Throughout his Senate career, in addition to authoring legislation that would require federal minimum standards for nursing homes and helping to create the Medicare and Medicaid home health care benefits, Moss held the first hearings on hospice care and introduced legislation authorizing payment for hospice care.

More than 40 years ago, the Special Committee on Aging, chaired by Moss, began to hold a series of hearings on nursing homes. It became extremely clear to his committee through its hearings, generating 1,300 pages of testimony, that both nursing home standards and enforcement by state regulatory agencies varied drastically. Moss noted that these hearings helped to shape the Medicare

and Medicaid programs, and that they also lead to series of reforms in 1967.

Ultimately, a series of 30 hearings between held between 1969 to 1976 eventually lead to the publication of a 12-volume report, entitled, "Nursing Home Care in the United States: Failure in Public Policy."

In 1977, Moss, with coauthor Val Halmandaris, (who at the time was responsible for research of the Subcommittee of Long-Term Care, but now serves as executive director of the National Association of Home Care) wrote "Too Old, Too Sick, Too Bad: Nursing Homes in America," detailing the plight of America's elderly.

More than 10 years later, in a 1998 speech to the National Council on Aging, Moss expressed his concerns that America's elderly were losing ground from all the gains they had achieved in the 1960s and 1970s. Congress has yet to enact a pharmaceutical drug program to put the brakes on spiraling drug costs. Elder abuse is still running rampant throughout the nation. Medicare expenditures are being slashed to nursing homes, home and hospice care.

It is now time for Congress to get serious about tackling the a multitude of problems thrust upon the nation by an aging society. Moss' advocacy commitment to the nation's elderly will be sorely missed, and his shoes will be hard to fill.

Herb Weiss is a Pawtucket based writer covering aging and health care issues for The Times. He can be reached as hweissri@aol.com.

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## How to find an age-friendly fitness center

It's winter — do you know where your local gym is?

Aging baby boomers and seniors can keep fit and in shape by exercising in a local fitness facility, especially in the winter.

However, according to one survey, fitness facilities may not be rolling out the red carpet to an older clientele — many often fail to meet age-specific needs.

A recent survey of 50 fitness clubs in Oregon, published in the January/February issue of the Journal of Health Promotion, indicates a majority of the respondents surveyed are not age-friendly and still have barriers that keep people with disabilities from participating.

According to this study, only 8 percent of facilities had accessible exercise equipment, while 44 percent of locker rooms and restrooms were accessible. Researchers believe the results show that fitness centers still have a long way to go to address accessibility issues.

Additionally, the researchers found 55 percent of drinking fountains, 83 percent of elevators and 56 percent of parking lots were accessible to people with disabilities.

"Fitness centers have their roots with the younger popula-



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tion," said Colin Milner, CEO, of the International Council on Active Aging (ICAA), the world's largest senior fitness association.

"It takes a concentrated effort to shift this paradigm to make facilities today age-friendly."

A simple example of this, said Milner, is that according to the Journal on Health Promotions study, only 56 percent of parking lots were accessible to people with disabilities.

Dan Leviton, Ph.D., professor of public and community health and director of the adult health development program at University of Maryland at College Park, said fitness centers not catering to the needs of older adults is a form of ageism.

Not catering to the older population can impact your bottom line too, Leviton noted, because the age 65-and-over population is the fastest-growing demographic group in the nation.

"Older adults are very much concerned about their health and well-being [thus their interest in joining a fitness center.] They are motivated to prevent coronary, circulatory and respiratory problems, all of these medical problems can be improved by exercise," he said.

Meanwhile, Milner said the 50-plus market makes up 23 percent of all health club memberships and 44 percent of all hospital fitness center memberships. The difference in these figures is that hospital fitness centers are more age-friendly, offering programs that address the changing needs of an older adult.

Leviton said that when dealing with older populations, there are certain needs fitness centers must be aware of and precautions they must take.

"Older people may feel selfconscious when working out with younger people who are in shape. They have to really be made to feel welcome," added Leviton.

"Most importantly, fitness centers must be aware of the medications an older person may be taking and the related medical pathologies involved," said Leviton, noting that medications can affect heart rates. It becomes important for staff to become knowledgeable of the medical histories of their older clientele.

Become a savvy shopper as you seek a fitness center for your daily exercises. The study authors in the Journal of Health Promotion said they hope their findings will serve as a wake-up call to owners of physical-activity facilities.

In the study, many owners and managers were unaware their facilities did not comply with national guidelines for people with disabilities

Milner noted that ICAA has created a checklist to help seniors rate and compare local fitness facilities so they can choose one that meets their age-specific needs.

"When touring a site, be sure you take the time to fully evaluate the fitness center's amenities and organizational philosophy towards older people, " he suggested.

After visiting a number of fitness centers, compare and contrast the information generated when the following questions are answered:

- 1. Do you feel comfortable in the atmosphere of the facility?
- 2. Are the locker rooms clean, accessible and monitored by
- 3. Are the membership contracts and marketing materials available in large print?
- 4. Are signs visible and easy to understand?
- 5. Is the music acceptable and set at a reasonable level?
- 6. Does the facility's cardiovascular equipment have the following age-friendly features — a display panel that is easy to read, easy to change and easy to understand?
- 7. Do the facility's treadmills start slowly, at 0.5 mph?
- 8. Do the recumbent bikes or steppers have a wide and comfortable seat with armrests?
- 9. Does the facility's strengthbuilding equipment have instructional placards that have simple diagrams, easy-to-read text and font, and correct usage information?
  - 10. Does the facility's

strength-building equipment have a low starting resistance, less than five pounds?

- 11. Does the facility offer programs designed to meet the needs of those with a variety of chronic conditions (specifically osteoporosis, cardiovascular disease, diabetes, balance abnormalities, muscular weakness)?
- 12 .Do the classes have different levels of intensity, duration and size?
- 13. Is there an extensive screening and assessment process (for balance, functional abilities, osteoporosis)?
- 14. Is the staff certified by a nationally recognized senior fitness organization to work with people who have various health issues that may arise with age (specifically osteoporosis, hypertension, arthritis)?
- 15. Is the staff knowledge able about the impact that medication can have on exercise?

To download the complete checklist, please visit www.icaa.cc/checklist.htm

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#### Bush budget falls short on fixing Medicare drug coverage

With the backdrop of an impending war, a sagging economy and a heightened terrorist alert, President George W. Bush released his FY2004 budget in early February.

While the administration spins its positive message about the strengths of the budget proposal, which totals \$2.223 trillion, aging advocates see major flaws with its pharmaceutical drug coverage plan.

The Bush FY2004 budget proposes to invest \$400 billion over 10 years to strengthen Medicare and prescription drug coverage.

"Unfortunately, \$400 billion covers a very meager share of seniors' prescription drug costs, which are projected to total \$2 trillion over the same 10-year period," charged Ron Pollack, executive director of Families USA.

"The President's new proposal to force seniors into private health plans, as a condi-



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tion for receiving prescription drug coverage, pressures seniors into choosing between the drug coverage they so desperately need and the doctors they have come to depend on," Pollack said.

He noted private health plans participating in Medicare have a poor record in serving seniors. They are unavailable in many rural communities, and they frequently leave communities that are deemed unprofitable.

"The coupling of prescription drug coverage with enrollment in HMOs and managed care plans will make it much more difficult to enact prescription drug coverage in this Congress," Pollack predicted. "President Bush should not hold seniors' prescription drug coverage hostage to the achievement of his goal to privatize Medicare."

James Firman, president and CEO of the National Council on Aging, agrees with Pollack's assessment of the Bush administration's overhaul of Medicare and the funding of a prescription drug benefit.

Firman said \$400 billion over 10 years is still insufficient to create a drug benefit without major gaps in coverage.

"We would oppose making prescription drug coverage available only to Medicare beneficiaries if they leave the traditional program," he said, noting that "discriminating against certain beneficiaries in this way would be a controversial step backward."

U.S. Rep. Patrick Kennedy views the Bush Budget proposal as "reckless and risky," especially the administration's moves toward privatizing Medicare services and providing inadequate drug coverage.

"In his plan, the president has chosen to pressure seniors into private managed-care plans that continue to demonstrate a track record for raising premiums and lowering services," Kennedy said, noting Rhode Island seniors know the potential problems with Medicare HMOs well.

Kennedy said, "In the Medicare+Choice program, seniors have been dropped from their HMOs because their providers left the area or went out of business.

"For those who remained, they continue to endure rising premium and/or reduced services."

"President Bush's decision to push seniors into these private plans for scraps of prescription drug coverage smacks of his plan to privatize Medicare — and that should make everyone nervous," Kennedy added.

With the release of the Bush FY2004 budget proposal, the administration and Congress now begin the process of hammering out a national budget.

As the budget battles begin, seniors must call for adequate funding and prod their lawmakers to work together to hammer out a meaningful pharmaceutical drug-assistance program. But until its enactment, a growing number of older Rhode Islanders and seniors across

the nation are being forced to choose between paying rent and buying groceries, or just buying their prescription drugs.

Send a powerful message to Capitol Hill – "Seniors need a meaningful Medicare pharmaceutical drug benefit."

Only by working together can Congress hammer out a bipartisan solution to be enacted this Congressional session.

Bring your concerns to Rep. Kennedy. He plans to discuss his concerns regarding how the President's budget will impact seniors on Wednesday at 2 p.m. at the AARP headquarters, 10 Orms St., Providence. For directions, call 401-272-0233.

# Bush gives more details on his drug prescription plan

As the saber-rattling intensifies between the Bush administration and Saddam Hussein, with hundreds of thousands of U.S. troops poised to attack Iraq, President Bush has turned his attention to a hot domestic issue, costly prescription drugs, renewing his efforts to privatize Medical are to assist seniors to their medications.

The Bush's "Framework for Medicare" reform plan is all about choice. Seniors would have the choice to select one of three plans.

Option one allows seniors to stay with the current Medicare system and receive assistance to pay for their prescription drugs. To reform the current system. Bush proposes to issue a discount card that will reduce the cost of prescription drugs for every senior from 10 to 25 percent. Annual limits would be set on the amount seniors would have to spend out of pocket on drugs, with no additional premium. Meanwhile, an annual \$600 subsidy would be provided to low-income seniors to pay for prescription drugs.

For those seniors who want more coverage, they can choose option two, enrolling in an Enhanced Medicare program. This fee-for-service option would include full coverage for preventative care, a comprehensive prescription drug benefit, protection against high out-of-pocket costs and extra help for low-income seniors to get the drug benefit. Meanwhile, seniors would be able to choose their specialists, their hospitals and their primary doctors.

Finally, seniors who want the kind of benefits available in managed care plans, including prescription drug coverage, would have that choice, under



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option three of Bush's proposal. This option would place seniors in an affordable network of doctors, provide drug coverage and allow seniors to keep their out-of-pocket costs to a minimum.

To ensure seniors are provided financial help as soon as possible, Bush's latest Medicare proposal would immediately provide all seniors with a drug discount card that is estimated to bring savings from 10 to 25 percent on the cost of prescription drugs by pooling the buying power of Medicare beneficiaries.

Senate Aging Committee Chair Larry Craig (R-Idaho) praised Bush's "framework" for prescription drugs.

"President Bush has stepped firmly to the plate with a solid framework for bringing Medicare from a 1960s-style program to a state of the art 21st century plan — including prescription drug coverage," Craig said. "The president's outline is a strong first step in the coming debate. As discussion unfolds, we in Congress may not always agree on all aspects, but the president is pushing us

in a positive direction."

A growing number of law-makers are voicing concerns that those seniors choosing to stay in the traditional Medicare program would receive less assistance in paying for costly pharmaceuticals than seniors choosing the "Enhanced Medicare" and "Medicare Advantage" options.

Ron Pollack, executive director of Families USA, has his concerns, too, believing Bush's latest Medicare proposal coerces seniors into private health care plans, away from the traditional Medicare program.

Responding to a speech before the American Medical Association, where Bush outlined his proposed framework for new Medicare and prescription drug legislation, Pollack charged the proposal was not a meaningful drug benefit in the Medicare program. He characterized it as "the same old tune and way off-key for America's seniors."

Pollack noted that under Bush's initial proposal, seniors in traditional Medicare would not have been provided with any drug coverage.

Under Bush's new plan, seniors in traditional Medicare would receive coverage only after out-of-pocket costs to purchase medications reached thousands of dollars, costs the vast majority of seniors cannot afford, Pollack added.

According to Pollack, seven out of eight seniors are in the traditional Medicare program today. Coercing them into a privatized system to get the medication they need is shortsighted, he said, because private plans have refused to serve seniors in most rural communities.

Additionally, private plans have abandoned 2.4 million seniors in "unprofitable" communities, and, in private plans that do exist, seniors are experiencing fast-rising premiums and shrinking benefits.

Frank Clemente of Public Citizen said the president's proposal would waste taxpayer money because it relies on inefficient private plans to offer coverage for prescription drugs. Clemente said he believes the Democratic approach of using taxpayer money is the better way to go.

"Government auditors have found private plans spend more on administrative costs than Medicare," said Clemente, noting HMOs have administrative costs of approximately 15 percent and indemnity insurers have administrative costs of 20 percent. In comparison, Medicare spends just 2 percent on administrative costs.

Even as the nation gears up to fight terrorism and to stage a war in Iraq, seniors' calls for assistance in paying for costly prescription drugs still capture the attention of the White House and Congress.

In times of war, Democrats and Republicans have put aside their philosophical and political differences to support the troops. This approach must also be taken by lawmakers as they continue their debates and ultimately hammer out a meaningful prescription drug benefit for Medicare.

## AARP report sheds light on needs of older disabled persons

The American Association of Retired Persons, a Washington, D.C.-based aging advocacy group, has generated a new report providing direction to the nation's policy makers on how to keep America's age 50 and over disabled population independent and in control of their daily lives.

According to the latest AARP study, the lack of affordable services, a fragmented delivery system and caregivers' limited knowledge of the delivery system are barriers that keep Americans with disabilities ages 50 and over from living active and independent lives.

The AARP report, "Beyond 50 2003: A Report to the Nation on Independent Living and Disability," incorporates data obtained from the first-ever national survey of Americans ages 50-plus with disabilities, documenting the gap between what they say, need and what is available to them.

"Long-term independence for persons with disabilities is an



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increasingly achievable social goal," AARP Policy and Strategy Director John Rother said in a written statement released with this report. "But it will require time and the collective creativity of the public and private sectors." he added.

"Meanwhile, even minor changes can lead — at least in the short-term — to important lifestyle improvements for those with disabilities today," Rother said. On the other hand, long-term improvements will require fundamental policy changes.

"As the influx of [baby] boomers enters their 50s and 60s, they will bring their attitudes of competitive consumerism to health care delivery, and will demand greater choice and control of available services," explained Rother. "The good news is that there is time to prepare for those demands," he said.

According to the AARP report, 46 percent of the 50-plus respondents with disabilities believe having more control over decisions about services and the help they need would bring a major improvement in the quality of their lives.

The AARP report, the third in a series of comprehensive studies on the status of Americans over the age 50, found 51 percent of older persons with disabilities are managing independently; while 49 percent are not receiving any regular help with daily activities, such as cooking, bathing and shopping. More than half of those with disabilities (53 percent) tell researchers that they were unable to do something they needed or wanted to do in the past month — quite often basic tasks such as household chores or exercise.

The AARP report found independence for older disabled persons can be easily enhanced by using assistive equipment (such as walkers and wheelchairs) and new technologies that are now more widely available. However, caregiver assistance with daily activities will take more time and resources. The researchers estimate as many as three million persons over age 50 with disabilities (almost 25 percent) need more assistance than they receive now with daily activities.

Furthermore, the report said that persons 50 and older with disabilities place inadequate health insurance on the top of their list of issues that are not being adequately addressed. Specifically, Medicare coverage

still does not pay for prescription drugs, and assistive equipment is not covered by some health insurance.

While minor fixes would make a difference, other improvements will require longer-term fundamental changes and more public dollars. Based on the "Beyond 50" findings, AARP has outlined a number of policy changes for making critical long-term improvements:

- Older persons with disabilities must be insured against the high costs of accessing long-term supportive services. Ways must be found to share the risk of these unpredictable costs more widely among public and private sources.
- Public funding for longterm supportive services needs to be re-oriented toward more options for home and community-based care. The nation also must provide more options for "consumer-direction" in publicly funded programs.
- Communities need to be made more physically accessible

for more people with disabilities.

- Information and services need to be more navigable for those who are trying to learn more about available long-term services and whether or not they are eligible.
- America's health care system must adjust its focus to enhance functioning and health-related quality of life, not just provide acute and curative care.

AARP's report is a wake-up call for state and national legislators who will be charged with making sound policy decisions for a graying America with disabilities. If policy makers heed the recommendations of AARP's report, systemic changes may well give dignity to millions of older persons with disabilities who only want to remain independent and control of their daily lives — just like the rest of

Herb Weiss is a Pawtucketbased writer covering aging and health care issues for The Times. His articles also appear in state and national publications.

# A commencement speech for the graduates of 2003

Throughout Ocean State colleges and universities, the Class of 2003 is poised to tackle the world. As commencement ceremonies wind down, the seniors, in their caps and gowns, listen intently to the speeches given by well-know lawmakers, judges, CEOs and television personalities about the rigors they face after graduating. They may even learn a few tips on how to have a more rewarding and successful life.

Here I sit with commencement speech but with no place to go. But in a heartbeat, if I were asked to give my thoughts to the class of 2003, I would urge them to age gracefully throughout their lives.

America is still a youth-oriented society, fearing wrinkles, sagging stomachs and gray hair. But for me, a writer who has covered aging and health care for more than 20 years, getting older is most definitely getting better. Hopefully, as you age, you will realize it is not the end result but the process of getting there that is important.

Years ago, my father gave me a book, "Life's Little Instruction Book." This book, listed as a bestseller by The New York Times, gave readers 511 suggestions, observations and reminders on how to live a rewarding life. I give you my version of this book, which can hopefully provide you with a road map throughout your life stages on how to age gracefully.

If I could offer you one suggestion on how to face the downside of growing older, I would say



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practice looking on the bright side of things. You have choices everyday you get up — your glass can either be viewed as half-full or half-empty. A positive attitude become everything as you get older.

It seems that at the snap of a finger, we find ourselves past the prime of our youth. It is so easy to continually reflect on our successes and especially the bad hands we are dealt in life throughout the years. Each and every day, savor your personal and professional victories, but forgive yourself for your defeats and failures.

Your life should be viewed as a cancelled check. Let go of those past regrets and the mistakes you made in your youth and middle ages. But also forgive yourself for your weaknesses, even letting go of those long-ago opportunities that passed right through your fingers, like sand in a clasped hand. But never forget

to forgive others too, even those who have personally or professionally hurt you. You cannot live or end your life peacefully if you are still holding onto anger, bitterness and grudges all tied to past actions.

Live in the present but keep your eye to your future. Time flies by swiftly. There is just not enough time left to carry the burdens of past guilt or grudges. Let go of the burdens of the past, live in the now, taking steady steps toward your future.

As the years accumulate, don't be afraid to "share your life story," to those who seek it out. You have a huge reservoir of untapped wisdom about life experience to share with others, especially with the young, who can benefit from it. As a parent and later a grandparent, insights and lessons you have learned throughout the cyclical ups and downs of your life should be shared with your children and their children. Younger generations will be at a serious loss if you choose to be silent and to bottle up your knowledge.

Don't let your life become a spectator sport. Go for the gusto. Stay as physically active as you can. Gerontologist Phil Clark, at the University of Rhode Island says, "if you rest, you rust." Physical exercise elevates your mood and benefits your cardiovascular system.

Research tells us that you must also exercise your brain. Take time to read daily newspapers, magazines and books. Spend your time working on a challenging crossword puzzle, or

play chess, or possibly mahjong.

Find meaningful things in your life that are bigger than you are. Engage in acts of loving kindness to others. Research tells us volunteer work can be a protective buffer from the curve balls that life may throw at us as we slowly age.

Don't be afraid of asking your family, friends, or colleagues for assistance or support. No one is an island, and we need to become more interdependent as we get older. Researchers say the more types of relationship networks you have — family members, friends, group affiliations — the healthier you will be. In the coming years, strive to keep up your social contacts and personal connections with others.

No matter what your physical condition, there are always opportunities every day in your environment to help you care for somebody. Take advantage and savor each and every opportunity.

Learn to slow down and enjoy the simple moments of your life. Author Connie Goldman notes the simple act of watching a beautiful sunrise or sunset or even puttering around in your garden can be as stimulating as a jam-packed calendar of activities.

There are no sure bets in life but death, taxes, and aging. So, Class of 2003, make the most of the aging. Enjoy the process.

Herb Weiss is a Pawtucketbased writer covering aging and health care issues for The Times. His articles also appear in state and national publications.

## Statehouse rally calls for passage of nursing home payment reforms

In the final days of this vear's legislative session, the Coalition to Insure Funding for Quality Long-Term Care rallied its troops at the Statehouse rotunda to push for the passage of two legislative proposals that would fix an ailing Medicaid reimbursement system.

The of goal Wednesday's rally was to keep the Coalition's two legislative proposals on the radar map of the Rhode Island General Assembly, which has been bogged down with a multitude of heated legislative issues separation of powers, fire code changes, smoking bans in restaurants, to name a few.

Even with an expected \$225 million budget deficit for fiscal 2004, the long-term care advocates, including provider groups, consumer advocates, state policy makers and legislators, urged lawmakers to pay a fair Medicaid rate for nursing facilities, required by state and federal law to provide quality of care to 9,000-plus vulnerable Rhode Island seniors who need intensive, 24-hour-a-day

Rally supporters gave a thumbs-up to two legislative proposals (H 5803/S 0899). The companion bills, if enacted, would revise the state's Principles of Reimbursement to address the inadequate funding of the state's nursing facilities.

The two legislative proposals, still in the House and Senate Finance Committees, reflected the findings of an 18month study of B.D.O. Seidman, a consulting firm hired by the state Department of Human Services to review and recommend fixes to the state's flawed reimbursement

A major finding of this state-financed study found the state was underpaying facilities in excess of \$29 million annu-

These bills call for an additional \$14 million in state funding for Medicaid reimbursement to nursing homes. With this infusion of state dollars, the federal government would then kick in \$16 million, for a total increase of \$30 mil-

Eighty percent of the state's nursing home residents rely on the Medicaid program to pay for their care, John Gage, administrator of the Coventrybased Riverview Healthcare Community and a Coalition member, told those who



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attended the rally.

Many facilities are left struggling to remain open because Medicaid does not pay for the actual cost of care, he said, noting a number of Ocean State nursing homes have already filed for bankruptcy or receivership, and some are even closing their doors.

An inadequate reimbursement rate continues to fuel Rhode Island's critical nursing shortage, too, said Gage. Due to the current reimbursement system, facilities are hardpressed to come up with the necessary funds for increases in salaries and benefits to retain nursing staff.

Lt. Gov. Fogarty, who chairs the state's Long-Term Care Coordinating Council, warned the crowd that Rhode Island's nursing home industry "is on verge of a meltdown."

He - along with Sen. Stephen D. Alves (D-West Warwick) and Rep. Steven M. Costantino (D-Providence), sponsors of the Coalition's nursing home payment reform bills - urged Gov. Donald Carcieri and House and Senate leaders to include funding in the fiscal year 2004 budget to begin the steps needed for Medicaid reform.

Throughout the afternoon rally, until 6 p.m., the Coalition gathered hundreds of signatures to support efforts to increase Medicaid reimbursement to nursing homes.

Meanwhile, posters strategically placed outside the House and Senate chambers illustrated the rally supporters' point that the state is not paying enough for the care of family members in nursing homes.

At one poster site, piles of dirt were placed on a 6-foot table. A poster said: "Did you know this much topsoil cost more than \$5.63 -that's more than the Medicaid systems pays for an hour's worth of

nursing home care for your loved one. Isn't your grandmother's care worth more than the cost of a pile of dirt?"

In a previous All About Seniors column, this writer called for lawmakers to fix the state's flawed Medicaid reimbursement system once and for

The legislative session will soon be ending, and immediate action must be taken now by lawmakers to pass the Coalition's two legislative proposals, with Gov. Carcieri hopefully signing the bills into

State policy makers must no longer use a Band-Aid approach to fix a broken Medicaid payment system, especially with the graying of the Ocean State's population. A growing number of Rhode Islanders will soon require this level of intensive care.

It's time for lawmakers to ratchet up the Medicaid rates to pay for actual costs of care, allowing facilities to deliver quality services.

Call Gov. Carcieri at 401-222-2080, Senate President Bill Irons at 401-222-2447 and House Speaker William Murphy at 401-222-2466 to tell them you want a Medicaid system that pays an adequate Medicaid rate. Urge these key lawmakers to pass House Bill 5803 and Senate Bill 0899.

Herb Weiss is a Pawtucketbased writer covering aging and health care issues for The Times. His articles also appear in state and national publications. He can be reached at hweissri@aol.com.

D.O. Director





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(near the Industrial Highway)

## Fogarty aids push for passage of assisted-living proposals

In the shadow of the state's looming budget deficit, Lt. Gov. Charles J. Fogarty, chair of the state's Long-Term Care Coordinating Council, along with its provider and consumer members, are calling on Gov. Donald Carcieri and House and Senate lawmakers to pass and enact two assisted-living proposals.

If regulations are on the books, allocate the necessary state funding to enforce them — that's the gist of a LTCCC resolution passed on May 23. Lack of inspectors for the state's assisted-living facilities could place seniors in these facilities in harm's way, Fogarty and his LTCCC members have warned.

Currently, there are 71 assisted-living facilities in the state capable of serving 3,527 residents. Add to this 155 new assisted-living beds now in nursing homes.

Under legislation introduced on Fogarty's behalf last legislative session, the state tightened assisted-living staffing requirements and resident evaluations



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to ensure that only those residents who are appropriate for assisted-living facilities are accepted for residency. This is particularly important in respect to emergency evacuations. Residents of these facilities must be capable of self-preservation.

With weeks to go before the legislature's planned adjournment for the year, the LTCCC is going into a full-court press, calling on Carcieri and state lawmakers to include an additional \$90,000 in funding in the state's fiscal year 2004 budget for the addition of a professional nurse position at the Department of Health. This nurse would help inspect assisted-living facilities.

In correspondence dated May 23, Fogarty warned Carcieri the current level of staffing to inspect assisted-living facilities is "totally inadequate to assure the public that residences are in compliance with state assisted-living licensing requirements."

Additionally, Fogarty mentioned that at House and Senate Finance Committee hearings, LTCCC members expressed "their grave concerns about the gross inadequacy of the current level of regulatory staff and expressed alarm regarding the ability of available staff to ensure the health and safety of seniors in assisted-living residences."

Roberta Hawkins, who serves as the state's ombudsman and executive director of the Alliance for Better Long-Term Care, said there is only one professional staff person at the state's Department of Health who is charged with inspecting the state's assisted-living facilities and assisted-living beds in nursing facilities.

Adelita Orefice, director of the state's Department of Elderly Affairs (DEA), is aware of the Department of Health being "woefully understaffed."

Fogarty and consumer advocates also zeroed in on another assisted-living legislative issue.

Rhode Island provides assisted living for some low-income individuals who, without this service, would qualify for and require nursing home placement.

The federal government approved a waiver to allow the state's Medicaid program to allow 200 eligible seniors to reside in assisted-living facilities rather than nursing homes.

This legislative session, the LTCCC and consumer advocates are pushing for passage of legislation that would provide state funding to ratchet up the number of seniors who can participate in the state's Medicaid assisted-living waiver program.

More than a year ago, the federal government had approved an additional 180 beds in the state's Medicaid assisted-living waiver program to respond to increased consumer demand.

However, since that time, no state funding has been allocated to allow more low-income seniors to participate in this initiative. Orefice told All About Seniors that with a state budget deficit, the assisted-living waiver program is a tough issue to address.

"On the one hand, money is tight. But we have 69 people on the waiting list, many of whom have spent down their private resources and are straining their caregiver's budgets."

Orefice added that through attrition, it will take the average person about one year to become eligible to participate in the waiver program. At least eight people have died or have had to be admitted to nursing homes over the past year while waiting for a spot to open up on the waiver program, she said.

While the administration and lawmakers support the concept of assisted living, in the shadow of a huge state budget deficit, it's the price tag that has become obstacle to impede passage of H5246/S506.

These companion bills would require the Department of Human Services to re-allocate funds to support the already federally approved assisted-living support services.

To neutralize the lawmakers' fears of the initiative's cost, consumer advocates are calling for "a half of loaf rather than a full loaf," at least for now.

Susan Sweet, consultant and elder advocate, stated if the General Assembly does not fund the entire 180 slots for lowincome elders that need assistedliving facilities, she hopes they would at least consider a phasein of 90 slots for fiscal year 2004, which begins on July 1.

No longer should state lawmakers create regulations to protect frail seniors, only to fail in allocating the necessary funding to fully implement mandated oversight activities.

While it might be a challenging endeavor, \$90,000 can be reallocated to fund this new nursing position, especially when the state has a \$200 million-plus budget.

The state's continued failure to fund the federally-approved additional 180 units in its Medicaid assisted-living waiver will keep low-income seniors from choosing to reside in a less restrictive care environment. The state will ultimately pick up twice the cost of care for those seniors on the waiting list who are forced to enter anursing home setting. For this reason, this writer calls for an expanded assisted-living waiver program.

Even with a state budget deficit, Carcieri and state law-makers must not be "penny-wise and pound foolish" when determining which legislative proposals will live or die. It's the right thing to do.

Herb Weiss is a Pawtucketbased writer covering aging and health care issues for The Times. His articles also appear in state and national publications. He can be reached at hweissri@aol.com.

#### No cure for Alzheimer's disease yet

QUESTION: After a comprehensive medical and geriatric assessment, my mother has been diagnosed as having Alzheimer's disease. This is our family's first experience with this disease and we are trying to put together a compassionate

#### **Senior Beat**

own family members and they will be unable to move and swallow.

While research is going on improve treatments and find the keys to prevention, there is no cure for this disease at this

affiliated with the national organization.

Among the resources available are a telephone help line, speaker's bureau, newsletter, and information on support groups across the state for

#### Last-minute push made to increase oversight of assisted-living facilities With only days left before Lt. Gov. Charles J. Fogarty, Last month, a resolution was

the Rhode Island General Assembly adjourns, the state's Long-Term Care Coordinating Council (LTCCC) and aging advocates have called on Gov. Donald Carcieri and lawmakers to beef up the regulatory oversight of the state's assisted-living facilities.

NO TIME TO EXERCISE?

chair of the LTCCC, along with its 37 provider and consumer members, warned that without adequate state oversight of assisted-living facilities, a lax survey process might become life-threatening to residents, especially in the midst of an emergency evacuation.

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passed by the LTCCC that called for the hiring of one additional surveyor to ratchet up the oversight of the state's assistedliving facilities.

The resolution was sent to the governor, legislative leaders and finance chairs. Aging advocates also lobbied for increased state funding to create this new surveyor position at budget hearings in May.

In addition, Fogarty has written two letters to Carcieri highlighting his concerns, warning of potential tragedy if oversight is not stepped up.

Currently, there are 72 assisted-living facilities in the state capable of servicing 3,538 residents, with an additional 155 new assisted-living beds in nursing homes. The Department of Health also expects another seven assisted-living projects to come on-line over the next 18 months.

Maureen Maigret, the LTCCC's executive director, warned it is impossible for the state - which has just one fulltime staff surveyor assigned to the assisted-living sector - to survey all residences in a given year and quickly respond to complaints.

Carcieri, along with lawmakers, has cited budgetary woes as the rationale for inadequate oversight of the state's assistedliving facilities. But Fogarty, aging advocates and assisted-living providers know where their pot of gold lies.

In the last calendar year, license fees from assisted-living centers generated about \$194,000, according to a staffer at Fogarty's office.

"Although these monies go into the general fund it would seem reasonable, at the very least, to allow for the funding of at least one additional person to survey assisted living," Fogarty

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said.

Fogarty told All About Seniors that last year lawmakers amended state laws to further define which persons are appropriate for residing in assisted-living facilities.

"It is critical that we have timely inspections of residences by Department of Health regulatory staff to ensure that residences are in compliance with this new definition, as well as other new requirements for training and staff," he said.

"Without adequate monitoring and oversight of residences, we are putting frail elders at risk of inadequate care," Fogarty warned.

"We are also jeopardizing the safety of any residents who may be improperly residing in buildings that do not meet the more stringent fire codes required for placement of persons unable to evacuate an assisted-living residence without assistance."

Roberta Hawkins, state ombudsman at the Alliance for Better Long-Term Care, strongly agrees with Fogarty's assessment that there are residents in assisted-living facilities who are beyond the level of care specified by state law.

sight to assure that residents are appropriately placed will most surely lead to inappropriate care, as well as a potentially tragic situation," said a very concerned Hawkins.

"In F2-licensed assisted-living facilities, where fire codes are more stringent, we see a growing number of residents who are not capable of self preservation who might not even be able to quickly get out of a facility on fire."

Raymond Rusin, chief of facilities regulation at the state's Department of Health, acknowledged his department does not have enough staff to fully comply with state laws.

"I do the best I can with what I have. We deal with complaints and emergencies first." he said, noting his surveyors prioritize inspections by targeting those facilities with previous noncompliance issues.

"Even if I trim the surveyor process down to just monitor health and safety and quality of the services delivered, it would take at least two full-time surveyors to perform inspections on the existing 72 licensed assisted-living facilities," he said.

Carcieri spokesperson Jeff Neal, in a recent newspaper article, agreed with aging advocates who are concerned that the state's Department of Health does not have enough staff to perform its mandated oversight duties.

Neal was quoted as saying Carcieri is "working to free up more resources to tackle this problem." The necessary funds to hire additional surveyors might well come from the governor's "fiscal fitness program," he said. The time to act on that is now.

In the wake of the tragic Station nightclub disaster, the governor and lawmakers have

found the political will to tighten up the state's fire-code regulations, along with providing the funds to hire more inspectors. It has been reported the state's proposed \$2.8 billion budget will provide funding for additional staffing for the fire marshal's office. It was the right thing to do.

But while we move quickly to protect the patrons of bars and restaurants, we must not forget the Ocean State's frail seniors, especially the 3,700plus who reside in the state's assisted-living facilities. They must also be protected must from life-threatening situations like fires.

At press time, horse trading at the Statehouse will finalize the state's 2004 budget. Hopefully, in the 11th hour, Carcieri and House and Senate lawmakers will provide adequate funding to ratchet up the number of surveyors in the Department of Health.

Failure to adequately fund the state's oversight efforts of assisted-living facilities, which is already mandated by state law, might ultimately become tomorrow's tragic headline in The Times.

Aging advocates, provider groups and regulators are all on the same page - they call for the Department of Health to be given the needed resources by Carcieri and lawmakers to perform its state-mandated oversight duties.

Simply put, for residents of assisted-living facilities and for state taxpayers, it's the right thing to do.

Herb Weiss is a Pawtucketbased writer covering aging and health care issues for The Times. His articles also appear in the state and national publications. He can be reached at hweissri@aod com



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## State lawmakers OK many senior initiatives

As this year's legislative session came to an end, even the widely publicized tight state budget did not keep aging advocates from seeing some of their legislative proposals get passed by the House and Senate.

With the passage of companion legislative proposals (H5841/S876), the state's long-term care ombudsman law will be revised to reflect federal law, expanding the scope and authority of the state's ombudsman program.

The new statute changes will require the state ombudsman to represent the interests of nursing facility residents or clients of service providers before governmental agencies.

The state ombudsman will also be charged with seeking administrative, legal and other remedies to protect the health, safety, welfare and rights of Ocean State seniors.

Another legislative proposal also got the thumbs-up from law-makers. With the passing of companion proposals H5418/S506, new state funds totaling \$300,000 will pay for nursing facility care of legal immigrant Rhode Island seniors who are not eligible for Medicaid.

Meanwhile, the Rhode Island General Assembly proved that it sees the value in preventative medicine and how it can ultimately save health care dollars.

The Ocean State Adult Immunization Coalition requested about \$103,000 in new state funding to expand the coalition's efforts to get the word out about



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the importance of seniors getting influenza and pneumococcal vaccinations. While not receiving the whole loaf, lawmakers gave a half loaf instead — about \$50,000.

With state dollars now allocated up front, large savings will be realized down the road. The cost of a flu shot is \$15 and a pneumonia shot is \$30.

If a senior is hospitalized, the average length of stay for an older person with influenza is five days, costing \$12,000. Meanwhile, treatment in a hospital for pneumonia lasts six days at the cost of \$12,000. That's huge savings.

Lawmakers also passed legislation to make pharmaceutical drugs more affordable to Rhode Island seniors.

With the passing of companion proposals H5237/S374, persons eligible to participate in the Rhode Island Pharmaceutical

Assistance to the Elderly Program (RIPAE) who also have prescription drug coverage through a health plan, will now be allowed to use RIPAE to pay for an individual prescription drug once they reach the maximum level of coverage for that drug.

Also, companion measures H5239/S378 passed, expanding RIPAE to allow persons age 55 to 61 on Social Security Disability Insurance to receive a 15 percent RIPAE co-payment in addition to their RIPAE drug discount rate.

As previously reported in All About Seniors, an 18-month study of B.D.O. Seidman, a consulting firm hired by the state Department of Human Services, found that Rhode Island was underpaying its nursing facilities in excess of \$30 million annually.

It seems the General Assembly agreed with that report's assessment and made a partial allocation of new Medicaid dollars to overhaul the state's ailing Medicaid system.

With the passage of the state's budget, nursing facilities will receive a total of \$18.8 million in state and federal dollars—a three-year phase in will bring the total federal and state dollars to \$30 million.

On the other hand, some aging agenda items went down in flames.

Aging advocates called on Gov. Don Carcieri and state lawmakers to allocate taxpayer dollars in the FY 2004 budget to allow more low- and moderateincome persons to choose Medicaid waiver-funded assisted living.

Although the federal government has already approved an additional 180 units in the state's Medicaid assisted-living waiver program, state funding of this initiative is required.

No funding in this year's budget ensures that low- and moderate-income seniors will continue to be denied an option of choosing a less restrictive level of care, an option that higher income seniors have.

Additionally, lawmakers chose not to pass companion proposals (H5478/S299), which would have allowed Rhode Island residents to buy prescription drugs from Canadian pharmacies, where they are routinely cheaper.

Finally, in the aftermath of the tragic Station nightclub fire, the General Assembly and governor moved quickly to tighten regulations and to hire additional staffing at the Fire Marshal's office to protect the patrons of bars and restaurants from fire. However, beefing up the state Department of Health's regulatory oversight of the Ocean State's assisted-living facilities, where 3,700-plus seniors reside, did not receive one dime in funding in the FY 2004 budget.

An assisted-living provider group, aging advocates, the state's Long-Term Care Coordinating Council, the state ombudsman and officials at the state Department of Health, have all called for new state dollars to fill one full-time surveyor

position (a nurse) to ensure that assisted-living residences across Rhode Island are inspected on a more timely basis.

Last year, state lawmakers passed legislation to protect frail Rhode Island seniors who receive assisted-living services.

As this legislative session ends, the governor and General Assembly have failed to allocate the necessary funding in the FY 2004 state budget to fully implement state law that would result in the inspection of the state's 72 assisted-living facilities and 155 assisted-living beds in nursing facilities in a timely manner.

According to the state's Department of Health, another seven assisted-living projects are expected to be up and running over the next 18 months.

The ball now moves to Carcieri's court to either use contingency funds in his office budget or to take administrative action to hire more assisted-living inspectors.

While it has been reported that the governor is amenable to using funds flushed out by his "fiscal fitness program" to pay for a new surveyor position, the time to act is now, rather than later

Acting now to fix this policy glitch is sound public policy. I am sure that Rhode Island seniors and taxpayers will agree.

Herb Weiss is a Pawtucketbased writer covering aging and health care issues for The Times. His articles appear in the state and national publications.



### **AARP** study finds telemarketing scams are being underreported

"This is an offer that you have to make a decision on immediately."

Sound familiar?

In the Ocean State and across the nation, aging baby boomers and seniors are receiving telemarketing calls, some with this message, ultimately falling victim to the fraudulent pitch.

According to a recently released AARP study, a growing number of older persons who fall prey to unscrupulous callers are just too embarrassed to admit their mistakes, even to authorities.

The study found older victims grossly underreport telemarketing fraud. However, persons receiving proper counseling by trained peer volunteers are less likely to fall victim to fraudulent pitches.

The "Off the Hook" AARP study found 73 percent of investment fraud victims did not acknowledge having lost money, and only half of lottery fraud victims reported recent losses.



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The AARP findings came from a three-step study, funded by a federal grant from the U.S. Department of Justice, which examined telemarketing fraud and tested interventions designed to prevent further losses.

First, the AARP studied how different intervention messages, presented to actual and potential telemarketing fraud victims by peer counselors, affected the listeners' responses to subsequent telephone sales pitches. Peer counselors called people at home to share information about telemarketing fraud and explained steps to avoiding fraud.

Days later, counselors again contacted the homes and delivered a pitch mimicking a fraudulent offer, using the same methods as the telemarketers. In almost every instance, people who heard intervention messages were far less likely to respond to the "sting" solicitation.

"We saw that peer counseling about the specific dangers of telemarketing fraud and how to handle come-ons is effective," said Bridget Small, director of AARP consumer protection.

"With two-thirds of victims having a tough time spotting the danger signs, there is a tremendous need to fight the problem."

AARP then conducted telephone interviews with known victims of lottery and investment scams, and a sample of the general population, all over age 45, to determine the accuracy of reporting fraud.

Overall, the majority of those called did not admit to their losses. About 73 percent of the investment victims did not acknowledge having lost money recently, even though law enforcement had contacted each of them.

Meanwhile, only 50 percent of the lottery victims reported recent losses.

John Palangio, director of consumer protection at the Office of the Rhode Island Attorney General, told All About Seniors that he agreed with the findings of the AARP study.

"Rhode Island seems to be following the national trend identified in this study," he said, in that Ocean State seniors who are victims of telemarketing fraud oftentimes do not report the scam.

"We usually find out about scams when we visit senior

high rises during our biweekly outreach program," said Palangio.

"It's incredibly embarrassing to them, combined with a lack of education as to what steps need to be taken if your scammed."

Unscrupulous persons involved with telemarketing fraud prey on the senior's trust, said Palangio.

"Older people are just more trusting than the younger generation — they are more apt to give out credit card numbers, Social Security numbers and even bank account information," he said.

So how does one protect himself against telemarketing scams?

Palangio urged Ocean State seniors — even aging baby boomers — to register with the "Do Not Call" program. By dialing 888-382-1222, you can request that out of state telemarketers not call you.

Barbara Peters, of AARP's state office, gives a thumbs-up to this new federal program,

which kicked off on the East Coast on July 7.

langio. "This program puts the con-"It's incredibly embarrassing trol of the telephone back into them, combined with a lack the hands of seniors," she said.

Meanwhile, "never, ever, under any circumstances, give out personal information, even if it's basic information like you live alone," said Palangio. "It's not anybody's business to know this type of information."

Finally, take control of the telemarketer's call, Palangio urged, by become more aggressive

Just hang up when the caller tryes to strong-arm you, he said.

To report telemarketing scams, call the office of Attorney General Patrick Lynch, consumer protection, at 401-274-4400, ext. 2357.

## Survey: Seniors worry more about their well-being than terrorism

One month after the horrific terrorist attacks in Washington, D.C. and New York City, retired elementary school teachers Lillian Mordas and her husband Joseph, of Beacon, N.Y, traveled to Pawtucket to attend the Blackstone Valley Tourism Council's Elderhostel program.

After living through the Depression, World War II, the Korean and Vietnam wars and the deadliest terrorist attack on America, the Mordases stated that acts of terrorism would not keep the couple grounded.

"Tourism should not be stopped by fear," Lillian told All About Seniors in a column printed shortly after Sept. 11, 2001.

Meanwhile, other stories appeared in the news about seniors going on with their lives and taking trips overseas after the terrorist attacks, when a majority of the population would not even consider flying.



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By Herb Weiss

Although terrorist threats are less likely to rattle seniors, reflecting the Mordas' philosophy, threats to an older person's personal health and wellbeing can cause great concern, reveals recent survey findings released by the Washington, D.C.-based National Council

on Aging (NCOA).

The telephone survey, funded by MetLife Foundation and part of part of new NCOA/MetLife Foundation project to increase civic engagement by older Americans, revealed some interesting things.

Although 40 percent of those age 60-plus are worried about physically caring for themselves and 42 percent fear losing their memories, only 35 percent of the respondents feared terrorist attacks.

But the survey respondents expressed more worry about threats their families may encounter than the potential aging-related problems that they may someday face.

The findings revealed 63 percent worried about their children and grandchildren being exposed to drugs; 54 percent were even worried about the lack of employment opportunities for their younger family

members.

A little more than a quarter of the respondents believe that having "something meaningful to do" or "having some good friends" were just the right activities that could enhance their future quality of life.

In terms of the most important things to do within a year of retirement, 27 percent of the older respondents said their top choices included participating in a meaningful volunteer experience, while 22 percent chose visiting family and friends.

"The survey findings are important because they validate the need for efforts to facilitate civic engagement of older Americans," said President and CEO James P. Firman, who heads the nonprofit group.

After digesting the survey results, I am sure many will agree you don't have to be older than age 60 to have some of these concerns, such as being admitted to a nursing facility, or losing the ability to take care of yourself. Neither do people want to slowly lose their memory.

If you are a gambler, you'll like the statistical odds of a person becoming institutionalized — about 25 percent of all people older than age 65 will spend some time in a nursing facility at some point in their life.

In the long run, being surrounded by family and friends who can take on caregiver responsibilities — combined with available home care services and day care services — might just keep you at home a little longer.

Like many persons who have relatives who are afflicted by Alzheimer's disease, we cringe when names can't be remembered or when we can't find our keys or Palm Pilots.

We wonder if this could be our lot in later life. Troubling as it may seem, there is even increasing evidence for a hereditary type of Alzheimer's dis-

Like Lillian and Joseph Mordas, we must continue to go about our daily activities in the face of terrorism.

But for those seniors, even aging baby boomers who constantly worry about forgetfulness and not being able to take care of themselves, healthy aging may be as simple as a good diet, a healthy lifestyle and good genes, combined with a supportive family and network of friends who can serve as caregivers.

These tips can most certainly be the "fountain of youth" that can ultimately reduce the ravages of aging and losing your independence.

Herb Weiss is a Pawtucketbased writer covering aging and health care issues for the Times. His articles appear in state and national publications. He can be reached at hweissri@aol.com

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# 'Maggie Growls' inspires seniors at Gray Panthers' Summer Prowl

The late Maggie Kuhn's legacy was kept alive last Friday at a showing of a "Maggie Growls," a documentary film that vividly captured the amazing unstoppable Kuhn, founder of the Gray Panthers, who fought tirelessly to stamp out ageism where ever she found it to exist.

With temperatures soaring well into the 90s, more than 75 seniors came the Gray Panthers' 2003 Summer Prowl, hosted by this columnist, at the Leon Mathieu Senior Center to watch the 56-minute documentary film that had recently aired nationally on PBS.

Pawtucket's Gray Panthers' Summer Prowl fund-raiser, sponsored by the Rhode Island Foundation, Citizens Bank and the Rhode Island Council for the Humanities, was the third of four Summer Prowl events held around the Ocean State.

Throughout the documentary, created by Barbara Attie and Janet Goldwater, seniors chuckled as they watched the film, relating to Kuhn's personal experiences of growing older, especially the tactics she often used to get her point across.

Kuhn spoke her mind on a variety of topics, often times to her staff's dismay. For instance, she insisted on publicly talking about sex, stressing seniors were not sexless beings. As Kuhn so daftly put it in the documentary, "sex and learning only end when

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rigor mortis sets in."

The documentary took us through the various phases of Kuhn's professional life.

She began her career working at the YWCA in Cleveland organizing poor working women. Ultimately, she would put in more than 20 years in the Social Education and Action Office of the Presbyterian Church, a job that gave her a front-row seat to the emerging national social movements that took place in the 1970s

Kuhn never married, and in her later years took on the demanding and stressful role of being a caregiver to her ailing parents. Even with her hectic schedule, this social activist found time to date both older and younger men. She also taught a course on ethics and poverty at San Francisco Seminary in Marin County.

Kuhn would later say her strong interest in the aging issues facing the nation's elderly was sparked after she attended the 1961 White House Conference on Aging, which she attended as a church observer.

Being forced into retirement was the pivotal moment that propelled Kuhn into a role as an aging advocate, which ultimately led to the founding the Gray Panthers in 1970, with the help of five of her friends.

Kuhn's little group of five would later grow to more than 100, the documentary noted. Two years later, the group would take on the well-recognized moniker, the Gray Panthers. In 1973, 11 chapters of the Gray Panthers were opened. In 1975, the Gray Panthers held its first national convention in Chicago.

The Gray Panthers quickly grew into a national organization when in 1990, the aging advocacy group opened a public policy office opened in Washington, D.C.

The advocacy group even gained official non-governmental organization status at the United Nations.

The documentary film, using short segments of animation, displayed Kuhn's use of humor, common sense and street theater as effective tools to fight against mandatory retirement laws. She and her Gray Panther advocates would also push hard for universal health care, nursing home reform, shared housing and consumer protection.

Kuhn even fought stereotypes such as "old age is a disease," on the Johnny Carson show and at scores of congressional hearings.

Peppered throughout the documentary film were dozens of Kuhn's quotes, revealing her dazzling wit and wisdom.

"Old age is an excellent time for outrage. My goal is to say or do at least one outrageous thing every week," the charismatic Kuhn said.

Furthermore, Kuhn also gave her thoughts about retirement, too: "Men and women approaching retirement age should be recycled for public service work and then companies should foot the bill. We can no longer afford to scrape people."

Kuhn even knew the secrets

of politics — that a vocal group can change the way local, state and national politicians do business. She told her followers, "Speak your mind even if your voice shakes, for well-aimed slingshots can topple giants."

Dr. Janice Okoomian, a post-doctoral fellow at the John Nicholas Brown Center for the study of American Civilization at Brown University, followed the showing of the documentary. The guest scholar put a historical and cultural perspective on Kuhn's Gray Panther movement.

The two-hour program ended with a dazzling performance by Talia, an oriental dancer, capped off by a musical jam session by a local senior band with Cal Gravel playing harmonica, Danny Dipalma playing clarinet and Lionel Noel playing guitar.

The Gray Panthers are truly an intergenerational alliance, of both young and old, who work together to confront social issues that impact all age groups, using advocacy to solve societal problems. This statement sums up Kuhn's lifelong activist philosophy.

Rhode Island's Gray Panthers continue to fight on behalf of their founder, Kuhn, and the state's growing elderly population.

For more information or to join, write, Rhode Island Gray Panthers, 32 East Ave., Pawtucket RI 02860, or call 401/725-1122.

Columnist note: At this event, it was noted that State Director Richard Bidwell was recently admitted to a hospital. Send your "get-well" cards to the above address.



# Survey: Aging baby boomers see work as necessity in their retirement years

Once upon a time, Americans dreaming of retirement pictured their new lives full of travel, leisure and spending lots of time with their children and grandchildren.

However, according to a recently released AARP poll, aging baby boomers no longer buy into this dream. They believe they can no longer afford to retire without working a job.

The findings of the AARP survey suggest that longer lifespans and a need for money will ultimately shape the aging baby boomers' remement plans, pushing them into the job market after retirement from their current positions.

Boomer-age workers, considered to be the best educated of any recent generation, say they are poised to take service jobs when they retire from their curtent positions.

The new national AARP survey, titled "Staying Ahead of the Curve 2003: The AARP Working in Retirement Study," found that many of the workers between the ages of 50 and 70 plan to work far into what has traditionally been viewed as their "retirement years," nearly half (45 percent) even envision themselves either working into their 70s or later.

"Our research tells us that older workers will continue to have a prominent and increasing role in the labor force in the coming decades," said AARP Director of Policy and Strategy John Rother, when he



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announced the results of this latest study. "And they will step up and fill the jobs that are most likely to need workers."

The new results of the AARP survey does not surprise Kathleen Connell, state director of the AARP-Rhode Island.

"Given the uncertainties in today's economic times and concerns about the rising cost of health care and health care insurance, people are rethinking their retirement plans and electing to remain in the workforce longer," she said.

Connell's thoughts are reflected in the findings of the AARP survey.

Reasons for working into retirement years varied, researchers noted, but most of the pre-retirees surveyed indicated their motivation was a result for "a need for money" (22 percent).

On the other hand, 17 per-

cent said that a "need for health benefits" will force them to keep working. Other leading reasons cited were: a desire to remain "mentally active" (15 percent) and to remain "productive or useful" (14 percent).

The AARP survey confirms the work lives of Americans already are getting longer. The Bureau of Labor Statistics reported earlier this year there has been nearly a 30 percent increase in the number of people ages 65 to 74 who are in the labor force.

The Census Bureau reported that between 1998 and 2000 alone, the number of workers 65 to 74 increased nearly 14 percent, from 3.16 million to 3.59 million.

The AARP report cited a number of recommendations for the retirement security of older Americans, including "the prompt enactment of a prescription drug benefit in Medicare (as)...an essential first step..." Also recommended was positive action to strengthen Social Security and the private pension system and to encourage individuals to save and invest wisely.

The new AARP poll also showed 53 percent of workers aged 50 to 70 expect to stop work before age 70. That includes 30 percent who said they would stop between 65 and 69.

Meanwhile, 27 percent said they would work until they were in their 70s (19 percent between 70 and 74; 8 percent between 75 and 79), and 18 per cent said "80 or older", "neve stop working, " or "as long a able." The remaining two per cent said they didn't know when they would stop working

When asked to describe the specific job they planned for retirement, six percent cited teaching; four percent, office support; four percent, craf work; four percent, nursing and health care services (two percent for each of these cate gories); three percent, retains ales; three percent, consulting and three percent, farming and ranching. Additionally, 16 percent said they would have their own business or work for them selves.

The phone survey, conduct ed for AARP by Roper ASW from April 9 through June 5 consisted of interviews with 2,001 individuals between the ages of 50 and 70 who are employed on a full-time or part time basis. Individuals were selected through random-digidialing.

The new survey follows of the heels of last year's AARI "Staying Ahead of the Curve 2002" poll of workers ages 45 to 74, which found a large majority (69 percent) plan to work it some capacity in their retire ment years.

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#### **Senior Briefs**

#### **SENIORS**

## Carcieri makes advances on senior issues

Gov. Donald Carcieri has been ratcheting up the level of aging programs and services offered to Ocean State seniors and persons with disabilities.

At a Friday press conference held at the Statehouse, Carcieri brought good news to a crowded room. He announced the state's successful efforts in getting a \$749,000 federal grant to establish an Aging & Disability Resource Center to assist older Rhode Islanders and disabled adults in getting better access to a myriad of the state's programs and services.

Scheduled to open at the John O. Pastore Complex in Cranston by the end of next year, Carcieri noted the newly established resource center will provide one-stop shopping for those seeking information about the state's programs and services for seniors and persons with disabilities.

The resource center will be "accessible, user-friendly and efficient," added Carcieri.

Moreover, the Cranston complex is centrally located and is headquarters to both the Department of Elderly Affairs (DEA) and Department of Human Services (DHS). Fifty-five percent of the state's senior population lives within 10 miles of the site.

Ine Republican governor told state officials, seniors and elderly advocates at the press conference that the large federal grant, obtained from the U.S. Department of Health and Human Services, would also allow DEA and DHS to establish three mini-centers in communities across the state (no locations were mentioned).

"I am particularly excited about [the three mini-centers], since it will bring these services into our communities," said Carcieri.

for federal funding through this initiative," said Director Adelita



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S. Orefice, of the DEA, who told the crowd Rhode Island was one of the 12 states receiving funding.

According to Orefice, a large portion of Rhode Island's population will benefit from the state's new resource center.

"Rhode Island is home to more than 190,000 persons age 60 and older. That represents 18 percent of our population. We have 152,000 citizens age 65 and older rank sixth in the nation in this category," she said.

Roberta Hawkins, executive director of the Alliance for Better Long-Term Care, gives the resource center a big thumbs up.

"As a result of the new center, seniors and caregivers will no longer be sent in 20 different directions to see if they quality for state and federal programs and services," she said. "One-stop shopping would make the state's well-known bureaucratic maze less intimidating, cumbersome and frustrating to maneuver."

At this press conference, Carcieri also announced the creation of a cabinet-level group co-chaired by Orefice and one of his senior staff whose members. Members included the Departments of Administration, Elderly Affairs, Health, Human Services, Labor and Training, and Mental Health, Retardation and Hospitals.

By issuing Executive Order 03-15 to establish the Governor's Cabinet on Chronic and Long-Term Care, Carcieri said it would develop a strategic plan to effectively coordinate the state's bureaucracy to support the needs of Rhode Islanders suffering from chronic or disabling conditions.

Carcieri would turn to his cabinet, modeled on the existing Children's Cabinet, for expert advice on policy questions concerning provider, quality, new technology and delivery issues.

Additionally, this new cabinet would provide the governor with briefing advisories on information collected from state agencies and the private sector that have been analyzed.

Richard Bidwell, executive director of the Rhode Island Gray Panthers, who also chairs the Senior Agenda Consortium, said it makes good sense for different state departments who have responsibility for long-term care to work closely together in planning and coordinating the delivery of services.

"This coordination would avoid unnecessary duplication of programs and expenditure of resources. Problems resulting from our aging population must be dealt now rather than waiting for them to develop in the next 10 years."

However, some senior advocates warn the new cabinet might ultimately lead to a consolidation of state departments headed by one director or the merger of DEA into the DHS. Rhode Island's senior advocates have steadfastly opposed any policy initiative or law that would weaken DEA's independence as a state department.

Lt. Gov. Charles Fogarty, who chairs the state's Long-Term Care Coordinating Council (LTCCC), called Carcieri's high-level agency cabinet very much in sync with the LTCCC's efforts to develop sound policies for Rhode Island's growing senior population.

"Any way we can coordinate state resources when revenues are flat is important," said Fogarty, who noted the new cabinet complements the efforts of the LTCCC, whose membership includes providers, consumers and state department directors.

Fogarty said Carcieri's executive order just formalizes the LTCCC's 1997 efforts, which resulted in passage of a state law requiring state departments to better coordinate and develop a "vision plan" that would plan for the future needs of the state's elderly population.

A Carcieri staffer told All About Seniors the creation of a high-level cabinet to address the needs of seniors and persons with disabilities is in line with his campaign pledge to coordinate the resources of state agencies in their delivery of senior programs and services.

Maybe one of the first actions of Carcieri's new Long-Term Care Cabinet will be to swiftly implement DFA's state-wide policy recommendations for elder drivers.

This writer hopes that DEA's final elder driving report will protect both the public's right for protection against seniors who shouldn't drive and the seniors' right to drive. This won't be an easy task. We'll wait and see how this thorny political issue will be handled by Carcieri's Long-Term Care Cabinet.

# Aging baby boomers lack basic understanding of financial planning

A new study finds that aging baby boomers are way behind the curve when it comes to understanding the intricacies of financial planning for their later years.

The findings from AARP's new 2003 Consumer Experiences survey revealed that aging baby boomers, ages 45 and older, were judged average, with some potential for improvement, when it comes to understanding consumer issues based on financial planning.

The newly released survey examined boomers' experiences with financial products and services, targeting credit behavior, fraud and financial planning. Protecting their financial security during retirement becomes more difficult when they only understand "the basics" about financial planning.

"Consumers age 45 and older are the fastest-growing and most valuable segment of the financial marketplace." said



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Christine Donohoo, associate executive director at AARP in a written statement.

"However, only half of the 1,500 respondents could correctly answer fundamental financial questions, like 'what charges and fees do no-load mutual funds have'; 'what does the FDIC cover in investment losses'; and 'does diversifica-

tion of investments decrease risk."

According to the survey, although the middle-aged and older respondents are lacking knowledge of basic financial and investment terms, they do understand some aspects of personal credit, including such things as how failing to make timely credit card payments can impact their credit rating.

Furthermore, while acknowledging room for improvement, the age 45-plus consumers also report managing their debt levels well, with only seven percent saying they have more debt than they can financially handle.

"We need to better educate consumers in basic financial planning," said Donohoo. "Without the planning, many consumers will have a rough time preparing for their futures."

For now, most information comes from family and friends instead of professionals who are trained at answering these issues.

Meanwhile, the AARP survey also found that 98 percent of all the respondents surveyed have taken steps to protect their identity and credit that have included ordering a copy of their credit report and limiting the number of identification cards they carry. Nationally, identity theft is one of the fastest-growing crimes.

The survey found the number of aging baby boomers reporting bad purchasing experiences in the past year has increased over the past four years.

And while more consumers took some type of action, including complaints to the Better Business Bureau, in 2003 compared with 1999, overall respondents are slightly less satisfied in 2003 with the action they took.

Of those respondents who say they had a bad experience in the past year, 37 percent say

they were victims of a major swindle or fraud.

The survey findings revealed the aging baby boomer respondents own a variety of investment products.

Sixty percent own a 401(k) retirement plan; 39 percent invest through a mutual fund account; and 36 percent own individual stocks.

The survey found the age 45-plus respondents are least prepared for retirement.

Only 38 percent report having enough set aside for; 24 percent report having enough set aside for long-term care expenses. Meanwhile, a whopping 15 percent have "nothing at all" set aside for retirement

African-Americans and Hispanics that were surveyed are more likely to carry a higher debt ratio, are less likely to hold financial investments, and are more likely to have bad experiences with major purchases and products.

However, there are some

positives however. Both groups seek senior business personnel when they complain about a product or service, and African-Americans are more knowledgeable than others surveyed in understanding the impact of on-time bill paying and how it reflects on their credit report.

Aging baby boomers and seniors who, like many of the AARP survey respondents who lack the basic understanding of financially planning for their retirement years, can easily resolve the problem by obtaining the services of a good financial planner.

It can be as simple as that, ultimately making enhancing the quality of life of your retirement years.

Herb Weiss is a Pawtucketbased writer covering aging and health care issues for the Times. His articles appear in state and national publications. He can be reached at hweissri@aol.com

# **Program helps identify wanderers with Alzheimer's disease**

Last month, local media reported on the wandering of a person with Alzheimer's, bringing this caregiver issue to the public's attention.

Bob Cunniff, a former teacher from Scituate and a victim of Alzheimer's disease, wandered away from his home in frigid weather. Tragically, the body of this 67-year-old would be found 500 feet from his house.

Days later, Jackie Tomasewski, a 63-year-old woman with Alzheimer's disease, walked away from the Pawtucket-based New Horizons Adult Day Care Center.

In the chilly afternoon, taking a public bus, she would later wind up near Lincoln disoriented. Discovered by the Lincoln Police, Tomasewski was found lying in the bushes, and ultimately was returned safely to her family.

For Cunniff's family, his wandering would end in tragedy, reflecting a statistic cited by the R.I. chapter of the Alzheimer's Association. That

is, if a wanderer is not found within a 24-hour period, the survival rate drops to 46 percent.

Tomasewski managed to beat the odds.

Marge Angilly, family education coordinator for the R.I. chapter of the Alzheimer's Association, told All About Seniors about a program that can help caregivers find family members with Alzheimer's if they wander off. The Alzheimer's Association Safe Return Program is specifically designed to help identify and locate individuals with the devastating disease who are lost, and to return them safely to their homes.

This program, created by the U.S. Justice Department in 1993, is a "safety net" for those with memory impairments who wander or get lost away from home, said Angilly.

Angilly explained that registered memory-impaired individuals wear a bracelet or necklace with their common first name and a message which identifies them as having a memory impairment. The message also provides a toll-free phone number and the person's personal identification

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number.

The person also receives clothing labels, a key ring, a wallet identification card and a lapel pin. A refrigerator magnet provides the caregiver with the toll-free number and personal ID for easy reference.

Furthermore, Angilly said photos and information of all persons registered in the program are stored in a database in a 24-hour emergency crisis center.

When a person is missing, caregivers call the toll-free number to report the incident.

The crisis center then provides local police with information and a photo. The local chapter of the Alzheimer's Association is also notified and staff from the chapter will contact the family to offer support.

When a missing person is found who is wearing a bracelet or necklace, a call can easily be made to the toll-free number to notify the caregivers that their loved one has been found.

The late James Travers, a former general counsel and vice president of the Providence Washington Insurance Company, was diagnosed with Alzheimer's disease in his early 70s. His wife, Kay, registered him in the Safe Return Program.

By learning more about her husband's affliction, Kay realized that he might wander away from home someday. Luckily, he never did during the six years he was inflicted with the devastating disease.

Registering in the program "gave me peace of mind," said the East Providence resident. "It was the right thing to do for me."

Out of the 23,000 persons

with Alzheimer's in Rhode Island, only 160 have been registered in the Safe Return Program.

Hopefully, more caregivers might avail themselves to taking advantage of this worthy initiative, one that will help to quickly locate a wanderer, keeping them out of harm's

Call 421-0008 for an application or to register in the R.I. chapter of the Alzheimer's Association, Safe Return Program, or you can register on-line at www.alz.org. The cost is a one-time fee registration of \$40 to register a person with Alzheimer's disease and an additional \$5 fee for the caregiver.

The R.I. chapter of the Alzheimer's Association will be hosting Alzheimer's Awareness Week from Nov. 17-21. Call 421-0008 for more information about events to be held throughout this week.

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# Fogarty seeks legislative solutions to ever-increasing pharmaceutical costs

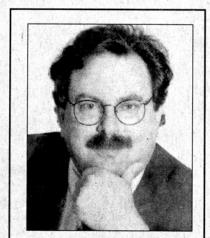
In his weekly radio address, President George W. Bush sent a message to America's seniors that stated his complete overhaul of Medicare was one of his administration's top accomplishments of 2003.

In his brief message, the president bragged that his signing the Medicare Act of 2003 into law was "the greatest advance in health coverage for America's seniors since Medicare was founded nearly four decades ago."

Not so, according to Lt. Gov. Charles J. Fogarty, chairman of the State's Long-Term-Care-Coordinating Council, who charged that the recent Medicare changes are a "place-bo" and urged Congress to "go back to the drawing table to put in place a drug benefit that will truly benefit all Rhode Island seniors."

Until Congress either repeals or modifies the new changes in Medicare, Fogarty, who chairs the Long-Term Care-Coordinating Council, has moved to reduce the state's health care costs, making prescription drug costs more affordable to seniors.

On Dec. 2, as he unveiled a 10-page, multi-point plan entitled "Health Care Reform 2004: Moving Toward Excellence," Fogarty presented a series of



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proposals that would improve prescription drug coverage, and would increase the purchasing power of the state's health care dollar, help small businesses and the uninsured purchase health coverage, and promote quality and value by increasing accountability and oversight.

As for controlling costs and making prescription drugs more affordable, Fogarty's plan called for the creation of Rx RI. The proposal, modeled after the Maine Rx program, would allow all state residents who have incomes of 350 percent of the FPL or less an opportunity to purchase the drugs under discounted prices.

According to Fogarty, from 1997 to 2001, prescription drug spending increases ranged from 17 to 18.9 percent, making it one of the fastest-growing components of the health care industry. This has put extreme pressure on state budgets and has made it difficult for those who need prescription drugs to afford their medication.

Fogarty also called for the creation of a state preferred drug list (PDL). Currently, 33 states have PDLs or have passed legislation authorizing

them. In Michigan and Vermont, PDLs and pharmacy management programs have reduced the rate of growth by 11 percent. The University of Rhode Island, Brown Medical School and prescribers would set up the PDL.

Meanwhile, Fogarty's strategy for lowering prescription costs includes a study of the cost savings for coordinating state drug purchases. Drugs are currently purchased by four separate state departments, he said.

Fogarty also called for the full disclosure of drug costs. Advertising is contributing to double-digit increases in drug costs. This would mandate that drug manufacturers disclose the cost of advertising for drugs.

Additionally, Fogarty supports the expansion of the 340B Rx drug programs. This would allow federally qualified health care centers, like Thundermist Health Center, and other specified entities in purchasing drugs at very deep discounts. The state should assist other centers and entities with qualifying.

Last week's radio message from President Bush begins his public relations efforts to use the GOP's victory on reshaping Medicare to snare older voters into supporting Republican candidates.

At the ballot box, seniors must not be fooled by Bush's watered-down Medicare program, which puts the interests of special interest groups before seniors.

Older Rhode Islanders and seniors across the nation deserve a meaningful Medicare drug benefit program. Until seniors are protected by such a benefit, the responsibility of finding a political solution toward reducing costly pharmaceuticals falls at the state level. Fogarty has sparked this debate by

releasing his proposals on reducing the state's spiraling health care costs.

In the upcoming General Assembly session, overshadowed by huge budget deficits, Fogarty's proposals, turned into legislative bills, may fail to gain support from either Republican Gov. Donald Carcieri or the Democratic-controlled Statehouse if they fiscally impact the state coffers. That is a shame but a political reality.

The only viable solution may still lie with President Bush and the Republican-controlled Congress. Rhode Island's congressional delegation must continue their efforts inside the Washington, D.C. Beltway to either modify or repeal the Republican-crafted, Medicare-Lite law.

Our congressmen and senators must push for a legislative fix that would allow the federal government to negotiate lower drug prices with drug companies. The Republican-controlled Congress worked hard to keep this proposal out of the recently enacted Medicare law. In the upcoming congressional session, lawmakers must reconsider the proposal, one that might reduce out-of-pocket drug costs for seniors.

Thumbs up to Fogarty for taking the lead in the Ocean State in searching for viable solutions to skyrocketing health care costs. Now it is time for Bush and the GOP congressional leadership to listen to their older constituents, who want a meaningful Medicare prescription drug benefit in 2004.

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# Now's the time to exercise and stay fit

With older Rhode Islanders recovering from two snowstorms as the temperatures begin to dip, it's now the time of year to get to the local gyms.

In a written statement, members of the advisory board of the International Council on Active Aging (ICAA), the world's largest association for the senior fitness and wellness industry, give tips on how 50 plus adults can become and stay physically active.

Here's the ICAA experts' advice:

1. Get a checkup. Get your physicians advice as to whether you will require any special modifications before starting an exercise program. Get their sign off before you begin exercising.

2. Know your options. Examine your options before you begin to exercise. Programs range from a structured workout in a gym to enjoying a walk with members of the neighborhood walking club. Would you prefer taking a class or exercising by yourself? Are you a morning or night person? Does indoor fitness appeal to you, or would you prefer to play outside? Could you dedicate large blocks of time to physical activity or could you fit only shorter.



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more frequent intervals into your schedule? Be realistic about how you participate.

3. Start off slowly. Don't overdo it. A good way to start slowly is to discover your baseline. Record all your activities during each waking hour or for two- or three-hour time blocks, tracking how much time you are sedentary (e.g. sitting at your desk) or active (e.g. walking to the bus stop). At day's end, count how many hours you have and have not been physically active. Then look at when you could fit some short (e.g. 10 minutes) bouts of brisk walking into your day.

4. Make that date. Find a exercise buddy to work out with you and keep you motivated. Whether it's a friend to walk with in your neighborhood or a personal trainer in a gym, that appointment will make you commit the time and effort to walk or workout.

5. Set specific short- and long-term goals. Commit time and make sure your goals are as specific as possible. For example, on Monday, Wednesday and Friday, take a brisk, 10-minute walk in the morning before showering, at lunch time and after dinner. By being specific you plan your daily activity and make it a priority to accomplish. Long-term goals are also important. Is there an activity you would like to do that you feel physically incapable of at the moment, but may be able to do with a little effort? Set a long-term goal to help you do it.

6. Make your list. List the benefits you expect from your physical activity program, then make sure these are realistic and reasonable. Many people expect enormous benefits, such as losing 30 pounds in a month. When these benefits don't happen, they might feel disappointed and relapse because they feel like they've

failed. Try to make the benefits about things you can control, rather than an outcome (such as weight). Build your list of benefits as you increase your physical activity-you'll be surprised at how long your list becomes.

7. Make another list. List all the reasons why exercise is beneficial to your health. Being physically active can decrease stress or depression, make stronger bones, result in greater strength and flexibility. It can also help to maintain your independence, increased your energy, improve your sleep. Keep this list in a visible place as a daily reminder of the long-term rewards.

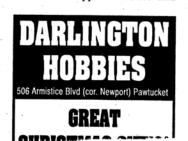
8. Invest in your health. Do you want to spend money on joining a program? Or would you prefer to develop a program you can do for little cost, using objects or props in your home or office? Both options are available.

9. Check out the gym you want to join. Does the facility feel friendly? Can you change clothes comfortably? If the facility has a pool, what is its water temperature? About 84-86°F is comfortable for moderate to vigorous activity, while warmer temperatures are nice for range-of-motion and relax-

ation programs. Does the pool or workout room have an easy and safe exit/entry? Ask to try various programs, so you can decide which program feels the most comfortable and fun.

10. Check out the staff. Are the people who work in the facility friendly and interested in you? Are they qualified to work with older adults? Do the staff members each have a college degree in health? Do they offer pre-exercise fitness assessments, with periodic updates? Are they interested in helping you learn how to modify exercises to fit your fitness level and conditions? Do they encourage social interaction? Talk to mature adults who currently participate in their programs to build a complete picture.

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by Ralph R. Ryan Attorney at Law

While there is an onus on parks to keep playground equipment free from obvious hazards and defect. there is also a burden on the parent or other adult supervising a child to see that the child isn't exposed to dangers he may not be old enough to comprehend, doesn't use equipment improperly, and doesn't use equipment inappropriate for the child's age and physical development. If your child has been injured in a playground accident, and you want answers about possible liability, call RYAN & RYAN. ATTORNEYS AT LAW a menani

# Frigid winter weather can be deadly to seniors

Last weekend, frigid air that dipped temperatures into the low teens brought home the fact that winter has really arrived in the Ocean State.

Tomorrow, a Canadian cold front will return, bringing cold Arctic air to the New England region, causing temperatures here to dip to the low single-digits with wind chill dropping the temperatures below zero.

While chilly air and blustery winds can be bring chills, it's deadly too, especially for older people, who are at a higher risk for hypothermia than young adults.

Hypothermia is a below-normal body temperature, typically 96° Fahrenheit or lower. Surprisingly, hypothermia can threaten the health of older people even when indoor temperatures range from 60°F to 65°F.



All About Seniors
By Herb Weiss

As people grow older, they lose their natural ability to keep warm in cold weather, and inactivity, illness and even certain medications and medical conditions make it even more difficult

to stay warm.

Signs of hypothermia include any unusual change in behavior, confusion, sleepiness, clumsiness, slurred speech and shallow breathing. Later stages of hypothermia may result in the person's skin becoming very cold, pupils becoming fixed and a more rigid body. Death can ultimately result from hypothermia.

A temperature below 96°F will not register on many oral thermometers. If the temperature reading is at or below 96°F, call 911 immediately.

Hypothermia can be prevented. The state's Department of Health and health care experts recommend the following 10 tips to keep seniors from becoming vulnerable to hypothermia.:

1. Be careful when walking outside. Falling outdoors can

leave a senior unable to get up and get back inside. Even for a short very trip to your mailbox, a fall or locked door can leave you exposed to extreme cold.

- 2. Even when you are inside your home, always dress warmly in layers of clothing especially when just sitting. Hypothermia can also occur in bed, so wear warm clothing to bed and use plenty of blankets.
- 3. Set the thermostat in your home at least 68°F to 70°F in living or sleeping areas. Ask your doctor if you should set your thermostat higher. Your thermostat should be set, taking into account your activity level, health, medical conditions, and medications.
- 4. Wet or damp clothing will put you at risk of hypothermia.
- 5. Even a mildly cool room temperatures of 60 to 65

degrees can interfere with the body's ability to regulate its temperature.

- 6. Drinking alcohol can lower the body's ability to retain heat. Use alcohol moderately, if at all. And avoid alcohol altogether near bedtime.
- 7. Some medical conditions put you at risk of hypothermia. Ask your physician if a specific medical condition, your prescription or over-the-counter drugs you take can affect body temperature regulation.
- 8. Throughout the day, eat hot foods and drink hot liquids to raise your body temperature and keep warm.
- 9. Look into fuel-assistance programs and home winterization programs. Call 462-0500 to contact the state's Department of Elderly Affairs for any information on assis-

tance programs.

10. Ask friends or neighbors to look in once or twice a day if you live alone. See if your local community has a telephone check-in or personal visit service.

For a free copy of the brochure "Accidental Hypothermia: The Cold Can Be Trouble for Older People" send a postcard to the NIA Information Center/AH, P.O. Box 8057, Gaithersburg, MD 20898-8057; or call NIA's toll-free number for publications, 1-800-222-2225 (1-800-222-4225 TTY).

Herb Weiss is a Pawtucketbased writer covering aging and health care issues for The Times. His articles also appear in state and national publications. He can be reached at hweissri@aol.com

# **AARP** report: Grandparents need aid in raising grandchildren

Sixty-year-old Dr. Justin Aurbach, and his wife Mickie – my sister - both of Dallas. Texas, have joined the rank and file of older Americans who again take on the role of parenting by taking total responsibility in raising their grandchil-

Taking care of Allison, their 5-year-old, strong-willed grandchild, requires this older couple to expend lots of love, energy, and nurturing 24 hours a day.

Family issues have forced the Aurbachs to step up to the plate to seek legal custody of Allison.

"One never expects what life has in store for you," Mickie tells All About Seniors, noting that she and her husband in their wildest dreams never expected to raise a 5-year-old at this stage of their life, when they could have traveled and taken it easy.

Even with the parenting of Allison becoming a very fulltime job to create a loving, safe and stable home life, "we are happy that we can be there for Allison," says Mickie.

The Aurbachs join 2.4 million grandparents who provide primary support of their grandchildren. According to the 2000 Census, 4.5 million chil-



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dren, that's 6.3 percent of all children under age 18, lived in grandparent-headed households, up from 3.5 million in 1999

The trend of intergenerational houses headed by grandparents is described in detail in an AARP State Affairs Outlook report, "Keeping Families Together: Grandparents Raising Grandchildren - They Need Help."

Clare Hushbeck and Tom Barrett, who authored the 11page report issued in December 2003, give their views on what older caregivers need to tackle the full-time demands of caregiving.

Like the Aurbachs, not all grandparents raising their children's youngsters require financial assistance. But many do. According to the AARP report, 27 percent of grandparent-headed households live below the federal poverty line - another 28 percent are below 200 percent of it.

The AARP report notes that state financial assistance programs seem to be "ill-fitted" to provide financial assistance to grams carry time limits, work requirements and support enforcement rules intended for single mothers, not older caregivers.

Meanwhile, foster care payments or adoption subsidies don't work either, says the report, highlighting the informal relationship most grandparent caregivers have with their dependent grandchildren.

While this is not an issue with the Aurbachs, appropriate housing may also become an issue especially if the older caregivers suddenly find themselves having to take care of a grandchild. Seniors in public housing will find occupancy limits and legal barriers blocking them from taking full custody of their grandchildren.

Furthermore, the AARP report recognizes that grandparent caregivers need respite care to keep from burning out because of the intense emotional and physical toll that can result from caring for their younger charges.

Respite can be scheduled to allow time off to do personal errands or for travel. For those over age 60, some respite services are available through the U.S. Administration on Aging's grandparents because the pro- National Family Caregiver children). Support Program administered by Area Agencies on Aging.

Additionally, lack of a legal relationship can also create many difficulties for grandparents trying to raise their grandchildren.

The AARP report says that adoption, legal custody and guardianship are often times time "costly and time-consuming judicial proceedings that can among other things, severely strain a family's emotional

State policies may vary as to giving older caregivers the ability to consent to a child's medical treatment, including dental care and mental health services and immunizations, or school

enrollment without having to prove legal custody or guardianship.

The AARP report also notes many grandparents lack access to accurate information about support services in their communities. Many times they get trapped in a bureaucratic maze not knowing which way to turn. (Contact the Rhode Island Department of Elderly Affairs at 401/ 462-0500 for information on programs and services that are available to assist seniors taking care of their grand-

Finally, support groups can provide a way to reduce the stress-related illnesses like depression, diabetes and hypertension that may result from the "heavy physical and emotional toll" that is required to raise grandchildren.

Mickie agrees, noting grandparents can find a supportive environment by attending these groups. "We discovered that many of the issues we have with raising Allison are universal problems that many grandparents usually encounter," she says, when attending her weekly support group at the Collin County Children's Advocacy Center in Plano, Texas.

Kathleen Connell, state

director of AARP Rhode Island, says that "these grandparents who step up to the plate are the true heroes of the child care system and they deserve nothing less than all the support we can give them."

Because of this, "Rhode Island is one of 26 states that lacks adequate medical consent laws. This is an issue we hope to address in the current legislative session," adds Connell.

Even with the backdrop of a huge state budget deficit, revising the state's medical consent laws would not result in a costly legislative fix.

Gov. Donald Carcieri and state lawmakers should move this legislative session to chip away at the frustrating obstacles kinship caregivers face in their efforts of keeping their families together.

For more information about this issue, contact the AARP Grandparent Information Center at www.aarp.org/contacts/programs/gic.html; or call 202-434-2296.

Herb Weiss is a Pawtucketbased writer covering aging and health care issues for the Times. His articles appear in state and national publications. He can be reached at hweissri@aol.com

# Documentary explores world of Alzheimer's victims, caregivers

Sally Weiss, my 80-year-old mother, has Alzheimer's disease.

Over the past seven years, the progression of this disease was noticeable to me when I made my trips back home to Dallas, Texas.

However, my family, just like the tens of millions of families across the nation who have loved ones afflicted with this mental disorder, tries to understand and cope with the emotional, social and financial impact of this devastating disease.

Last Wednesday, a hard-hitting, nationally broadcast PBS program, "The Forgetting: A Portrait of Alzheimer's," sought to bring more "insight, context, hope and help" to viewers who tuned in, hoping to better understand this frightening disease.

The 90-minute documentary explores Alzheimer's disease by weaving together the history and biology of the disease, the real-life experiences of three Alzheimer's patients and their families who lives are touched by Alzheimer's, and the latest research findings that may lead to a cure.

Shame on you if you missed last weeks showing of "The Forgetting," but you're in luck, especially if you want a second chance to see the PBS program before it comes out on video. The Rhode Island PBS affiliate, WSBE 36, has scheduled a rerun of this broadcast for Jan. 29 at 9 p.m. and again on Feb. 5 at 2 p.m.

The PBS documentary is based on David Shenk's best-selling book, "The Forgetting."



All About Seniors
By Herb Weiss

After overhearing a conversation in a restaurant about a man and his wife - a woman in her 50s afflicted with Alzheimer's he realized this woman could not recognize her husband. By the time Shenk left the restaurant, he was horrified at the thought of his wife not even knowing who he was, being a stranger to her during the best years of their marriage. This thought ultimately propelled Shenk, a journalist and occasional National Public Radio commentator, to explore the mysteries of Alzheimer's, leading to the writing and publication of his 292-page book.

The PBS documentary warns that with the graying of our nation, we will see a growing number of persons afflicted with Alzheimer's disease, which is considered to be an age-related disorder.

By 2011, the first of the nation's 76 million baby boomers will turn age 65, ultimately setting off a demographic time bomb, creating this Alzheimer's epidemic. When this occurs, Alzheimer's may well become America's biggest public health concern.

Using special animation, "The Forgetting" helps viewers better understand how Alzheimer's begins, how it does its damage and what kinds of new medical treatments are being used to treat it.

"The Forgetting" also focuses on the real-life stories of three families, showing how the disease slowly impacts the family caregivers and the loved ones afflicted with Alzheimer's.

"Like so many coping with this tragedy, the families who share their stories in 'The Forgetting' all have one major motivation in common — they want to let other people facing similar situations know that they are not alone, that there is help and that they too, can find the strength to face a tragedy like Alzheimer's with dignity and grace," said Elizabeth Arledge, a respected film producer who created the PBS documentary, in a written statement.

"These families are drawing on reservoirs of strength and compassion to stay focused on seeing the person they love instead of the symptoms of the disease," added Arledge.

Liz Morancy, executive director of the Alzheimer's Association's Rhode Island chapter, calls on Rhode Islanders to watch a Rhode Island PBS program, "The 13th State," on Wednesday, Sept. 28, 2004 at 7:30 p.m.

Scheduled one day before the re-airing of "The Forgetting," the 30-minute local PBS program will feature a panel discussion about Alzheimer's.

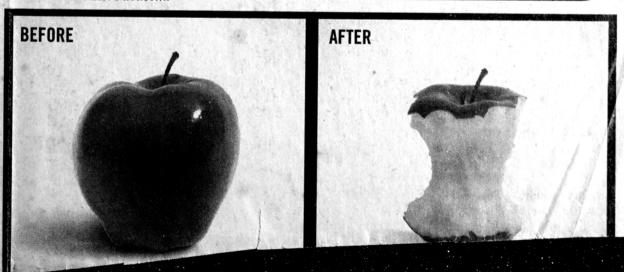
Panelists include Dr. Cynthia Holzer of Roger Williams Hospital, along with 84-year-old Sterling Ivison, who is in the early stages of Alzheimer's, and his daughter, Kate Meleny.

"The Forgetting' shows what a really hard, hard disease Alzheimer's is," said Morancy, "but by listening to Ivison, you will learn that he still drives and lives independently. People who have early-stage Alzheimer's can still have a quality of life."

Check out the Web site, www.pbs.org/theforgetting. This site will provide, advice, resources and chances for caregivers of Alzheimer's victims to share emotions and insights. In addition, a downloadable viewer's guide will provide practical information and answer questions.

Herb Weiss is a Pawtucketbased writer covering aging and health care issues for the Times. His articles appear in state and national publications. He can be reached at hweissri@aol.com.





# Fogarty, senior advocates push for an increase in DEA co-pay program

names) reside with their 11vear-old grandson Providence. Mrs. Jones. 79. has advanced dementia, along with other health problems ranging from non-insulin dependent diabetes, hypertension, coronary artery disease and depression. She has even had open-heart surgery.

While Mrs. Jones receives limited in-home assistance with personal care, her frail husband needs some relief from the heavy burdens of his caregiving responsibilities.

Last October, Mrs. Jones. with the approval of the couple's legal guardian, began attending the Cranston-based Louis Feinstein Alzheimer's Center.

Shortly after her enrollment, Mrs. Jones applied for state's Home and Community Care Co-pay Program for assistance in paying for five days of day care services per week.

The Department of Elderly Affair's (DEA) freeze on taking new clients for its co-pay program puts Mrs. Jones' application on hold.

As a result, she must pay the agency's \$48 per day (the lowest sliding fee scale) rather than the co-pay program's fee of \$9 per day.

Paying this amount out of pocket is quickly eroding her financial resources and reducing the number of days she can attend.

With last month's kickoff of the General Assembly's 2004 legislative session and a huge state budget deficit looming. lawmakers begin their work in determining the funding priorities for the state's programs and services.

One program worthy of an increase in state funding is DEA's co-pay program.

In Jan. 23, 2004 correspondence to Carcieri, Lt. Gov. Charles Fogarty, who chairs the state's Long-Term Care Coordinating Council, called on the Republican governor to put more state funds into DEA's co-pay program, which keeps low-income seniors who do not quality for Medicaid



All About Seniors **By Herb Weiss** 

but who do require ongoing services to remain in the community at home.

DEA's co-pay program provides certified nursing assistant services (assisting with bathing, meals, shopping, laundry, light housekeeping) to about 1,500 frail elderly in their homes.

The program also provides subsidies for adult day care

Participating seniors pay \$5.50 per hour for home care and \$9 per day for adult day care. The average annual cost to the state for co-pay program clients is about \$2,500 per

Older Rhode Islanders who qualify for this state program are just above the Medicaid poverty income level, or their assets are above \$2,000 or \$4,000 cap required for Medicaid eligibility.

Last October, a DEA freeze on new admissions left 200 frail seniors [including Mrs. Jones], as of mid-January, on a waiting list for home and community-based care, said senior advocates

They say this freeze would also prevent some seniors residing in nursing facilities from returning to their homes because they cannot pay for the needed home and personal

DEA has said January spending reports for this program indicate it is unlikely new applicants will be able to be admitted to this program for the balance of this fiscal year,

"The freeze on the co-pay program threatens the slow but steady progress we have made over the last few years in giving families more opportunities to choose home and community services, and in achieving a more balanced long-term care system with less dependence on costly institutional care," charged Fogarty.

The freeze "is extremely shortsighted from both a financial and human perspective," added Fogarty, who said the state spent \$2,500 per senior in the co-pay program in contrast to the \$12,000 annual cost per resident for the Medicaid-funded assisted living program and the \$30,000 annual Medicaid cost per nursing facility resident.

Last Friday, at a hearing before the House Finance Committee, senior advocates called for the elimination of the DEA's freeze of the co-pay

Bob Caffrey, president and CEO of Homefront Health Care and a spokesperson for the CHOICES Coalition, told lawmakers to drop the freeze on admissions to the co-pay program.

Caffrey's coalition of community-based providers and consumer advocates came together several years ago to advocate for reform of the state's long-term care system.

'It is reasonable to assume that if we deny service to eligible people, there is a significant chance they either will get no help before they die, or that they may need to enter a nursing home sooner than if they had received co-pay services,' Caffrey said.

In his written testimony, Caffrey acknowledged some seniors on the waiting list may be able to purchase the service they need privately, but others will not be able to afford that option.

Caffrey urged the lawmakers to add approximately \$100,000 to the current year's budget because this issue was not addressed in the supplemental budget submitted by Carcieri.

Another \$400,000 \$700,000 will be needed in next year's budget to serve the current level of need.

In a tight budget year, there are only so many ways lawmakers can slice the budgetary pie to fund worthy programs.

Ratcheting up the funding for DEA's co-pay program is the right way to go. In the long run, you save taxpayer dollars by adequately targeting state dollars to this program. Community-based care services are a fraction of the cost of keeping a frail senior in a nursing facility.

This, combined with allowing older Rhode Islanders to remain independent in their homes, are the right reasons for Carcieri and lawmakers to eliminate the current freeze on admission to the co-pay program by adding more funding in the state's supplemental

But don't forget about additional funding for DEA's copay program in next year's budget.

Herb Weiss is a Pawtucketbased writer covering aging and health care issues for the Times. His articles appear in state and national publications. He can be reached at hweissri@aol.com



## 1906 quake survivors gather



AP Photo

San Francisco Mayor Gavin Newsom, right, interviews survivors of the 1906 San Francisco earthquake, from left, Marie Sagues, Anita Caruso and Herbert Hamrol, Sunday during an annual pre-dawn commemoration at Lotta's Fountain in San Francisco. Nine survivors of the earthquake gathered to share stories of an event they experienced as babies 98 years ago but which played a lasting role in both their and the city's development. Lotta's Fountain is a landmark that served as a meeting point for those trying to find families and friends after the 8.3 magnitude quake and its attendant fires.

### **Senior Briefs**

Ham, bean dinner set for Thursday

EAST PROVIDENCE – The Senior Center is hosting a ham and bean dinner on Thursday at 5 p.m.

The menu includes: salad, ham with raisin sauce, sweet potatoes, veggies, strawberry shortcake, coffee and soft drinks. The cost is \$8.

For more information and to furchase tickets, please contact the center's administration office 435-7800.

"The dinner is provided by Chef Walker and the culinary art students from the East Providence Career and Technical School.

Senior Saints to meet on May 4

SEEKONK - The Senior Saints of St. Mary's will meet on May 4. The annual May breakfast will follow the 9 a.m. Mass in the upper Church. Tony Petraca, Channel 12's weatherman will be guest speaker.

The April attendance awards were given to Esther Aubin and Peg Flanagan. Potoalso wants to place additional emphasis on preparing for life in later years by mapping out long-term care strategies, exploring health care and housing options, and considering volunteer opportunities and leisure activities.

Rhode Island is home to 190,000 persons ages 60 and older and 152,000 citizens over the age of 65.

Rhode Island's Older Americans Month opening ceremony is being sponsored by the state Department of Elderly Affairs (DEA), Warwick Mall, Rhode Island Director's Association, and the Rhode Island Advisory Commission on Aging.

Other Older Americans Month events include:

May 5, The Village At Elmhurst, Providence (10 a.m.) Governor's Centenarians Brunch.

May 12, The Crowne Plaza
Hotel and Conference Center
(11:30 a.m.) 30th anniversary
Senior Companion Program
Volunteer Recognition
Luncheon.

May 10-16, Rhode Island Senior Center Week. Events are planned and coordinated in local cities and towns. Physical Therapy, 10; Cribbage Club, 1 p.m.; Bingo, 1:25; Computer Class, 2:45, 4:15 p.m.

Wednesday — Manicurist, 9; Tai Chi, 10:45; Scrabble Club, Nutrition Class, 1 p.m.; Movie, 1:15; Computer Class, 2:45 and 4:15 p.m.

Thursday — Bone Building Class, 9:30 a.m.; Physical Therapy, 10; Nutrition Class, 10:15; Bridge Club, Craft Class, 1; Computer Class, 2:45 and 4:15 p.m.

Friday – Brooks Pharmacist, 9 a.m.-noon; Hi-Lo Jack League, 1 p.m.; Ballroom Dancing Workshop, 2.

Daily: Billiards and Cards, Open Library, Computer Games, Fitness Center, 8 cm.-4 p.m.

Anyone interested in the above program schould see the by calling 435-7800 or stop by the senior center. Reservations for the noon meal are made a day in advance by calling Marge at 435-7872.

Lincoln AARP chapter to hold banquet

LINCOLN - AARP Chapter 4624 will hold it's Banquet on June 21, at the

# Transportation network leaves many seniors stranded at home

A newly released national study found that more than half of all non-drivers ages 65 and older stay at home on any given day because of a lack of transportation.

Experts say this trend is particularly troublesome, especially given the growing number of baby boomers who are entering their senior years.

According to "Aging Americans: Stranded Without Options," released last week by the Surface Transportation Policy Project (STPP) in collaboration with the AARP, the nation's existing transportation network is unable to meet the needs of the nation's increasing elderly population, particularly when large numbers of these individuals become less willing and able to drive.

"We must move aggressively to implement a balanced, multimodal transportation system supported by mixed-use development. This is how we can ensure that older Americans who are unable to drive are not isolated and cut off from their communities," said STPP President Anne Canby in a written statement released with the report on April 13.

Not surprisingly, the STPP transportation study also found that isolation of non-drivers affects the rural aging population disproportionately. Seniors who reside in sparsely populated rural areas have fewer transportation options, such as regular transit services, than those living in urban areas.

"Today, more than three and a half million Americans ages 65 and older risk isolation simply because they don't drive," said AARP Board Member Byron Thames in a written statement. "Their numbers will explode after 2025 when boomers enter their 60s, 70s, and 80s. Federal, state and local policy makers must start now to plan for the time when Americans who grew up in cars put down their keys for good."

that many seniors do not have options other than driving. This is a major reason why states are having a very difficult time grappling with the issue of screening older drivers to reduce age-related accidents.

Furthermore, the study found less than one half of the nation's population has adequate public transportation available to them

available to them.

Walking is often difficult of

All About Seniors
By Herb Weiss

lem, the study recommends providing more public transportation options; increasing funding and flexibility for existing programs to serve older people; better transportation planning with greater coordination with land-use planning; improved human service and transportation coordination; and improved street design and safety features.

Susan Sweet, a consumer advocate on the state's Long-Term Care Coordinating Council and a consultant to nonprofit agencies, said the availability of transportation services is key as to whether or not an older person can remain independent.

"Seniors who don't drive and/or have family willing and able to transport them for basic needs and quality-of-life activities are dependent upon state and community programs," she

In Rhode Island, Sweet said transportation for age 60 and older seniors and disabled adults is provided by the state's RIDE program. At no cost to seniors, this statewide program limits transportation to only medical and senior meal sites and to adult day-care services.

Sweet notes the Rhode Island Public Transit Authority (RIPTA) has a bus pass program for seniors, with reduced fees for seniors and free passage Meanwhile, RIPTA's ADA Service provides transportation to people with disabilities only along the agency's existing bus routes.

On the other hand, cities and towns have a limited transportation program for seniors.

The current services available are helpful to the older riders who use them, said Sweet, but they have waiting lists, are generally available only for certain purposes and provide inadequate levels of service. It is a difficult problem, a complicated problem, and an expensive problem, she said.

Maureen Maigret, policy director of Lt. Gov. Charles Fogarty, who also serves as the executive director of the LTCCC, stated that lack of transportation for seniors is becoming a significant policy issue that must be addressed.

If the state continues to push for keeping seniors independent at home in their communities, then it must do better job in providing transportation for seniors.

Aging advocates and providers tell me Rhode Island's existing transportation network is fragmented, keeping seniors unnecessarily in their homes. Hopefully, the DEA can work closely with the LTCCC to study the existing transportation network, document the flaws and develop blueprints for a better one.

Change will only occur if Gov. Don Carcieri and state lawmakers allocate the funding for a better transportation system for our seniors.

It seems that one's independence is somehow tied to transportation. Ask any teen-ager or senior

To view a full copy of the study, visit www.transact.org

Herbert P. Weiss, is a Pawtucket-based writer covering aging and health care issues. His articles also have appeared in state and national publications. He can be reached at hweissri@aol.com



potatoes, veggies, strawberry shortcake, coffee and soft drinks. The cost is \$8.

For more information and to purchase tickets, please contact the center's administration office 435-7800.

The dinner is provided by Chef Walker and the culinary art students from the East Providence Career and Technical School.

Senior Saints to meet on May 4

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The April attendance awards were given to Esther Aubin and Peg Flanagan. Pot-ogold winners were Esther Aubin, Alda Crawshaw, Cena Mayers and Anna Lavoie.

Thank you to all who contributed to the nursing home shower. Donations were given to Madonna Manor, Grandview Nursing Home and Oak Hill Nursing Centre.

Scheduled trips are:

May 11 and June 8, bingo at Foxwoods.

May 13, Luciano at Lake Pearl, John Davidson (own transportation).

July 14, Yoken's Conference Center, New Hampshire, Mystery Day trip.

Aug. 1 to 3, three-day mys-

tery trip. Call 508-761-7163 or 508-399-8044 for more information on the above.

### Older Americans Month celebration

CRANSTON - Barbara Morse, WJAR TV10 "Health Check" health reporter, will serve as the master of ceremonies for the annual kickoff that begins the state's observance of May as Older Americans Month.

The kickoff will take place on April 28 at the Warwick Mall Food Court at 8:30 a.m.

The ceremony will feature the unveiling of Rhode Island's 2004 Older Americans Month poster, presentation of the state's 2004 gubernatorial Older Americans Month proclamation and music provided by Al Conti.

The federal Administration on Aging (AoA) has declared that "Aging Well, Living Well" is the theme for this year's Older Americans Month celebrations. The theme was selected to recognize not only the increased longevity of Americans, but also to appreciate their more productive and healthier lifestyles. During Older Americans Month, AoA

older and 152,000 citizens over the age of 65. Rhode Island's Older

Americans Month opening ceremony is being sponsored by

the state Department of Elderly Affairs (DEA), Warwick Mall, Rhode Island Director's Association, and the Rhode Island Advisory Commission on Aging.

Other Older Americans

Month events include:
May 5, The Village At
Elmhurst, Providence (10 a.m.) Governor's Centenarians Brunch.

May 12, The Crowne Plaza Hotel and Conference Center (11:30 a.m.) 30th anniversary Senior Companion Program Recognition Volunteer Luncheon.

May 10-16, Rhode Island Senior Center Week. Events are planned and coordinated in local cities and towns.

May 20, The State Room, Statehouse (10 a.m.) Home and Community Care Worker of the Year Ceremony.

St. Joseph Seniors to hold meeting

CENTRAL FALLS - The St. Joseph Seniors board will meet at the social center on April 29 at 10:30 a.m.

A May Brunch will be served on May 3 at 11:30 a.m. followed by a meeting at 1 p.m. Members please bring your gift donation for the annual penny social raffle. Tickets for the June dinner to be held in the social center will be sold at this meeting.

### Activities aplenty at E.P. Senior Center

EAST PROVIDENCE Activities planned for the rest of April by the city of East Providence Senior Center, 610 Waterman Ave., include the fol-

Physical Therapy, 10 a.m., Tuesdays and Thursdays: Manicurist, 9 a.m.-noon Wednesdays (call for an appointment); Movies, 1:15 p.m. Wednesdays; Diabetes Support Group Meeting, 1:30 April 29.

Offered weekly:

Monday - Yoga and Pokeno,

Tuesday - Bocce Ball, 9 a.m.; Bone Building, 9:30; Therapy, 10; Nutrition Class, 10:15; Bridge Club, Craft Class, 1; Computer Class, 2:45 and 4:15 p.m. Friday - Brooks Pharmacist,

a.m.-noon; Hi-Lo Jack League, 1 p.m.; Ballroom Dancing Workshop, 2.

Daily: Billiards and Cards, Open Library, Computer Games, Fitness Center, 8 a.m.-4 p.m.

Anyone interested in the above programs should sign up by calling 435-7800 or stop by the senior center. Reservations for the noon meal are made a day in advance by calling Marge at 435-7872.

Lincoln AARP chapter to hold banquet

LINCOLN AARP Chapter 4624 will hold it's Banquet on June 21, at the Kirkbrae Country Club at noon. Tickets are \$15 will be available at the April and May meetings. Call Cecile Blackwell or Lois

**Book club meets** on Wednesdays

PAWTUCKET Golden Agers Book Club continues to meet the third Wednesday of each month from 12:30 to 1:30 p.m. at the Leon Mathieu Senior Center, 420 Main St. in the first-floor activity room.

Share your reading experiences with other Book Club members. The group is led by volunteer Dot Pelchat.

The next book club meeting will be held Wednesday. New members are always welcome. If vou are interested in joining the "Golden Agers Book Club," contact the Senior Center at 728-7582. This program is open to seniors 55 and older.

### Diabetes education classes are available

EAST PROVIDENCE - The senior center is offering diabetes outpatient education classes.

The seven-class session will be held Tuesdays and Thursdays, May 4-25, 1:30 to 3:30 p.m. at the center. For more information, call 435-7800 with any questions.

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a half million Americans ages 65 and older risk isolation simply because they don't drive," said AARP Board Member Byron Thames in a written statement. "Their numbers will explode after 2025 when boomers enter their 60s, 70s, and 80s. Federal, state and local policy makers must start now to plan for the time when Americans who grew up in cars put down their keys for good."

The STPP findings noted that many seniors do not have options other than driving. This is a major reason why states are having a very difficult time grappling with the issue of screening older drivers to reduce age-related accidents.

Furthermore, the study found less than one half of the nation's population has adequate public transportation available to them.

Walking is often difficult or unsafe and is not an alternative. For those ages 65 and older, many cite street safety as a problem, and they make only 8 percent of their trips by walk-

In a recent STPP poll, 42 percent of Americans reported that dangerous intersections make crossing the street difficult where they live.

The report, based on new analysis of the National Household Transportation Survey of 2001 by STPP, found that more than one in five Americans age 65 and older do not drive. Additionally, more than 50 percent of non-drivers ages 65 and older, or 3.6 million Americans, stay home on any given day because they lack transportation options.

For many non-drivers, public transportation is often the only alternative to asking for a ride, but in many places public transportation is still not accessible to seniors.

As a fix to this policy prob-

said. In Rhode Island, Sweet said transportation for age 60 and older seniors and disabled adults is provided by the state's RIDE program. At no cost to seniors, this statewide program limits transportation to only medical and senior meal sites and to adult day-care services.

Sweet notes the Rhode Island Public Transit Authority (RIPTA) has a bus pass program for seniors, with reduced fees for seniors and free passage

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# Guest Commentary Cheap imports are exporting our community's future

"China's Economic Transformation" is not a poorly understood story, as noted by New York Mayor Michael R. Bloomberg in his opinion piece, "A Race We Can All Win" in Newsweek's recent double issue. The story is very clear to me and probably to millions of Americans who went shopping for the perfect Christmas gift this year.

America's manufacturing sector is crumbling while China and third world countries export millions of products to be sold cheaply in stores throughout our nation.

A walk through a national chain drug store, in Pawtucket, left me very unsettled about the impending economic fate of America. America's children may not experience the prosperity that their parents once achieved because the country's economy has begun to falter and tilt from the imbalance created by the shift from manufacturing to a service economy sector.

Shelves at this local drug store were crammed with holiday gifts and goodies - bright red Santa hats, Christmas lights, artificial Christmas trees and even holiday trinkets, all of which were stamped "Made in China." A mile down the road at a North Attleboro, Mass.-based Macy's Department Store, I pulled items off of shelves out of bins and from racks to examine. You guessed it, clothing. dishes, pots and pans, picture frames, all made from Chinese manufacturing companies. Even the VCR/DVD Sony player, a Christmas gift, purchased from Best Buy, had "Made in China" stamped on the

In his Newsweek opinion piece, Mayor Bloomberg tells us that "China is not a [economic] threat to America," a conclusion he says made as a result of his 35 years of



Herb Welss

combined with serving six years as New York's mayor. While he recognizes China as a competitor, he aptly notes that geopolitics and global economics should not be viewed as

being in business

zero-sum games.

It is my opinion that his economic views are far from the literal truth. Drastically lower wages enable Chinese manufacturers make cheaper goods that are sold to consumers for less then it would cost for the items to be made by an Americanbased manufacturing company. Along with lower wages, Chinese manufacturers face less environmental and safety regulations, taxes, and have subsidized operational costs.

Imbalanced trade agreements are not favorable to American manufacturers and American businesses who are losing the "economic race," this resulting in a loss of profits and employee layoffs. Many of the nation's manufacturers are being forced out of business, closing their doors for good in cities and towns throughout this nation

As America's manufacturing sector is decimated by the Chinese and with our communities losing higher paying manufacturing jobs, only lower paying service sector jobs will become available to low and middle income Americans. U.S. Bureau of Labor Statistics 2006 Occupational and Wage Estimates show that the average Rhode Island manufacturing job pays \$43,596, annually and that there are currently 52,000 employees directly related to manufacturing. Currently, cities and towns now see

manufacturing plants sitting idle and empty or underutilized, oftentimes reducing their tax base. This continued trend will not allow for a balanced economy. Rhode Island can ill afford to lose its existing manufacturing base, ultimately thousands of people to the state's unemployment statistics.

Once upon a time, "Made in America" stamped on products gave the buyer an assurance of quality. Government recalls protected our citizens from products that might harm or kill. As we are increasingly aware. "Made in China" does not always ensure quality (such as pharmaceuticals, tooth paste and defective tires) because of poor Chinese governmental oversight.

Newspapers have reported that a growing number of toys "Made in China" were produced with high levels of lead paint, being sent to tens of thousands of toy stores throughout the nation, putting our nation's children at risk. Lack of product quality control allowed poisoned pet food manufactured by Chinese companies to be shipped to America, killing thousands of cats and dogs.

With the presidential primaries vlooming, it is crucial that the Democratic and Republican politicians who seek the position of America's top CEO thoroughly debate this nation's trade policies and come up with viable solutions to reenergizing America's manufacturing sector. Some political insiders report that Mayor Bloomberg might throw his hat into the ring to run as an independent presidential candidate. If so, what is his strategy to make our nation more competitive with China's growing manufacturing sector?

Most important, what steps will the next president and Congress take to ensure that American well-paying jobs do not vanish in the global economy?

Even with Rhode Island's looming state budget deficit, how will the General Assembly and Governor Donald Carcieri's administration. assist the state's manufacturing sector to grow or relocate to the Ocean State? Balancing the state budget through imposing new fees (taxes) would become just another reason for a company to look for other places to manufacture their products outside of the state. Economic development programs like the state's Enterprise Zone Program and Investment Tax Credit Program, are key to creating jobs and assist manufacturer's to grow or attract new companies to operate in low and moderate income areas throughout the state.

Developers working with local municipalities must continue to be creative in finding new uses for vacant or underutilized large mills that once housed manufacturing companies.

In Pawtucket, many of its largest mills are home to new uses, now housing light manufacturing companies along with artist studios and offices of creative sector companies (Web site designers, graphic designers, architects, etc.). Two large mills in the city's historic downtown have become condo residences. State officials should maintain the state's historic tax credits program enabling developers to rehabilitate these large mill buildings for new uses.

In addition, the state can continue to invest in workforce development to address the changing technology in manufacturing. In the long run, supporting manufacturing companies will provide well paying economic and career opportunities

to low and moderate income workers.

Whenever possible, consumers might just choose to purchase their products "Made in America." By keeping American companies in business, local and state taxes can be collected by municipalities and towns and supplies are purchased from local vendors and suppliers as well.

Why not purchase one-of-a-kind artwork "Made in Rhode Island," created by our state's burgeoning artist community? Choose to buy a handwoven scarf or sweater made by a local weaver instead of one imported and made by machine. Or may be just purchase your next set of dishes, coffee mugs, cups and glassware from a local Rhode Island artisan. By supporting local manufacturers and artisans, you will see an economic trickle down effect - these businesses generate wealth from outside of our state's borders and then spend and invest their money right here.

The clocks cannot be turned back. The global economy is here to stay. Clearly, this is a federal problem that dramatically impacts states and local communities.

Federal lawmakers must look for ways to enable the nation's manufacturing companies to fairly compete and to ensure that trade polices are balanced and fair. The Rhode Island Congressional delegation must ensure that fair trade is a necessary condition for any free trade legislation passed. The playing fields between our nation and its trading partners must be level.

Herb Weiss is the City of Pawtucket's Economic and Cultural Affairs Officer. He serves on the state's Small Business Advocacy Council. He can be reached at hweissri@aol.com.

# All about aging: A little memory loss comes with the territory

By HERB WEISS

N her 20s, while attending nursing school, Donna Policastro discovered she had a photographic memory. Years later, even in her middle years, the Providence resident's memory was still pretty good. She had

no need for appointment books or PDA's to keep up with her hurried work schedule as a Registered Nurse. Like an elephant, she never forgot, always remembering minute details, never missing an appointment or meeting.

Approaching age 50, missing

meetings and even some appointments forced Policastro, executive director of the Rhode Island State Nurses Association (RISNA), to keep a to-do list and to use her computer's calendar program. Policastro, now 59, speculates that being overwhelmed at work because she had no support staff

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During a presentation 'Stay Sharp and Fight the Effects of Alzheimers' in the Hayden Center at the Cumberland Public Library, Dr. Laurence Hirshberg, director of the NeuroDevelopment Center in Providence presents some items which people can do to stay sharp and protect themselves from the negative effects of brain aging.

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combined with not being able to say no to taking on new duties and responsibilities took a toll on her memory.

Sometimes the aging Baby Boomer, like many, would forget a colleague or patient's name all together, or just not remember either their first or last moniker. She became physically exhausted trying to remember their full name or little details of their initial meeting. Sometimes it even bothered Policastro "to no end"

when she could not remember an actor's name she saw on a television program, becoming obsessed in an attempting to remember the name.

As Policastro would ultimately discover when reading 'Aging With Grace,' a book that described a longitudinal health study of an order of nuns, she was not losing her mind or becoming afflicted with dementia or devastating Alzheimer's,

Continued on next page



# **OPINION**

**Herb Weiss** 

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THE TIMES - Friday, October 24, 2014

# Real role models fly under the radar

Editor's note: This is column was first published in August 2012.

As we go through our life stages, we are attracted to 'role models' or people we look up to - "mentors" as they are commonly referred to. Those individuals who possess the right attributes and specific traits we hope to emulate – a persona we admire and respect.

For children growing up or those having reached

their middle years, they may look up to and view their parents as that "perfect" role model. Others may see redeeming qualities they try to imitate turning to entertainment celebrities, pro-athletes, successful business entrepreneurs, or religious and ethical figures. I found myself stumped when I was recently asked who my role model was as I responded to a "PowerPlayer" questionnaire by Golocalprov.com. I never looked up to any one individual in the celebrity culture, sports personality, or even a politician.

Influential People in My Life As I pondered this question, there were

a few people that came to mind.
Of course I thought of my father, Frank Weiss, who had a great impact on my life. He taught me the importance of using a business network in my profession. While the Dallas businessman raised money to fund cancer research projects and other worthy causes, as Economic and Cultural Affairs Officer, I try to do the same, such as working to support the City's Annual Pawtucket Arts Festival.

Then there was Fred Levy, a former Army intelligence officer during World War II, who was also a fabric salesman and writer. When I was a young man, Mr. Levy was my neighbor and a man for whom I had great respect. He might be a likely candidate for being my role model. Mr. Levy gave me advice on how to become a better writer during my early professional years. He juggled his job, writing, and also being a full-time caregiver to his adult daughter, Faye, who was bedridden with multiple sclerosis. He was an inspiration to me, who read my published articles and encouraged me to con-

tinue to writing. More recently in my present work, I thought of my former boss, Planning Director Michael Cassidy. He was a role model to me - teaching me the value of tenaciousness. He looked at all bureaucratic and political angles to accomplish his planning goals. While it took him 10 years to get the City's skate board park up and running, it took me seven years to see my project, the SlaterParkDogPark come to fruition. But it happened.

rounding communities.
Watching out for the elderly, he became a volunteer 'ombudsman' for the Alliance for Better Long-Term Care. Paul even served as Chairman of the Pawtucket's Affirmative Action Committee to ensure that everyone had equal opportunities in municipal government. He has worked for decades assisting those down-and-out, even providing them financial assistance out of his pocket, to help them navigate the State's regulatory process.

less" in the City of Pawtucket and the sur-

Paul has long-ties to many of the City's nonprofit groups, from the Pawtucket Arts Collaborative, the Pawtucket Armory Association, the Foundry Artists, the Pawtucket Fireworks Committee, Pawtucket Preservation Society, and the Pawtucket Arts Festival, just to name a few groups. He even has been active bringing his expertise as a property manager and developer to assist the Pawtucket Planning Department streamline the City's Building

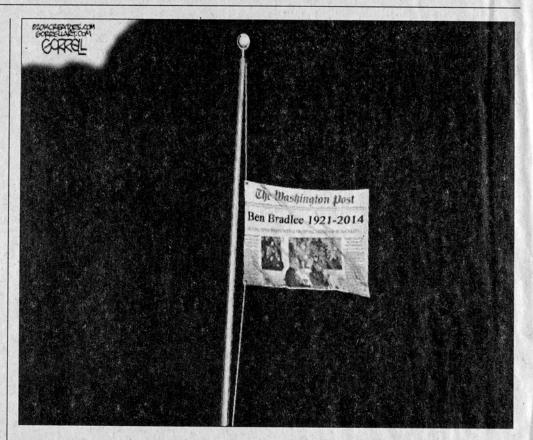
Paul co-founded a non-profit group called Helping Hands, and has provided financial assistance to local organizations that help youths at risk, the helpless and homeless. Since 2006, Helping Hands has given donations to 37 organizations, including, Cross Roads, Pawtucket Boys and Girls Club, Dana Farber Cancer Institute, Pawtucket Salvation Army, American Cancer Society.

Paul did not learn the ropes about business by attending any of the ivy-league schools, but instead learned the tricks of the trade by working. For over 50 years, his hard work landed him senior-level positions for major corporations including Dunkin Donuts, in addition to serving as Special Assistant' to the Presidents of Providence Metalizing, working in the Personnel Department, and by managing its properties and taking on special projects as

This local businessman even ran one of the largest catering companies in Rhode Island, catering over 300 weddings and 10,000 functions over the years. His corporate and nonprofit clients include widely recognized organizations in the Ocean State, including Hasbro, Hospital Trust, La Salle Academy, Bay View Academy, and

Exemplifying the Rotary International's motto "Service Above Self," Paul has been a member of the Pawtucket Rotary Club since 1999, and was recognized and awarded the prestigious Paul Harris Award, the highest civic recognition that the national civic group bestows upon an individual.

Throughout one's lifetime you might have many role models who inspire, teach and give you a road map to overcoming obstacles in your personal and professional career. But sometimes the m



## Ben Bradlee inspired colleagues

In the next few days you will hear real sadness from hundreds of people who work or used to work at The Washington Post. I would like to tell you why we all loved Ben Bradlee so much - loved working for him, loved working with him
— and why we felt he could make anything possible.

When my mother, Katharine Graham, picked Ben to be managing editor of The Washington Post in 1965 and then executive editor in 1968 her first significant action as publisher — the two of them held huge ambitions for the paper. Ben's ambition had taught him one thing: He had to work hard. "I knew it would take thousands of extra hours to begin to know what to do." But he had borne plenty of responsibility early in his life (he served as a officer on a destroyer in the Pacific in World War II), and as he wrote later: "I was aching to do it.

As he settled in, Kay Graham was watching. Never sure of herself and prone to second-guessing her judgment, she "He's there nights, he's there weekends," she told those around her. "And you should see the people he's hiring."

That was what Ben concentrated on: hiring. "There was so much I didn't know — about presses, about composing rooms, about budgets," Ben wrote, "that I decided

to concentrate on the one thing I did know: good reporters. They were good, and they were tough. Among his first hires were Richard

Harwood, who had lost a lung in the inva-

U.S. District Court in Washington and Ed was flamboyantly winning cases and building his reputation. Summoned by a note begging him to ask for a recess in a

### **GUEST COMMENTARY**

By Donald Graham

Chicago trial and call Bradlee, the football-loving Williams heard the story and said, "Christ, Benjy, you're behind 28-0, and it's the fourth quarter. You've got to

Williams, at the time, didn't represent The Washington Post. But facing supremely high stakes (among other things, the Washington Post Co. was going public that week; there had also been a clear threat made to our television-station licenses), Kay decided to print the story. Days later, the Supreme Court ruled that the newspa-

pers could not be prevented from doing so
The outcome of the Pentagon Papers case bred a perfect confidence between editor and publisher. When the Watergate stories came along, there was unhesitating support for the newsroom's work. As Kay put it later, "He set the ground rules — pushing, pushing, pushing, not so subtly asking everyone to take one more step, relentlessly pursuing the story in the face of persistent accusations against us, and a

concerted campaign of intimidation."
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business network in my profession. While the Dallas businessman raised money to fund cancer research projects and other worthy causes, as Economic and Cultural Affairs Officer, I try to do the same, such as working to support the City's Annual Pawtucket Arts Festival.

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While my father, my neighbor and former boss taught me valuable lessons in life, I realized that the most influential person in my life, was an 82 year old, semi-retired man right here in my Pawtucket communi-

Being an Advocate for the Voiceless Like the "energizer bunny" sporting gray whiskers and a plump belly, Pawtucket businessman, Paul Audette has always been an advocate for the "voice-

Paul did not learn the ropes about business by attending any of the ivy-league schools, but instead learned the tricks of the trade by working. For over 50 years, his hard work landed him senior-level positions for major corporations including Dunkin Donuts, in addition to serving as 'Special Assistant' to the Presidents of Providence Metalizing, working in the Personnel Department, and by managing its properties and taking on special projects as assigned.

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have many role models who inspire, teach and give you a road map to overcoming obstacles in your personal and professional career. But sometimes the most important ones are those individuals who are not so visible or obvious.

The most important role model in your life may well be that person flying under the radar screen, seeking to help others one person at a time – giving of themselves without seeking public notice. For me, that person, my mentor is Paul Audette.

Pawtucket-based writer.

porate and nonprofit clients include widely recognized organizations in the Ocean State, including Hasbro, Hospital Trust, La Salle Academy, Bay View Academy, and Exemplifying the Rotary International's motto "Service Above Self," Paul has been since 1999, and was recognized and award-

Throughout one's lifetime you might

## Herb Weiss, "LRI '12, is a freelance

# **Letters to the Editor** Cicilline stepped in to help

One year ago, I was recovering from a medical issue which caused me to be hospitalized. While in the hospital, I lost my apartment and most of my possessions and important paperwork.

I needed to retrieve copies of important documents. I was having particular difficulty in getting my military paperwork, and decided to seek the assistance of Congressman Cicilline's office.

I was given an appointment within a week. I met with the congressman's staff and they presented as professional and caring. They asked me what they could do to help me. Within one month, I had my military paperwork and began to stabilize my living environment.

I now have my own apartment and I am seeking employment and educational opportunities in the community

Thank you congressman, and many thanks to your staff for all of the help they provided me.

> **Bob Larkin** Pawtucket, RI

## Father responsible too

I am writing to comment on the three little babies who were found dead in their home in Blackstone. It was very tragic, and yes the mom was accused of their deaths. But I would also like to remind people that the father was also living there and to my knowledge did nothing to help the babies or the mother.

It is the responsibility of both parents to

take care of the little babies they have. It is not the responsibility of just one parent. I know they always blame the mother, but what about the father? He had a say in making those babies. Yet, it seems the father is not being blamed. Why? I'd love to know the answer.

Irene M. Balleux Pascoag, RI

## Letters to the editor policy

The newspaper welcomes letters to the editor and guest commentaries.

Letters should be no longer than 500 words and should be typed.

N. G

Letters must include the writer's name, hometown and a phone number. The newspaper will verify all letters before publication.

— and why we felt he could make any-

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That was what Ben concentrated on: hiring. "There was so much I didn't know
— about presses, about composing rooms,
about budgets," Ben wrote, "that I decided to concentrate on the one thing I did know: good reporters.

They were good, and they were tough. Among his first hires were Richard Harwood, who had lost a lung in the invasion of Tarawa in 1943, and Ward Just, who would later be wounded in Vietnam. David Broder was another crucial early

Bradlee roamed the building, prodding the production and advertising departments as well as the newsroom. He wanted to make things much better - now. He wasn't always right, but he helped Kay get a far better understanding of where The Washington Post's problems lay.

It was perfect preparation for the paper's watershed moment: the 1971 decision to print the stories based on the Pentagon Papers. The New York Times had spent months preparing a series of stories based on these top-secret documents, but it was enjoined by a federal court from printing more after the first ones appeared. One day after the injunction was issued. Daniel Ellsberg gave the papers to The Post. Bradlee and his team were pushing hard to print their story the following day. But every lawyer in the place was

Ben knew the next step, the only step that would give Kay the confidence she needed to publish. Without authorization, he called a greater lawyer, his friend Edward Bennett Williams.' They had met when Ben was a Post reporter covering the

## **GUEST COMMENTARY**

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Usually, Ben told her in advance when a big story was breaking. Once during Watergate, he did not. When reporter Carl Bernstein called Attorney General John Mitchell to ask about his control of a secret fund used to gather information on the Democrats, Mitchell exploded. "Katie Graham's going to get her tit caught in a big fat wringer if that's published." Ben didn't get around to calling his publisher. After the story ran, he told her, "That was too good to check with you, Katharine."

Through big stories and small — the Pentagon Papers and Watergate were only the beginning of it - those tough reporters on Ben's staff came to know they were working for someone great. You could safely call the Post newsroom staff hard-bitten. They were men and women who had no heroes. But he was their hero.

It went both ways. In the aftermath of the Supreme Court decision on the Pentagon Papers, here's what he said to the newsroom: "The guts and energy and responsibility of everyone involved in this fight, and the sense that you were all involved, has impressed me more than anything in my life. You were beautiful." You too, Benjy.

Donald Graham was publisher of The Washington Post from 1979 to 2000. He is chairman of Graham Holdings, formerly the Washington Post Co.

# THE TIMES

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