

A SAIL PRIMER FOR SENIOR LIVING

By: Dwayne A. Rohweder

May 2013



May 17, 2013

Dear Friends,

SAIL is an active part of a national movement aimed at enabling older adults to remain healthy, socially connected, and in their own homes.

Today, SAIL serves over 800 seniors in Dane County through its membership program and its personal emergency response service. Most SAIL members are life-long learners who live primarily in private homes and range in age from 58 to 99.

Our goal is to help our members live their best possible lives, and we believe one of the best ways to ensure that is to give them as many resources as we can to help make choices, understand the stakes and possible consequences of those choices, and navigate the waters they are sailing, be they smooth or choppy.

One great resource we have is "A SAIL Primer for Senior Living" based on a huge research project undertaken by **Dwayne Rohweder, a valued SAIL member**. We expect this will be an excellent tool for all older adults, leading them to take a thoughtful look at the opportunities and challenges in their futures.

While no amount of planning can account for every possibility that might come your way as you move into retirement age and beyond, overall, some thoughtful consideration on lifestyle, finances, and your home will no doubt make your future brighter, safer, healthier, and more fulfilling.

We hope these suggestions are a great start, and remember, SAIL is always here to help!

Sincerely,

Ann Albert

Executive Director

A SAIL PRIMER FOR SENIOR LIVING

Introduction: Who are we?

We are an aging population and the 'old' are getting older. According to AARP, there are now 22 million senior home-owners (65 years of age and over) in the United States. And, starting in 2012, 10,000 people a day will start turning 65. By mid-century, 20 percent of the population of the United States will be a person at least 65 and one in ten will be at least 90 years of age. The number of people at least 90 years of age has tripled in recent decades reaching 1.9 million, according to the 1980 census, and could quadruple in the next four decades.

The U W-Madison Applied Population Laboratory predicts that the Wisconsin overall population will increase by about 808,900 persons by 2040, bringing the population to about 6.5 million. About 95 percent of this increase will be persons over 65. The persons aged 65 to 84 will increase from 777,000 in 2010 to 1.5 million in 2040. Residents aged older than 85 will almost triple from 118,500 in 2010 to 287,000 in 2040.

How long are you likely to live? Americans who retire today at 65 still have one-fourth to one-third of their life to live following retirement. The Baby Boomers are retiring and redefining what it means to retire. On the average, most people should plan to live 25 to 30 years past retirement. We are aging differently than previous generations however physically and mentally the health of today's 70 year old now equals that of a 65 year old in the 1970's. During this period, deaths from heart diseases and many cancers have decreased. Modern medicine is finding new technology to solve medical problems, i.e. antibiotics, replacements, stem cells, etc. And, while most seniors have at least one chronic health problem, disability has slowly but significantly declined.

Our life expectancy continues to inch upward, a happy trend. Infectious diseases and acute illnesses, once the leading causes of death have given way to chronic ailments and degenerative illnesses such as heart disease, dementia, and Alzheimer's disease that people often live with for decades. Thanks to medical advances we are living longer. But, the longer we live the more likely we are to need help.

Eighty-five percent of the Baby Boomers wish to stay in their own homes and communities for the balance of their remaining years. Only about 5 percent of adults over age 65 live in a nursing home, with another 2 percent living in some other type of group quarters. Individuals within the aging population will likely have one disability and are likely to be female, because women live longer than men and will likely be significantly poorer. Some elderly living independently have a care giver. Most care givers live near the person for whom they provide care. About 25 percent of care givers report living in the same household, 40 percent report living within a 20 minute drive, 20 percent report living within an hour's drive, and the rest live more than one hour away.

FINANCES

No matter where you want to live, or how you want to spend your retirement years, you will need to have a good sense of your financial resources and obligations, as well as the expenses you can expect in the future. For many Americans, retiring in this century is a mystery. Earlier generations of workers could rely on employer-provided pensions, but many workers retiring today and in the future will need to rely on their own work-related and personal savings plus Social Security benefits. These savings have to last longer, because Americans are living longer. One recent mistake has been to over-estimate the rate of interest return on investment savings.

For a quick estimate of necessary financial resources to live on in retirement, plan on at least 80 to 90 percent of your pre-retirement income to cover expenses. Be realistic about how much of your home equity might be available for retirement—you will always need housing. On average, 20 percent of retiree income will be spent on health care.

Sixty-eight percent of Americans over age 65 will require some form of assistance primarily short-term care or rehab after surgery. Life care at home may be the best answer for many seniors. Your finances will play a major role in choosing the option that works best for you. The cost of long-term care in nursing homes and assisted-living sites is increasing at a rapid pace compared with the costs of in-home care.

The 10th annual “Cost of Care” report from Genworth Financial, a seller of long-term care policies and other insurance and financial products, reports interesting information on this relationship and the change in health-care costs. The company collected information from 15,000 long-term care providers in early 2013 (New York Times, April 2013). Nationally, the median cost for home health aide services is \$19 an hour and \$18 for homemaker services. Both have risen at annual rates of one percent or less over the last five years. The cost of assisted living and private nursing care is rising much faster. The median annual cost of assisted living is \$41,400, and comparable costs for a private nursing home room is \$83,950, with annual increase rates of 4.3 and 4.5 percent, respectively, over the past five years. The data indicate one reason for seniors to live in their own homes, unless the care is needed.

HEALTHY AGING

The Basics - There are certain lifestyle choices that apply to everyone, no matter what age; but the older you get, the more important it is to preserve good health. So though you’ve been reading these for years, we’re starting out a list with the healthy reminders:

- Don’t smoke.
- Drink alcohol in moderation or not at all. (See attachment: Medication & Alcohol Abuse).
- Maintain a healthy diet.
- Consider taking vitamins, especially Vitamin D. Have Vitamin D and B12 levels checked regularly.
- Get a good night’s sleep.
- Be social.
- Manage stress.
- Protect your brain from impacts and toxins.
- Wear seat belts; wear helmets when bicycling, riding a motorcycle, or skiing.
- Humor is important. Be happy and laugh.

Engagement - Persons who are optimistic, curious, open, and eager to make connections with the community around them and the world most often enjoy the last decades of their lives. Even in the face of disabilities, these people seem to thrive and find joy despite their challenges.

Depressed, anxious, or grumpy people in good health can also live long lives, but experience far less pleasure and can eventually alienate themselves from those who care about them.

Seniors who bring to their lives appreciation and respect and embrace aging with good humor, grace, vigor, and flexibility will likely be happier as they age. More study is needed to clarify the link between optimism and good health. It is likely that multiple mechanisms are involved.

Memory Retention - One effort worth pursuing is preserving and boosting your memory. Optimists live longer. Increasing evidence suggests that being an optimist or a pessimist has an effect on your health. A Dutch study found that older adults with an optimistic disposition—people expecting good things—lived longer than those who tended to expect doom and gloom. No matter what your age, it's not too late to take steps to prevent memory loss. Great ways to boost optimism and slow memory loss are:

- Exercise. Aerobic exercise is proven as one of the best ways to prevent or slow the onset of dementia. (More on exercise below.)
- Keep learning. Experts think that advanced education may help keep memory strong by getting people into the habit of being mentally active. Regardless of your level of education, however, you can choose to be an active and life-long learner.

Fall Prevention - A serious fall can severely impact physical and emotional health, and often causes a decline that is difficult to reverse. The best predictor of a fall is a previous fall. Know how to prevent them by learning about the risk factors leading to falls among older adults. Check with your local Safe Communities organization (www.safercommunity.net) about classes designed to help you avoid falling. Take action by obtaining medication reviews, home safety checks, exercise and balance classes, good nutrition and hydration, and avoiding home chores that require reaching high or getting on ladders.

Community - Religious services and church activities, service clubs, sports, community service, and work all assist us in maintaining healthy, satisfying lifestyles in retirement. Access to coffee shops, grocery stores, pharmacies, clinics, and other social outlets and centers of commerce is critical. Take the time to learn what your area offers in the way of senior community activities—members helping members—such as neighbors who check on seniors' activities (e.g. picking up daily papers, shoveling sidewalks, etc.). Understand what resources are available. Contact AARP for information on retirement issues, places of worship, fraternal organizations, and Senior Centers. Dane County has many resources available to assist senior citizens and their families. Visit your library or local senior center to get the latest publications of the "Over 60 Resources" or the "Caregiver Guide." There are 14 Senior Centers and/or Senior Coalitions in the Madison area offering many types of assistance.

Exercise - Exercise is truly a wonder drug. People who say that exercise keeps them young may be more correct than skeptics think. Research now suggests that much of the decline once attributed to aging is actually due to long-term inactivity. Exercise can improve overall health, well being, and quality of life. Regular old-fashioned, sweat-inducing exercise is probably the most important thing seniors can do to age successfully. Even in moderate amounts, exercise can help seniors enjoy life and avoid diseases that many people mistakenly believe automatically come with age.

According to a 1996 report from the U.S. Surgeon General, fewer than 40 percent of American adults are active on a regular basis, and 26 percent aren't active at all. Exercise equivalent to walking a mile a day has been found to reduce mortality in women by 40 to 50 percent and 4 percent in men during a five year follow up period. Exercise may include going up and down stairs, walking, running, walking the dog, dancing, gardening, swimming, biking, skiing, shoveling snow, mowing lawn, raking leaves, washing the car, making the bed, etc. An exercise period of 30 minutes per day is suggested, though it may be made in several shorter periods. Use it or lose it!

If you feel any of these exercises are too strenuous, consider something low impact that maintains range-of-motion and helps prevent premature loss of muscle tissue (Tai Chi is a good option), or make an appointment with a health club for guidance..

Benefits of exercise:

- Improving balance. Proper balance is one of the best ways to prevent falls.
- Maintaining muscle tone and elasticity for efficient body function.
- Reducing risk of falling and breaking bones.
- Generating energy and improving stamina and ability to perform daily tasks.
- Preventing chronic conditions (e.g. cardiac vascular disease, high blood pressure, obesity, diabetes, osteoporosis, arthritis, and cancer).
- Improving mental outlook and combating depression.
- Reducing stress.
- Improving self-esteem.
- Enhancing sleep.

Nutrition - In order to maintain a healthy, active lifestyle, we must fuel our body with nutritious food. Make sure that you are eating adequate portions of nourishing foods. Avoid junk food as much as possible, which provides empty calories and little nutritional value. Seniors are becoming an increasingly vulnerable population when it comes to hunger issues. According to a University of Kentucky survey, the number of U.S. seniors facing hunger risks rose from about 700,000 to 3 million during the years 2001 to 2007. Food Banks of Canada report that the number of Canadian seniors helped by food banks went from 5.5% of adults served in 2009 to 7.2% of adults served in 2010 – and that number doesn't account for seniors who receive free or subsidized meals from community meal delivery programs.

There are numerous social, emotional and economic reasons for the increase in food insecurity among seniors:

- a. Do seniors have the zeal to cook for one or two?
- b. Do food markets favor seniors? Many aging seniors lose height. Stores place the largest containers on the low shelves with small containers suitable for one-or two- person families on the upper shelves. And, many portions for sale are too large for small family units, resulting in waste.
- c. Do seniors have sufficient mobility or transportation to go to grocery stores or restaurants? If not, does the local grocery store offer delivery?
- d. Are food costs too high, limiting food purchases; or are medical costs prohibiting the purchase of food?
- e. Are Meals on Wheels and meals in senior centers available and affordable?
- f. Are kitchen cabinets well arranged for a senior who may have a reaching or balance limitation, i.e. cooking supplies are on shelves too high for seniors to reach and especially to place in the cupboard again?

If you are facing any hunger issues, please contact SAIL for assistance.

HOUSING

A major decision regarding retirement is where to live. Many retirees may sell their homes and move to a warmer climate—at least for part of the year. Others may move to a retirement community.

Retirees should consider the type and kind of community they want to live in. Some questions to ask yourself: Are cultural events important? Are there relatives and friends nearby for socializing? What recreational activities do I enjoy, and are facilities available? What resources are available for seniors in the community, such as transportation, medical care, and safety resources?

Moving into independent living within a continuum of care campus (where assisted living, memory care, and skilled nursing are available) often requires an up-front payment of \$120,000 to \$400,000 or more plus a monthly fee of approximately \$2,000. This is often called a “life lease” where in most cases 90% of the original payment is refunded at the end of the contract.

Eighty-five percent of Baby Boomers wish to stay in their own homes and communities for the balance of their remaining years. Only about 5 percent of adults over age 65 live in a nursing home, with another 2 percent living in some other type of group quarters.

There are many compelling reasons for staying in your home, including:

- a) You likely have years of memories associated with your home.
- b) Your surroundings are familiar. You know where items are located and can get around the home with ease.
- c) Your home or condo can be easily adapted to meet your needs.
- d) Your home can't be sold at its present value. Single family homes and condos often sell for less money than the owner has invested.
- e) You appreciate the community, seeing people coming and going, speaking to people, watching the birds or other wildlife. You enjoy babies, grandchildren, and adult neighbors.
- f) Your family and friends may be located nearby.

Fortunately, an existing home can often be adapted to meet changes in abilities that may accompany aging. An older person may experience changes in vision, hearing, strength or energy level. They may have difficulty walking and require a wheelchair or walker. If you are dedicated to remaining in your own home, be sure to consider the following to ensure that your home is a safe environment for you as you age:

- a. Watch for barriers to daily living – can you get out of your easy chair? What is the color scheme in your home? Soft soothing colors may not provide sufficient contrast for a person with low vision.
- b. Floors should be level and firm with non-skid surfaces. Polished floors can create a sense of insecurity. Dense, low-pile carpeting with a thin, firm pad provides a continuous non-skid surface. Scatter rugs tend to slip or bunch up, causing falls. For safety and ease of maintaining kitchens and bathrooms, use unglazed, nonslip ceramic tile or non-waxed vinyl. A clean rubber mat in front of the sink helps prevent slipping.
- c. Doorways and entrance areas should be level. Be sure threshold or door-sill height varies no more than ½ inch and is beveled for a gently sloping non-skid surface. Clearly mark any change in grade with a change of color or material. Single steps with no railing can trip anyone.

d. Stairs – Keep stairways well-lit and free of clutter. Have firmly attached railings on at least one side of stairs (both sides preferred). Tubular handrails of about 1¾ inches in diameter are easier to grip than other shapes and should be installed about 2 feet 8 inches above non-skid stair treads. A change of color or material at both top and bottom of stairs helps signal start and stop areas.

e. Lighting – Place light switches outside bathrooms, at both ends of halls and stairways, and near doorways so a person need not walk into a dark space to find light. Provide an adjustable wall lamp with a switch within easy reach of the bed in the bedroom. Distribute lighting evenly throughout a room and from one area to another. Keep entrance areas and doorways well-lit. Sheer curtains let in much light, but diffuse it to eliminate glare. Replace low-wattage light bulbs with higher-wattage bulbs. And provide night lights in hallways, bathrooms, and bedrooms.

f. Bathrooms—Install 1- inch grab bars where most convenient and at both sitting and standing levels. Secure to the building’s framework or blocking to support at least 250 pounds. Separate showers with low rims are safer than tubs; however, tub safety can be improved with a clean, non-skid mat and grab bars.

Provide a tub chair and hand-held, flexible shower attachment for someone who wants to shower sitting down. Provide a transfer bench with adjustable legs and non-slip tips for a person using a wheelchair. Place frequently used items within easy reach. Limit water temperature to 120 degrees F. to prevent scalding.

g. Furnishings – Bed and chair heights should be 17 to 18 inches above the floor. Place a sturdy table or chest 4 to 6 inches higher than the mattress next to the bed to place supplies within easy reach. Place sturdy, non-tipable tables of the same height next to chair arms for easy reach.

h. Other changes needed—Install hand rails on outside stairs, garage stairs, etc.

Make all step heights equal and at code and all treads equal width. Repair uneven sidewalks, and remove trip joints in walks and drives. If you have a front-loading washer and dryer, raise them so you can easily reach in. Invoke a “one-hand-on-the-rail” rule if you use stairs. If you need to carry something, place it in a sturdy bag with a handle.

However, sometimes staying in one’s own home becomes unmanageable, despite good intentions or preferences. If you find that the upkeep for a house is too demanding or expensive, you may consider moving into a condo, a co-op, a rental, or a retirement community. If finances are limited, check into subsidized housing for elderly with low incomes. Contact SAIL for help.

OTHER HEALTH CONSIDERATIONS

Primary Care:

- Obtain a physical exam every year or two; keep vaccinations up-to-date.
- Always get a second opinion when surgery is proposed.

Consider the following:

- Geriatric Evaluation—especially if you notice a change in memory or if you’ve had a fall
- Care Management—a professional care manager can help you navigate the health-care system and advocate for you.

- Personal Emergency Response System—sign up for a personal medical emergency alert system when living alone. (Please contact us for information about SAIL’s S.O.S. program.)

Medications - Prepare daily schedules for taking prescriptions. If you take more than one medication, consider using med boxes. Visit with your pharmacist and physician regarding prescription or over-the-counter medication concerns. When you receive a new prescription, request a medication review by your pharmacist (preferably a certified geriatric pharmacist). If you experience a change in your functioning, ask for a medication review in order to rule out the possibility of a drug interaction or intolerance.

Common medication-caused problems (also known as “adverse drug events”), among seniors include: cognitive decline, poor balance, falls, gastrointestinal bleeding, severe low blood sugar, insomnia, and fatigue. It is a fact that seniors taking 4 to 8 medications each day have a 50% chance of an adverse drug event; seniors taking 8 or more each day have a 100% chance of an adverse drug event.

Other tips for medications:

- Consider generic drugs.
- Make it a point to know your medical suppliers.
- Make sure the insurance plan covers the prescription.

When your physician prescribes a medication for you, be sure to ask:

- Are there any non-drug alternatives available?
- What risk is there in not taking this medication?
- Will this medication interact with other medications I take?
- What are the most common side-effects?
- Are some side effects more likely to occur in someone my age?
- Will I get used to the side-effects over time?
- How long before we will know if the medication is working? Should I monitor anything while I’m taking the medication, i.e. blood sugars, blood pressure, sleep habits, etc.

Health insurance tips:

- Keep medical bills organized.
- Consider long-term care insurance for a person whose net worth is between \$100,000 and \$1.5 million. Look for a policy with a three-year term; nursing-home and assisted-living stays are often about two years in length.

Day-to-day living tips:

- Keep a calendar for daily activities; maintain a list of service providers and telephone numbers.
- Keep financial papers in one place.
- Keep important documents organized.
- Avoid ladders.
- Pets are a stimulus for seniors, but may increase the chance of tripping. Care should be taken around cats; a scratch may lead to cat-scratch fever.

Prepared by Dwayne A. Rohweder, SAIL member with assistance by Ann Albert, Executive Director, Supporting Active Independent Lives. Editorial assistance provided by Faith Miracle and Bobbi Dumas.

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