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A Wealth of Winter Events

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OUT AND ABOUT IN NEW JERSEYInside Back Cover



New Year, Same Mission

Still on track for 2015

NJFA is still committed to bringing you current information and valuable resources. Though it may be in an online only version, NJFA is proud to continue to present you with new content in *Renaissance* magazine.

In addition to *Renaissance*, NJFA continues to produce new *Aging Insights* programs. In January you may have caught Episode 40, Investigating Financial Abuse. This episode was hosted by NJFA Deputy Director, Melissa Chalker and featured Sgt. Sylvia Presto of the Bergen County Prosecutors office and Maria Aberasturi, from Bergen County Adult Protective Services. They share information about recognizing and investigating financial abuse. In February, you will see Episode 41, hosted by NJFA Executive Director Grace Egan, who is joined by Arnold Cohen of the Housing and Community development Network of NJ and Kim Cole of Navicore



Sylvia Presto (left) and Maria Aberasturi (right) are featured in the 40th Episode of Aging Insights

Solutions, formerly NovaDebt. In this episode, titled Elder Economics and Housing, the guests discuss the realities of limited income resources and the community options for affordable housing. The guests also discuss the cautions regarding Reverse Mortgages.

Stay tuned in 2015 for more *Aging Insights*, including such topics as assistive devices, medication management, safe driving and much more! *Aging Insights* is broadcast on 60 municipal TV stations, on NJFA's website and on our YouTube channel:

<https://www.youtube.com/user/njfoundationforaging>.

2015 CONFERENCE

NJFA will be holding our 17th Annual Conference on Wednesday, June 3rd at the Crowne Plaza Monroe.

Professional development is a priority for NJFA. We are able to recruit speakers to bring professionals in the aging network valuable information and resources they need to do their job. Our keynote speakers this year will be James Firman, the President of the National Council on Aging (NCOA) and Nora Dowd Eisenhower, Assistant Director of the Office of Financial Protection for Older Americans at the US Consumer Finance Protection Bureau. Mr. Firman will address the audience in the morning. He is a recognized national leader and advocate in the field of aging. Ms. Eisenhower will speak to conference goers over lunch.

Sessions are being planned that will cover addiction, elder abuse, dental and medical protections and much more. Sponsorship and vendor information is currently on NJFA's website. Registration information will be posted as soon as it is available.

NJFA HONOREE AND FUNDRAISING EVENT

On December 7th, NJFA celebrated 2014 with our Board members, advisors, partners and friends. During the Honoree Dinner, awards were presented to, the Grotta Fund for Senior Care, Susan Bredehoft, NJFA Treasurer and Event Chair, as well as Lowell Arye, Deputy Commissioner of the NJ Department of Human Services. Prior to dinner, guests enjoyed a performance of *The Fabulous Lipitones* at the George Street playhouse. Dinner, a silent auction and 50/50 raffle were held at the Heldrich Hotel.



Left to Right- Shelley Levine and Renie Carniol of the Grotta Fund, Lowell Arye, NJFA Board Members Mark Tabakman and Susan Bredehoft

Above Right Corner: Arnold Cohen and Kim Cole on the set of Aging Insights



What's in Store for 2015

We can all teach and learn **By Grace Egan, Executive Director, NJFA**

Advocacy is an essential part of work of the NJ Foundation for Aging [NJFA]. It was one of our founding principles. The visionaries who incorporated NJFA in 1998 outlined the following: to serve as the statewide voice for social policy to enhance services for older NJ residents; to encourage and maintain high standards of service in the field of aging to better serve older adults; to access and analyze information concerning the needs of and programs for older adults in NJ; and to disseminate and educate the general public and professionals across the state on issues related to older adults.

On February 2, 2015, NJFA celebrated its 18th anniversary. The founding principles cited above remain the focus of NJFA. The mission aligned activities including advancing public policy to age well in NJ, promoting age-friendly communities, creating pathways to access services, offering professional skills development sessions at an annual conference and forums throughout the year. *Renaissance* magazine and NJFA's public access TV program *Aging Insights* are two of the ways we share NJFA's message with the general public. As you can see, these educational messaging platforms are directly tied to the NJFA's mission aligned activities: policy, professional development, and access to services.

In this issue of *Renaissance* you will see an in-depth article from writer, Kip Rosser, on a teacher who, though retired, both continues to teach and learn. This is a good trait for us all to emulate. Other articles touch on Social Security Updates; how to protect yourself from financial exploitation; important details on Reverse Mortgages. You will also see an article on Federal Qualified Health Centers located throughout NJ. These centers are community resources that you might be find convenient for dental and other health services. Of course you will see some news about what NJFA has been up to as we roll deeper into 2015.

As always you will see a list of resources on the back pages of the magazine. We usually suggest when we get calls in the office for local services that the caller contact their County Office on Aging – those numbers are on the resources pages. If you know a person living the community who is verbally or physically abused, Adult Protective Services (APS) is the agency to make a referral. Each county has a program and they will gather details from the caller and investigate the situation to see what services might be needed. APS numbers are on the same page as the County Offices on Aging.

Like the teacher who is still teaching while learning—let's make that our goal in 2015.

Grace

HELP KEEP US UP TO DATE

Please fill out and return this coupon to: **Renaissance Magazine - NJFA, NJ Foundation for Aging** 145 West Hanover St., Trenton, NJ 08618 Tel: 609-421-0206, Fax: 609-421-2006

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WINTER 2015

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Here is a sampling of the 60 stations that broadcast *Aging Insights*

- Bayonne
- Bergen Area-CableVision
- Carteret
- Colonia
- East Brunswick
- East Windsor
- Edison
- Elizabeth-CableVision
- Fair Lawn
- Hamilton-CableVision
- Highland Park
- Hopewell Twp
- Hudson Area-CableVision
- Jackson Twp-CableVision
- Long Branch
- Metuchen
- Middlesex
- Milltown
- Monmouth Area-CableVision
- Monmouth Junction
- Monroe Twp
- Morris County Area-CableVision
- New Brunswick
- North Brunswick
- Oakland Area-CableVision
- Old Bridge
- Parlin
- Paterson Area-CableVision
- Perth Amboy
- Piscataway-CableVision
- Piscataway Twp
- Plainsboro
- Princeton
- Raritan Area-CableVision
- Sayreville
- Secaucus
- South Amboy
- South Plainfield
- South River
- Spotswood
- Stockton College Station
- Trenton
- Union
- Union Area-CableVision
- Verona

GET IN THE KNOW WITH *AGING INSIGHTS*

In 2011 the NJ Foundation for Aging (NJFA) began producing a half-hour TV program. *Aging Insights* is now broadcast more than 300 times a month, hopefully by a TV Station near you. The goal of this magazine and the



Aging Insights TV programs is to connect caregivers, seniors and boomers to community based services. With that in mind we cover a lot of topics since everyone's needs vary. So if you have not seen *Aging Insights*, be on the lookout on your cable stations and your municipal public access station.

Each show is hosted either by Melissa Chalker or by Grace Egan. In February we aired a program on Food Programs to



inform viewers about benefits they may be eligible for such as, SNAP. The March program was on Tax Relief and touched on ways seniors can participate in these programs. In an effort to cover a variety of topics, the March show features two guests talking about addictions, in particular the problem of alcohol/drug addiction and gambling addiction in the senior population. In case you missed these shows or any other previous episodes that have been produced you can see all of them on our website at www.njfoundationforaging.org/agingin-

sights/ or on You Tube. That's right, NJFA has a YouTube channel and all *Aging Insights* shows can be seen by going to www.Youtube.com/njfoundationforaging

On the left side of this page is a sam-



pling of the 60 stations across NJ that broadcast the show.

Get your public access station to broadcast *Aging Insights* too by contacting us at the NJ Foundation for Aging, 609-421-0206 or office@njfoundationforaging.org

These shows are made possible by sponsors and donors like you. Please support *Aging Insights* and the NJ Foundation for Aging.



Go to www.njfoundationforaging.org/donatehere.html. Sponsorship levels are posted on NJFA's website as well.





Social Security & Medicare

It's amazing what you can do online

Social Security offers an online retirement application that you can complete in as little as fifteen minutes. You can apply from the comfort of your home or office at a time most convenient for you. There's no need to drive to a local Social Security office or wait for an appointment with a Social Security representative.

In most cases, once your application is submitted electronically, you're done. There are no forms to sign and usually no documentation is required. Social Security will process your application and contact you if any further information is needed.

You may wonder if your information will be secure. Social Security uses secure technology on the Internet to keep your information private. In addition the Social Security Administration has policies on privacy that you can read about here <http://www.socialsecurity.gov/agency/privacy.html>. Social Security's website has online tools to help you apply. Instructions for the online application are here: <https://secure.ssa.gov/iClaim/rib>

Not sure what your full retirement age is? Take a look at the chart below from ssa.gov

Year of Birth	Full Retirement Age
1937 or earlier	65
1938	65 and 2 months
1939	65 and 4 months
1940	65 and 6 months
1941	65 and 8 months
1942	65 and 10 months
1943--1954	66
1955	66 and 2 months
1956	66 and 4 months
1957	66 and 6 months
1958	66 and 8 months
1959	66 and 10 months
1960 and later	67

Other important things to remember are:

- You must be at least 61 years and 9 months old to apply for retirement benefits.
- You should apply for benefits no more than four months before the date you want your benefits to start.
- If you are already age 62, you may be able to start your benefits in the month you apply.
- If you are not getting Social Security and you are not ready to retire, you should still sign up for Medicare four months before your 65th birthday.

You may be trying to decide when to apply. You can start your Social Security retirement benefits at sixty-two or delay until anytime after that up to age seventy. Your monthly benefit amount will be determined by the age you start receiving it. For example, if you start your benefits early, they will be reduced based on the number of months you receive benefits before you reach your full retirement age.

There is much more to know about when to apply for Social Security, be sure to visit their website to learn more: <http://www.socialsecurity.gov/retire2/applying1.htm>



WHAT ABOUT MEDICARE?

You should sign up for Medicare close to your 65th birthday, even if you are still working. You can learn more about how and when to apply at either ssa.gov or medicare.gov. If you are getting Social Security benefits when you turn 65, your Medicare Hospital Benefits (Part A) will start automatically. Part A (Hospital Benefit) is automatic and no cost to you, but you may need to apply for Part B and it comes with a monthly premium. Learn more about Parts A and B at <http://medicare.gov/sign-up-change-plans/get-parts-a-and-b/when-how-to-sign-up-for-part-a-and-part-b.html>

If you prefer to reach our for help by phone instead of online, you can call Social Security at 1-800-772-1213 (TTY 1-800-325-0778) or Medicare at 1-800-MEDICARE (1-800-633-4227).

CAUGHT ON THE ROLLER COASTER

By Kip Rosser

For almost six years, Lois Kipnis has been on a non-stop roller coaster. Imagine all of the spine-wrenching hairpin turns. Imagine the slow, steady grinding of the cars up a near-vertical incline as the uneasy feeling of anticipation grips you – approaching the top there’s no sight distance – will you fall into nothingness? Suddenly you’re plummeting down and down, winding, corkscrewing wildly and finally leveling out, only to be whipped around savagely then pulled inexorably up again. Six years and counting, almost without a breath.

The difference is, Lois is on a roller coaster of events and emotions. And she’s not alone. Right next to her is her mother. In the cars behind are her husband, her son and her daughter. They’re all being pulled along for the ride. Lois Kipnis is a primary caregiver for her ninety-five year old mother and she describes it as a roller coaster.

No one and nothing really prepares us for caregiving.

There’s a very generalized commonality of experience that’s recounted in many books on the subject. But every situation is unique because we can never know what our reactions will be, seeing a loved one become incapacitated, just as in Kipnis’s case, witnessing both her mother’s physical decline and her gradual succumbing to dementia.

One thing all experts can agree on is that the caregiver’s wellbeing has to be a priority. Often, it’s the caregiver who, in tending to her loved one, is totally oblivious to how she herself will process all of the situational and emotional fallout. Some caregivers are brave enough to reach out and find support groups. Others might eventually seek counseling.

Lois Kipnis wrote a book. It was not something she set out to do. She was writing it almost before she realized it. The end result is *Without a Script: A Caregiver’s Journey*.

The book’s title could not be more apt. Kipnis is a

creative arts consultant with forty years of experience as a drama teacher and arts administrator. After receiving her B.F.A. in Theatre Education from Boston University, she did her graduate work at the University of Massachusetts. She worked as an artist in residence and instructor of workshops that enabled teachers to integrate the arts into their curriculums. Over the course of her career, she directed award-winning high school productions, and developed intergenerational projects as well as school partnerships that bring the arts to students of diverse abilities.

A major outgrowth of such work has been her writing life. Her publications include the one-act play, *Things Can Always Be Worse!*, and three educational books that she co-authored: *Together We Can Improvise* (Volumes 1 and 2), and *Have You Ever...Bringing Literature to Life Through Creative Dramatics*. Most recently, her story, *I Did Not Understand* was selected for inclusion in the newly released *Chicken Soup for the Soul: The Power of Forgiveness*.

On its surface, *Without a Script* is a reference to improvisation, a form of theatre that's considered to be among the most risky for actors. TV programs like *Whose Line Is It Anyway?* feature improvising at its best as actors are given situations for which they've had no preparation. With the situation in mind, they perform a miniature play, off the cuff, entirely unscripted. But as a title for a book about caregiving? The analogy holds perfectly. While we can read up on caregiving, study accounts of the pressures and trials, the rewards and moments of triumph, nothing – absolutely nothing – can truly equip us. We just don't know what we may be in for. We are left to our own devices to try to make the best of the situations as they come, and as our loved ones face their ordeals.

"I think everyone comes to caregiving differently," Kipnis explains. "Whether the problem is dementia or Alzheimer's, serious illness or physical decline. In the case of my mother, I don't always know what I'm going to be dealing with on a given day. There are some days when it's okay and other days when I see her totally confused and unable to function."

There is an edge and energy in Lois's voice that makes her sound perpetually inquisitive and enthusiastic about her work. It's as if she's a little astonished that she actually wrote this book and at the way it has turned out. As we converse, she emerges as a person of penetrating intelligence and seriousness, tempered by flashes of humor when I least expect them.

Lois's mother lived in Peabody, Massachusetts. Even at the age of ninety, her mom was still living on her own. She was very much "herself," teaching, gathering thirty women at the senior center to play mahjong. Caregiving began, as it does for most people, in small ways. "But she's always had orthopedic issues. When she came to visit at ninety, she was bent over with scoliosis and she was barely making it with a walker."

Things got harder and harder. "At first, my mom was still clear. But eventually she couldn't do her bank book anymore. We got a scooter, then an electric recliner to

sleep in so she'd be able to get up and down. But she couldn't do it. Then came the clues that dementia might be setting in."

Kipnis's mother was falling a lot, but she'd refuse to go to the hospital, insisting she was fine. This denial only delayed the inevitable. After a particularly bad fall, Kipnis's mother went into rehab. "They told us she couldn't go back to being by herself. And what do you do when you have no money? Not much." Even though her mother didn't want to go into a nursing home, she'd always said that if it became necessary, there was one in Peabody she'd agree to reside in. Kipnis now found herself regularly making the 244-mile trek from her Long Island home to the nursing home in Peabody. After eighteen months, it became easier to move her mother to a nursing home on Long Island.

"At about the same point my mom was needing to be tended to and as things continued, almost without realizing it, I'd been writing our stories," Kipnis tells me. "I never sat down and decided to write a book about caregiving. About six years ago, when I stopped working full time, I told myself I was done with writing educational books. I had just finished the two books on improvisation. I thought 'I want to just write stories and poems for me now.' And I saw an advertisement for a free workshop for seniors called *Writing Our Stories* at the local library on Thursdays. I'm a senior, so I decided to go to the first one. I arrived late and saw I was the youngest person there! I thought, 'What am I doing? I don't belong here.'"

Despite her initial feelings, Kipnis sat through the entire session, mesmerized. "Their writing was wonderful," Lois continues. "And for so many of them, it was validating their lives. So I stayed with it."

Having devoted so much of her life to teaching and working with others, her ability to make an impact in peoples' lives took hold.

"The workshop was so wonderful that I went to the library and said, 'Listen. We need to do more than four sessions. You're validating peoples' lives.' We went from four to six to eight to ten. Each week, the woman in charge gave us a prompt and everybody wrote to the prompt. The next week we'd come back and read it out loud."

Without a Script: A Caregiver's Journey is a radical departure from the other books Kipnis has written. In fact, it's arguably like no other book that's been written about caregiving. Rather than being a straightforward narrative or chronology of the experience of being a caregiver, the book – at first – defies description. It combines, fantasy, imagined conversations, actual experiences, dialogue, poetry, and dreams:

What do we do when dreams die? Three images caught in the dream catcher's net float to the forefront of my consciousness: The geriatric specialist, autumn-colored snow bib, and exit numbers 93 and 94. Exit numbers. Was the lady in my dream
(continued on next page)

(continued from previous page)

meant to exit at 93, but someone preserved her with meds, therapy and pipedreams and rerouted her to 94? Why? She's void of determination and aspiration and dreams only of expiration. Dream catcher. Dream catcher. I understand. It's time now, isn't it, to let go of her hand.

The result is swirling prose and verse that seamlessly carries the reader along. Kipnis's roller coaster ride as a caregiver translates into the same type of dizzying ride for the reader. This new book is something she obviously cares deeply about. The intimate experience of having written it, coupled with the fact that she is still caring for her mother tinges her words with underlying emotions as we continue to talk.

"There was a huge turning point for me. A friend in a writing class gave me a poem that was written through the eyes of someone who had Alzheimer's. That was cathartic for me in terms of how I looked at my mother and dealt with her from then on. I was so angry – angry that she was there, that I couldn't save her, that I couldn't get her out of there. All she wanted to do was get out. She'd insist she could live in my garage. But I read that poem, and all the person was saying was 'just listen, just validate what I'm saying. Hear me.' It's what I needed at that point. Just to listen and validate that my mother's feelings were real."



It became important from then on that Kipnis be able to convey that to readers of the book. "I didn't want people reading things only from the caregiver's side." To that end, she wrote the chapter called "Message in a Bottle" from a ninety-something year-old lady in a nursing home. "My mother's been very vocal about all her feelings," Lois explains. "So I wanted to validate and include both her feelings and frustrations."

In the book, Kipnis never shies away from her own emotions either. In ways that are sometimes humorous and sometimes heartbreaking, she is tough on herself and what she's feeling, too – feelings, she admits, that she was

ashamed of. I asked her point blank about how she can forgive herself for such feelings and for keeping her mother in the facility. Without hesitation, she replies, "I don't know if you ever do. I'm not sure it ever leaves you. I've had more conversations with God, walking up the hill to the nursing home, walking back down the hill. I'd walk up to the nursing home 'Okay Dear God let me be patient today. Let me just listen.' Or, I'd be walking back down the hill, 'Forgive me God, I didn't mean to do that.'"

As all caregivers must do, Kipnis is continually reconciling the person her mother once was with the person she has become. "My mother was a fun loving person. If there was a line dance, she was line dancing. Halloween? She'd be in costume. My dad died at 66; she never drew me down with it, never bothered anybody. She was actually a woman ahead of of her time. She went back to work when I was ten and that wasn't something most women did. She did what she had to do. She was a doer filled with laughter. That's what I hang on to, and yet that's what makes it harder for me. I just said to a friend the other day 'if I'd hated my mother maybe this would be easier.' But I love my mother. She's never burdened anybody. Now she's in the nursing home and she keeps saying to me 'I'm sorry to keep bothering you but who am I supposed to talk to?'"

It should be stated that this "normal" interview I was conducting with Kipnis contrasts greatly with the rush of emotions, events and depth of sensitivity that fill the pages of her book, which is a completely different, heightened experience.

Her hope is that the "take-away" for those who read the book will be, "It's okay to have all these feelings you're having. There are no abnormal feelings caregivers can have. A friend of my daughter's is taking care of her mom with Alzheimer's. I gave her the book and she was confronted with all the emotions that she's had, all the things she's thought but was afraid to say. Or afraid to admit to. And the laughter. She was able to laugh and cry at the same time. It's okay to curse. I've raised questions that people are afraid to ask, like: what do you do when someone has nothing left and all they want to do is die? So for caregivers, that's my hope – that they can identify with it all and realize, 'Oh my god. I've been there. I'm doing it.'"

Where do things stand now? The book is written, but the roller coaster is still speeding along. Lois Kipnis's mother is still in the nursing home. But things have changed a little in that Kipnis continues to learn. "One of the biggest issues as a caregiver – it feels as if you have almost no control over things. And one of the ways I started to finally survive it all was to discover what *can* I control that can make her happy. And they're simple things. I can do her laundry. I can go visit and play a card game; I play Uno with her. When you do those little things, you feel that you're making a difference. She's happy and I leave there feeling good. For me, it works."

The book is beginning to take on a life of its own. Reactions are powerful, positive and even startling. "What

I get from younger people is that they have no concept of this at all. A friend of mine is giving the book to her daughter, because her daughter's refusing to have conversations about aging and what can happen. She's using the book to tell her, 'This is what's going on and you can't keep saying oh, whatever.' My own kids still see me with a lot of energy. And they think it's forever. But they've learned a lot seeing how I've dealt with my mother."

Just as *Without a Script* is a unique view of caregiving, Kipnis never backs away from other aging issues. She has faced continued rejection of her children's book, entitled, *Nana Banana*. The book begins with an eight year-old girl who goes to the nursing home to visit her nana. Nana whispers to her that she has a secret: she's wearing diapers, just like the little girl's baby brother! As the story progresses, Kipnis gently, yet squarely gives children a way to look at aging and the confusing feelings they may have – it's a way of looking at aging that publishers don't seem to think anyone's ready for.

Lois also indicated that apart from promoting the book, she has several "backburner" projects. As we wrap up, I ask her, "So what are you working on now?"

She lets go with a spirited laugh and says, "Sanity. And finding a new dark chocolate."

Lois Kipnis's book, *Without a Script: A Caregiver's Journey* can be found and purchased at www.amazon.com.

WRITER'S SIDE NOTE

This article wouldn't be quite complete without a little additional piece of background. From kindergarten through graduate school, I had only five teachers who profoundly influenced my life, teachers whose impact I still feel today. Lois Kipnis was one of them. I had her for a single drama class during my sophomore year in high school. She encouraged us all to be adventurous. Her additional support and expertise on a side project that lasted months was incredible. Close friends from high school that I'm still in contact with feel as I do. We gravitated toward her exuberance, her energy and the fact that she demanded real effort from us. She was a teacher we wanted to work for. In 1980, nine years after graduating, I was performing in New York City. During one Saturday afternoon matinee, I heard an unmistakable laugh. It was too dark to see past the lights into the audience, but at the curtain call I spotted her; there was Lois, beaming. We've seen one another only a few times over the years. In November she emailed me to mention that she'd written a book. My wife (also one of Lois's students) and I immediately ordered it from Amazon. When it arrived, I sat down to read it straight through – couldn't put it down. What she achieves in 80 short pages defies description; it has to be experienced. While interviewing her for this article, we both expressed our amazement that back in high school, the ten years in age that separated us seemed vast. Here I am in my early sixties, she in her early seventies and that ten-year gap seems to barely exist at all now.



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Smart Assistive Tech Shopping

Why pay more? By Curtis Edmonds, JD, Managing ATTY, Disability Rights, NJ

A couple of months ago, when I started having problems with blurry vision due to eyestrain, I decided to invest in a pair of magnifying reading glasses. I do most of my personal shopping on a large online retail site, so I went there to pick out exactly the glasses that I wanted.

There were many more options than I anticipated. Reading glasses are available in a wide range of prices. The pair that I bought was fairly generic, and only cost about seven dollars. I could have bought four pairs of a slightly different pair of glasses for about the same price—but I only needed one.

Retailers will happily sell you all the inexpensive reading glasses that you may need, but they will also sell you reading glasses from Gucci and Prada and Tiffany for hundreds of dollars more, which will do the exact same job. Retailers also offer a wide range of assistive technology devices, such as reachers, walkers, commodes and augmentative communication devices. These devices can vary widely in terms of price. If you're a person with income limitations due to a disability, or you're living on a fixed income, you have to make every dollar count. Here are some quick and easy guidelines you can use to make sure you're getting the most value for your dollar.

SHOP AROUND

I do a lot of training on assistive technology devices in my role as Program Manager for the Richard West Assistive Technology Advocacy Center at Disability Rights New Jersey (ATAC of DRNJ). I'm always on the lookout for interesting and useful new devices. When I'm shopping online, I always do a Google search to see if the device I'm looking for is available on different sites, and to see if the cost varies from site to site. Sometimes I'm able to find a better price that way. Also, I often find similar products with different features that may be even more useful than the product I originally went to buy.

When you're buying online, be sure to look at shipping costs. Some items may appear cheap, but the overall cost may be more depending on charges for shipping. Don't forget to look for online coupons, too. Sites such as RetailMeNot (<http://www.retailmenot.com/>) provide a collection of coupons for a variety of different sites. You may be able to get discounted prices or free shipping through these coupons.

YOUR ASSISTIVE TECHNOLOGY PROGRAM

If you are not an online shopper, ATAC of DRNJ is available to help you find assistive technology products. You

can describe what you need, or tell us what sort of limitations you have that assistive technology can help you with. Our staff can research the issue and give you options on different places to contact for more information. We can also arrange for a demonstration of different assistive technology devices through one of our partners, or even a loan to try out a specific device.

We have information about financing the purchase of the device as well. The "Back In Action" catalog (also available online, at <http://backinaction.drnj.org/>) can help you access individuals who are looking to sell or donate assistive technology items. ATAC of DRNJ contracts with Goodwill Home Medical Equipment (GHME) to repair and refurbish donated items, which are on sale for sharp discounts at their Ewing showroom. You can contact GHME at (609) 225-4509 or <http://www.goodwillhomemedical.org/>. We also maintain a good list of assistive technology vendors and assistive technology items at <http://www.drnj.org/atac/?p=4330>.

THE AGING AND DISABILITY RESOURCE CONNECTION (ADRC)

The ADRC is operated through the New Jersey Department of Health and Senior Services. It's a one-stop telephone number, at (877) 222-3737, that puts you through to your county area agency on aging. The ADRC is designed to help senior citizens with information to help them get services which can let them remain independent in their homes, and this can include assistive technology.

EQUIPMENT DISTRIBUTION PROGRAM

If access to the telephone itself becomes a problem contact the New Jersey Division of Deaf and Hard of Hearing toll-free at (800) 792-8339, or visit them online at <http://www.nj.gov/humanservices/ddhh/equipment/> for information on getting access to equipment that can help make using the telephone easier for individuals with hearing loss. Individuals who have both hearing loss and vision loss can connect with the new iCanConnect program at <http://www.icanconnect.org/new-jersey> or (609) 771-2711.

There are many options for anyone with an interest in shopping for assistive technology devices. Many times, for many people, the least expensive option can be a good option. Shopping around is one way to ensure that you get the best device to meet your personal needs.

For more information, contact ATAC at: (800) 922-7233 (toll-free in New Jersey) and (609) 292-9742, or visit our fully-accessible website at <http://www.drnj.org/atac/>



BLACK-EYED PEA & GARBANZO SALAD

Quick and Easy Meals

A little something for everyone

Swiss Chard Pasta Sauce



Maybe you've seen it in the store, or heard someone on TV talk about how healthy it is, but you have no idea what to do exactly with Swiss Chard. Here's a recipe to help.

INGREDIENTS

5 cups Swiss chard, stalks and leaves
1 tbsp olive oil
2 cloves garlic, minced
¼ cup onion, chopped
2 large tomatoes, chopped
½ cup plain yogurt
Ground pepper, to taste

DIRECTIONS

Wash Swiss chard; separate stalks and leaves; cut into small pieces. Heat oils in a 2-quart sauce pan over medium heat, 1 to 2 minutes. Add stalks, garlic, and onion. Cook for 5 minutes or until tender, stirring occasionally. Add leaves; cook additional 2 minutes or until leaves are wilted. Add tomatoes, yogurt, and pepper; stir well and serve warm over your favorite pasta. Makes 4 servings.

Black-Eyed Pea & Garbanzo Salad

Beans are a great way to get a fulfilling, protein rich meal. This recipe will make a great meal by itself or as a side dish to a baked chicken or fish. It is a good idea to make this dish ahead of time so it can chill before serving.

INGREDIENTS

1 ¼ cups canned black-eyed peas
1 ¼ cups canned garbanzo beans
1 red or green bell pepper, seeded and chopped
2 shallots, peeled and finely chopped
2/3 cup olive oil
½ cup diced tomatoes
1 tsp fresh thyme (or ¼ tsp dried)

Black Eyed Pea & Garbanzo Salad (contd.)

1 tsp fresh rosemary (or ¼ tsp dried)
1 clove garlic, minced
½ tsp salt
¼ tsp cayenne pepper (optional)

DIRECTIONS

In a medium bowl, stir together black-eyed peas, garbanzo beans, bell pepper and shallots. For dressing, place remaining ingredients in a blender or food processor; cover and process until smooth. Pour mixture over bean salad, toss well to coat. Cover and chill 2 to 24 hours to blend flavors. Drain off marinade; serve at room temperature or chilled. Makes 4 servings.



Honey-Baked Apples

It wouldn't be fair to leave you without a little something sweet. What is better than a warm, baked dessert on a cold winter night? This recipe will give you that feeling without all the extra calories or as much work as baking a pie.

INGREDIENTS

6 large baking apples
¼ cup orange juice
A pinch of nutmeg
6 tsp. honey
1 tsp sugar

DIRECTIONS

Core apples, being careful not to cut all the way though. Peel about 1/3 of the way down from the stem end. Combine honey and orange juice; pour into center of apples. Set in baking dish. Pour a little hot water in bottom of pan. Bake at 400 degrees for 50 to 60 minutes or until apples are tender. Sprinkle tops with a little sugar and nutmeg. Run under broiler to glaze. Makes 6 servings.



Stopping Domestic Violence

Putting a safety plan in place **By Victoria Dalton, Esq.**

Today Your Legal Corner will provide information on “*Five Steps to Guard Against Domestic Violence.*” No longer is domestic violence a family matter that individuals must work out privately. Recent incidents have demonstrated that domestic violence does not discriminate. Rather, victims come from diverse social economic backgrounds, where race, religion, gender, sexual orientation, education and even a victim's age cannot predict the likelihood of a domestic violence incident.

While domestic violence can take many forms including emotional, financial and physical, there are common denominators that are true regardless of age or the type of incident. While there are numerous ways to protect domestic violence victims, here are five steps that are paramount.

1) LEAVE AND CALL 911 WHEN IN IMMEDIATE DANGER

All domestic violence victims have a tendency to question their fear. Did they create the situation? Are they exaggerating the fear they feel? If they ignore it, will the abuse go away? What if staying is better than leaving? Don't question or minimize your feelings – if you are afraid, leave and call the police!

2) CREATE A SAFETY CODE

Have a code word or sign that signals to family, friends and neighbors that there is trouble. This code or signal will alert family, friends and neighbors to contact the police because you are not in a position to do so. If there are others residing in the home, plan for them to go to a neighbor during a dangerous situation and contact the police on your behalf.

3) CREATE DUPLICATES

Have an extra set of keys to your car and home. Pack a suitcase with extra clothes and other special or needed items. Make sure to request duplicates of important documents like birth certificates, accounts, deed, insurance papers, medical records and prescriptions.

4) DOMESTIC VIOLENCE AGENCY

Contact your local domestic violence service agency. The domestic violence service agency acts as an umbrella agency, which will connect you to available services in your area. Information as to housing, funding, education, legal advice, adult and child counseling, as well as establishing a domestic violence safety plan may be available to name a few. For help and resources

you can call the NJ Domestic Violence Hotline 800-572-SAFE (7233) or visit the NJ Coalition for Battered Women's website- <http://www.njcbw.org/>.

5) HIRE A DOMESTIC VIOLENCE ATTORNEY

Although domestic violence agencies may provide advocates to go with a victim to court, they are not permitted to speak on a victim's behalf, only accompany them. Victims often are not able to speak for themselves because of fear and isolation. Additionally, victims often are not familiar with all the relief that the domestic violence law provides them. Once a Restraining Order is granted, other issues addressed on a temporary basis are whether or not attorney fees are to be paid by the perpetrator, child support if applicable, spousal support, payment of household bills, visitation if appropriate, and removal of firearms among other items.

Ironically, the most dangerous time for a domestic violence victim is after he or she has been granted a restraining order. Take the restraining order seriously. Do not secretly meet with the perpetrator or allow him or her near the premises. Stay away from places the both of you used to frequent and carry the restraining order with you at all times. Speak with the perpetrator through your attorney only and keep your focus on safety! Remember, if you or someone you love is in a dangerous situation, seek help, create a domestic violence safety plan and follow the steps to stay alive!

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The content of Your Legal Corner is not and will not replace legal advice. Your Legal Corner was created to provide educational information regarding the law.

“Grow Old Along with Me”

Don't kid yourself, domestic violence can grow old. We don't necessarily mellow as we age. If the abuse is decades old it is still domestic violence. The power dynamic may also shift. If the abusive partner passes away - often an offspring or younger family member may pick up the habit. While the alternatives may be difficult to consider it is important to let someone know what is happening. Make a call and you may find not only a comforting voice but perhaps some new options as well.

– Grace Egan, Executive Director, NJFA



Music's Healing Power

Music therapy relieves grief and stress **By Helen Hunter, ACSW, LSW**

For many who are struggling with grief or stress issues, music has proven to be an effective therapy tool to help in the healing process. Research findings show that playing favorite songs, for example, can help individuals calm down and enhance their feeling of wellness. In addition, they are less agitated during and after music is played. Irritability, depression and anxiety are decreased, since stress hormones are reduced, creating calmness. Mood is improved with the production of endorphins when music is played, which creates smiling and joy.

Music affects the body, mind and soul in powerful ways, including the following:

- **Brain waves** – music with a strong beat can stimulate brain waves to resonate in sync with the beat, with faster beats bringing sharper concentration and more alert thinking, promoting a calm, meditative state. Music can bring lasting benefits to your state of mind, even after you've stopped listening!
- **Breathing and heart rate** – listening to music can result in slower breathing, slower heart rate and an activation of the relaxation response. Music can counteract or prevent the damaging effects of chronic stress, greatly promoting not only relaxation, but overall physical and mental health.
- **State of mind** – Music has been found to lower blood pressure, which can reduce the risk of stroke and other health problems over time. Music can also boost immunity, ease muscle tension and create a positive mental outlook on life, which often helps keep depression and anxiety from becoming major health concerns.

What is it about music that has such a positive influence? Think about when you hear music played – how does it make you feel? If you start tapping your foot, clapping your hands and singing along to a tune, you're among the majority! Music is a universal language that adds joy and excitement to life! Music provides relief from physical and psychological pain, helps to aid in focusing and relaxation, gives opportunities to socialize with others and allows individuals to become more mobile. There is something about music and the sound created by music that runs deep, on a soul level, which creates inner peace. Tension disappears, replaced by positive energy. Tears are often replaced by laughter, which is the best medicine for the body, mind and soul!

Music is enjoyable, fun and uplifts everyone. Even somber, sad music can be therapeutic to help those who are grieving or under much stress, in that there is a calmness and an opportunity to express emotion, which is crucial in the healing process. In addition, music can open a door for individuals to share painful experiences and can help heal old wounds.

Music therapists use the following interventions to assist those who are dealing with grief and stress:

- **Singing and playing songs** – think about your favorite songs, from important stages in your life and the memories they entail. Joining a drum circle, for example, can benefit someone who is grieving or under much stress by increasing relaxation, reducing loneliness, providing an emotional release and enhancing a spiritual connection.
- **Creative expression** – writing your own song, perhaps? Or singing and/or playing along with existing music.
- **Instrument exploration** – pick up an instrument and play along! Any instrument will do!
- **Movement** – dancing or swaying to the music – clapping hands and really getting into the feel of the music, deep down in your soul!
- **Music listening** – just listen to the song, especially the words, and apply the meaning to what is going on in your life.

The most commonly recommended music for an individual is songs from childhood, patriotic songs, hymns, folk songs, popular songs and show tunes. Many of these songs are very familiar (it's amazing how we can remember ALL of the words to certain songs, but may have trouble remembering other, more recent things) and are very helpful in the healing process following a loss or when someone is over-stressed.

Remember there is great healing power in using music as a therapeutic tool to help those who are struggling with grief issues and who are overstressed. Incorporating music into our daily lives will ensure that we can receive positive physical, emotional and spiritual energy, which will give us the best quality of life possible. So, sing loud and proud, whether it be in the shower, in the car, at work or at home, and pick up an instrument and play to your heart's content! You'll feel all the better by doing so!!



Elder Financial Abuse

A Violation of Trust **By Sylvia Presto**

Many victims of financial exploitation are forced to resort to and rely on social entitlement programs to meet their housing and medical needs because the fraud perpetrator gained access to the victim's life savings. The actual increased costs associated with elder abuse are not known, but they occur when an elderly person endures financial abuse resulting in a loss of their assets, forcing them to enroll in public programs like Medicaid.

Research has shown that durable power of attorney abuse may be the single most abused legal document in the judicial system. Abuse of these powerful legal documents enables an individual with control over an elderly person's assets to mismanage them for personal benefit.

Such misuse can be devastating when used to defraud a trusting and unsuspecting victim out of their home and/or life savings. Some victims find they no longer own their house and their money is gone, making it difficult to bounce back and continue to live where they have been accustomed to living or to maintain their normal lifestyle. Not only have their assets been stolen from them, they have been taken by someone they trusted.

Most perpetrators are related to the victim; the majority of which are women. The legal document designed to protect the elderly and their assets, if in the wrong hands, can be used as a tool to do exactly what it was designed to protect against.

THE DURABLE POWER OF ATTORNEY

The durable power of attorney is widely used as an estate planning tool in the United States. In the wrong hands, however, it can be used to steal. The very document that is designed to protect one's estate can be used to siphon from the estate. Answers to the question of how the durable power of attorney can be used for purposes other than for that which it was intended lie within the document. No judicial proceedings are required. Most often, an attorney draws up the document, although a generic form is also available online or at office supply stores.

In New Jersey, the durable power of attorney is not required to be registered, tracked or monitored. The principal (the person who is giving away the power) must have capacity when the document is executed. The document is effective on the date it is signed. It remains in effect when the principal becomes incapacitated. It becomes invalid when the principal dies, and can only be revoked by the principal or by the court. The durable power of attorney creates a fiduciary relationship between the agent and the

principal. The agent/fiduciary (the person who is getting the power) stands in the principal's shoes and has the authority to act in the principal's behalf in any and all matters as set forth in the durable power of attorney. The agent has the fiduciary responsibility to act always in the best interests of the principal. Assuming the agent is given full authority to handle any and all financial matters and transactions for the principal, as soon as the document is signed, the agent has the power to liquidate all of the principal's assets, hard or soft, and abscond with the money. Additionally, in many cases, the agent is able to legally siphon money out of the principal's accounts.

The gift provision in the durable power of attorney allows the agent to make gifts on behalf of the principal. The gifts should be ones that the principal made when he/she had capacity to do so. For some principals, it is important to be able to continue to "gift" money to family members in accordance with certain IRS rules. Unfortunately, there are many cases where the agent used the gift provision to systematically siphon money from the principal's bank account by writing checks to him or herself for their personal benefit rather than for the benefit of the principal. An act such as this violates the agent's fiduciary responsibility.

Annually, durable power of attorney abuse is estimated to cost taxpayers billions of dollars. It is associated with increased costs to the social entitlement expenditures at every government level. Victims of elder financial abuse often must rely on public programs for health insurance (Medicaid) and housing.

The durable power of attorney is widely used to avoid having to go to court, if the principal were to become incapacitated in the future, and having the court appoint a guardian to act on the principal's behalf. According to findings from a survey done by the AARP in 2000, 45% of Americans 50 years old and older have a durable power of attorney, and the percentage rose to 70% among 70-year-olds. Durable power of attorney gives the agent free reign and easy access to the principal's property and life savings. Additionally, the agent has complete authority to make all legal and financial decisions on behalf of the principal without the principal being physically present (such as the agent withdrawing money from the principal's bank accounts, changing the deed to the principal's house into the agent's name, or granting gifts to others including the agent). Consequently, durable power of attorney is the weapon of choice to commit fraud against the elderly. It has been reported that durable power of attorney abuse

has been used to financially exploit the elderly. It has been referred to as a “license to steal.”

The following are actual elder financial abuse cases that occurred in Bergen County, New Jersey. The names are fictitious.

- Mr. Vince was an independently wealthy widower in his 80s. Two women, 50 years his junior, took Mr. Vince to a restaurant in New York City many times for dinner. They told Mr. Vince the restaurant was for sale and they wanted to buy into the restaurant, but did not have the money. Mr. Vince eventually wrote three checks totaling \$250,000 for their share of the business. They were in the process of attempting to convince him to execute a durable power of attorney making them his fiduciary when law enforcement was notified.
- Mr. Rizvi, while he had capacity, executed a durable power of attorney in which he made his son (the only child), his agent. His son took all of Mr. Rizvi’s assets and placed a mortgage on Mr. Rizvi’s house. By the time it was discovered, Mr. Rizvi lost the capacity to make decisions and needed to be placed in a care facility, for which Mr. Rizvi no longer had money to pay. The son was able to fleece Mr. Rizvi out of hundreds of thousands of dollars. Mr. Rizvi was not able to pay for a private care facility because the value of his house did not exceed the amount that was encumbered. The house went into foreclosure and Mr. Rizvi died in medical facility.

In these cases, essentially the fiduciary used the durable power of attorney to steal from the principal.

RECOMMENDATIONS

The durable power of attorney is a legal document that if in the wrong hands can be misused to financially exploit the person it was designed to protect. Usually, this instrument contains a gift provision that allows the agent to make “gifts” on behalf of the principal.

Research indicates the gift provision has been used to siphon funds from the unsuspecting, trusting principal.

When deciding whether or not a durable power of attorney is a good idea for you, consider seeking the advice of a certified elder law attorney who has expertise in this very specific area of law. He/she can design a durable power of attorney to meet your specific needs to include “fine tuning” the gift provision by limiting the scope of it; or eliminating it in its entirety.

Finally, if you suspect that you are being financially exploited, do not hesitate to contact your local police department, and/or the Adult Protective Services agency in your county. See page 25 for the APS phone number in your county.

Sergeant Sylvia Presto is a Certified Fraud Examiner and Accreditation Manager for the Bergen County Prosecutor’s Office.

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About Reverse Mortgages

Are they right for you? **By Kim Cole, Navicore Solutions**

Many of us have seen the commercials in which former actors tell us about how great a reverse mortgage is. We hear that we do not have to pay them back, and that the federal government is involved, which makes them a great option, right? Well, that all depends. Let's first look at the definition of a reverse mortgage. A reverse mortgage is a loan product for homeowners, age sixty-two and older. It allows the homeowner to borrow on the equity in their home and receive that equity through monthly payments; a lump sum, a credit line or any combination. The proceeds of the reverse mortgage can be used for things like home repair, living expenses and travel. The difference between this type of loan and a home equity loan is that the homeowner is not required to repay the loan until the loan holder moves out of the property, sells the property or passes away.

There are also several different types of reverse

mortgages. A single purpose reverse mortgage, offered by some state and local government agencies and non-profit organizations, is often inexpensive but can only be used for a specific purpose. The most common reverse mortgage is the Home Equity Conversion Mortgage (HECM). This is a federally regulated loan and is backed by the U.S. Department of Housing and Urban Development (HUD). There is also a proprietary reverse mortgage, also known as a private reverse mortgage, is backed by the companies that provide them. All follow the same general outline.

One of the best features of the HECM is its requirement to meet with a counselor from an independent government-approved housing counseling agency. Some proprietary reverse mortgages may also require this counseling. The HECM counseling session is a wonderful opportunity for the homeowner to learn the mechanics of the HECM product and be educated so as to allow them to make the right decision for their situation. Reverse mortgages can be quite costly with many fees and there may be financial implications. There are a number of technicalities, such as lending limits. The counselor explains all of this during the session.

A reverse mortgage is not for everyone. The homeowner remains responsible for the property taxes, homeowners insurance and upkeep of the property while they have the loan. While they may plan to continue paying for these things from the proceeds of the reverse mortgage, they must make sure that the proceeds of the loan do not run out. Husbands and wives need to be especially careful that both are listed on the mortgage. If not, when the spouse on the loan passes away, it will become the responsibility of the living spouse (not on the loan) to either repay the entire reverse mortgage or move from the property and sell.

The reverse mortgage has helped many, but the cost and rules associated with this lending product should not be overlooked. It can seem to be a confusing loan product and thus should not be entered into lightly. If you are considering a reverse mortgage, please reach out to one of our certified HECM counselors here at Navicore Solutions at 1-800-472-4557. We would be happy to discuss the loan with you and provide you with the required HECM counseling and education so that you can determine the best course of action to take.

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“What you think of me...

...is none of my business” **By Scott Guerin, PhD**

I heard this intriguing quote not too long ago when a celebrity was being interviewed on a talk show. The young musician was the target of malicious articles in the tabloids and venomous posts in social media for something she had allegedly done to someone. The host asked her how it affected her and what she did to cope. The celebrity replied that although the attackers meant to hurt her, in the end she became much stronger because it forced her to assess how much importance she placed on other people’s opinions.

If you think about it, out of all the people we know there are only a few whose opinions of us really matter. Your employer for one matters, a respected loved one, maybe the bank where we are applying for a loan, and of course if you’re running for a position in an organization or public office. I would say that the opinions about you of the vast majority of people you know really don’t matter. Except that for most of us they do...why is that?

One obvious answer to this is security. If we feel secure about who we are or what we are doing then other’s opinions of us really won’t bother us. However, if we have doubts about ourselves, low self-esteem, or if we have a strong need to feel validated as a person we will look to others to make us feel better. That’s not to say we all should isolate ourselves like an emotional island. But we have to learn to distinguish between an unhealthy

dependence on other’s approval with fulfilling basic human needs of belonging and connection to others for love, acceptance, and sense of well-being. We also need others to help us define who we are. Let’s face it, if everyone was exactly like us in every way, life would be pretty boring. The problems arise when others make us feel bad about who we are or judge us for being different from them.

Another thing to remember is that people who lash out at others do this mainly because they are unhappy with themselves. Somehow lashing out or criticizing others help them feel better about their miserable lives. The big point here is this means no matter what you do, you can never appease them because their issue really is with themselves, not with you. You can bend over backwards to please them, but this will not change anything. They have to come to a point of self-acceptance and learn to be at peace with who they are before anything will change, and you cannot do that for them.

So, by realizing that believing and accepting yourself you can learn to not be bothered by other’s criticisms. And, understanding that a person who is upset with you is really upset with themselves (which you can do nothing about) you can finally “shake it off” and feel free enough to confidently say to your critics... “What you think of me is none of my business!”

When I Want Your Opinion...

Don't let the noise of others' opinions drown out your own inner voice. And most important, have the courage to follow your heart and intuition.

Steve Jobs

I don't see myself as beautiful, because I can see a lot of flaws. People have really odd opinions. They tell me I'm skinny, as if that's supposed to make me happy.

Angelina Jolie

Most fears of rejection rest on the desire for approval from other people. Don't base your self-esteem on their opinions.

Harvey MacKay

As an artist, you have to maintain focus and eliminate the distraction of second-guessing yourself based on the opinions of others.

Dwight Yoakam

I love my country very dearly, and I greatly resent the implication that some of the places that I have sung and some of the people that I have known, and some of my opinions, whether they are religious or philosophical, make me less of an American.

Pete Seeger

Why should we worry about what others think of us, do we have more confidence in their opinions than we do our own?"

Brigham Young

No one can make you feel inferior without your consent.

Eleanor Roosevelt

It ain't what they call you, it's what you answer to.

W. C. Fields

A man cannot be comfortable without his own approval.

Mark Twain



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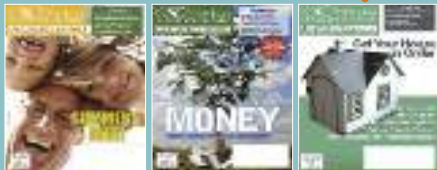


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Cognitive Challenges

Alzheimer's, Front and Center By **Eileen Doremus**, Director, Mercer County Office on Aging

Gerontologists from around the world estimate that more than thirty-five million people are affected by Alzheimer's disease (AD). Without a cure, this number could more than double by 2030. Now there is growing evidence that it is finally being taken seriously. "Taken seriously" means looking at a disease process long before it manifests itself via memory loss, the erosion of one's personhood, or the difficulties associated with changing behaviors. Researchers are looking for early indicators on a cellular or molecular level to ascertain where, when and why deteriorating brain cells lead to dementia/AD. This will also be far more "cost effective" to explore than to mass produce a medication that takes years to develop and costs millions, only to find that its efficacy rate in slowing the progression of the disease lasts a mere 12-18 months. Persons living with dementia and their caregivers deserve more.

The *Journal of Alzheimer's Disease* in 2014 invited international experts to review measures to stop, delay or reduce the onset of AD. The reviews included the latest in direction of tools used to identify early indicators that signal cognitive decline. Primary and secondary prevention specifically focused on the development of what we know as risk factors that promote dementia, i.e. cardio/cerebrovascular disorders, brain injury, lifestyle effects and nutrition. Lastly, pre-clinical treatment searches for new interventions on the cellular and molecular levels that, up to now, have only been observed in animal models. (*Journal of Alzheimer's Disease*, 42, 2014)

Of equal importance and significant in the realm of research is the renewed interest in the role that "tau" – a brain protein – plays in AD and other forms of dementia. Tau is a filter of sorts, clearing cells of unwanted and toxic proteins. If tau does not do its job, cells do not rid themselves of "the garbage" also known as beta amyloid; thereby causing the hallmark of AD, the plaques and tangles of dying brain cells that begins the decline into dementia.

Researchers at Northwestern University are working to identify via non-invasive magnetic resonance imagery (MRI) when this tau/amyloid interaction begins so as to interfere with the process, slow it or eradicate it.

ADVANCES IN RESEARCH FOR THE "OTHER DEMENTIAS"

Traumatic brain Injury (TBI) receives unprecedented attention now as the American Academy of Neurology reports "veterans with a history of TBI developed dementia about two years earlier than those without TBI who had developed dementia. (June 25, 2014 online issue of *Neurology*) Researchers are following both older veterans as

well as returning soldiers who have been brain injured to determine how TBI affects the onset of dementia.

The Lewy Body Dementia Association (LBDA) highlighted in July of 2014 that Lewy Body Dementia (LBD) is the most misdiagnosed form of dementia. Characteristic of LBD are abnormal deposits in the brain called Lewy bodies that affect thinking, movement, behavior and mood. Symptoms are hard to detect as they can closely mimic those of AD or another dementia. There are often hallucinations and the behaviors are exaggerated. More about LBD can be found at www.lbda.org.

HIV AND DEMENTIA

Still very mystifying to researchers, they do admit that nerve cell damage occurs from toxins crossing the blood-brain barrier affecting areas of the brain. Microglial cells, release toxic materials causing brain deterioration. In the scientific world it is generally agreed upon that that these cells will cause cognitive and behavioral changes but outstanding concerns include the impact that HIV has on the development of a dementia and where we can intervene to interrupt this process. (*Ruhr-Universitat-Bochum*, September, 2014)

DOWN SYNDROME AND DEMENTIA

Why is it that by the age of forty, 100% of all individuals with Down syndrome develop changes in the brain resembling Alzheimer's Disease? Scientists are painstakingly determined to see why the extra copy of chromosome 21 has to do with the onset of dementia. Studies show that there is the presence of a beta amyloid deposit that causes the changes associated with dementia in the brains of those with Down syndrome. The protein that regulates the process of beta amyloid has been identified as sorting nexin 27 (SNX27). How this protein causes the changes is the focus of laboratory experiments with the hopes that knowing more will assist in eventual interruption of the process.

WHY ANY OF THIS MATTERS

If we are to find the answers so desperately needed, we need to acknowledge and support the ongoing research. Contact the Alzheimer's Association (www.alz.org), the Alzheimer's Foundation (www.alzfdn.org) or USAgainstAlzheimer's (www.usagainstalzhimers.org). Read more about Alzheimer's prevention by visiting the National Institute on Aging/National Institutes of Health (www.nia.nih.gov/alzheimers.org). Learn more about the clinical trials for Alzheimer's and dementia by visiting <https://clinicaltrials.gov>.



Volunteer Tax Help

VITA can make a vital difference

Yes, it's time to think about filing your tax returns. It's a job that is never a joy, but could be less of a hassle, if you try using a terrific free service – the Volunteer Income Tax Assistance program (VITA).

For over thirty years, the VITA force of 2,000+ volunteers has helped more than 2 million households file basic tax forms. This program offers free tax help to people who cannot afford professional assistance (generally those with incomes under 49,000). Volunteers help prepare basic tax returns in community and neighborhood centers, libraries, schools, and other community locations.

A recent focus of the program is to encourage taxpayers to file their returns, federal and state, electronically. Each year the number of taxpayers that take advantage of this method continues to grow.

According to the IRS website the following are the items you should bring to have your tax return prepared:

- Proof of identification
- Social Security Cards for you, your spouse and dependents and/or a Social Security Number verification letter issued by the Social Security Administration
- Birth dates for you, your spouse and dependents on the tax return
- Current year's tax package if you received one
- Wage and earning statement(s) Form W-2, W-2G, 1099-R, from all employers
- Interest and dividend statements from banks (Forms 1099)
- A copy of last year's Federal and State returns (if available)
- Bank Routing Numbers and Account Numbers for Direct Deposit
- Mortgage interest statements (Form 1098)
- Real estate tax card (NJ)
- Charitable contributions
- Social Security Benefit information

To file taxes electronically on a married filing joint tax return, both spouses must be present to sign the required forms.

To locate the nearest VITA site, contact your local Office on Aging. You can find the phone number for all of New Jersey's county offices on aging (including yours) on page 25.

Verizon New Jersey

COMMUNICATIONS Lifeline

**KEEPING THE
LINES OF
COMMUNICATION
OPEN FOR YOU
& YOUR FAMILY**



What are the Benefits of COMMUNICATIONS Lifeline

Under the **Communications Lifeline program**, Verizon NJ residential telephone customers may be eligible to receive free or discounted local telephone service. **Communications Lifeline program participants can receive:**

- Discounted flat rate residential phone service including touch-tone service
- Additional optional features such as caller ID or three-way calling

How do you apply?

All you need to do is call NJ SHARES at
1-888-337-3339 or log onto **www.njshares.org**

COMMUNICATIONS Lifeline





Health Care for Aging Adults

NJ's Federally Qualified Health Centers **By Linda Whitfield-Spinner**

Twentieth century advances in medicine have enabled people today to live longer, healthier and more productive lives. However, “more than a quarter of all Americans and two out of every three older Americans have multiple chronic conditions, and treatment for this population accounts for 66% of the country’s health care budget.”¹

According to *The State of Aging in America 2013* report, mobility should be considered fundamental to everyday life and central to an understanding of health and well-being among older Americans. “Impaired mobility is associated with a variety of adverse health outcomes.”²

Many private health care providers have moved out of urban settings to the suburbs, making it difficult for seniors and their caregivers with limited transportation options to continue their care with these practices. Federally Qualified Health Centers (FQHCs) are readily available resources for seniors and caregivers. These comprehensive health care centers are often underutilized by seniors who may not think to go to a FQHC. FQHCs are community-based, nonprofit or public organizations that provide services to people who lack access to health care, including those without insurance, residents of rural and underserved areas. FQHCs provide comprehensive primary health care services as well as supportive services (education, translation and transportation, etc.) that promote access to health care. These comprehensive services vary from health center to health center and may include General Primary Medical Care, Prenatal and Perinatal Care, Preventive Dental Care, Mental Health and Substance Abuse Treatment/Counseling, Vision, and Pharmacy. FQHCs provide these services to people of all ages, whether or not they have health insurance. For those who do not have insurance, services are provided on a sliding fee scale, based on their ability to pay.

FQHCs also focus on prevention and disease management which can help avoid emergency department visits and hospitalizations for chronic conditions like diabetes and asthma.

Oral health is a vital part of overall health throughout the life cycle. According to Juris Svarcbergs, D.M.D., M.P.H., Dental Director, at CAMcare Health Corporation, “Most people know that regular medical and dental check-ups are important. Yet many seniors cannot afford routine dental care because of fixed incomes or limited access to care.” Poor oral health impacts overall health and increases the risk for chronic illnesses like diabetes and heart disease. Other challenges may include problems

chewing, pain, limiting food choices and low self-esteem due to an unattractive physical appearance.

According to the Center for Disease Control and Prevention, one quarter of adults over the age of 65 have lost all of their teeth. Major barriers for the elderly obtaining proper dental services include lack of access to dental care and high costs.³

Dental care is part of the comprehensive services available at many of the FQHCs in New Jersey. For example, CAMcare Health Corporation (CAMcare), a FQHC that serves communities in Camden and Gloucester Counties, in New Jersey, began providing Senior Dental Services targeted to outlying townships in Camden County in May of 1995. One program sponsored by the Camden County Board of Chosen Freeholders (Dept. HHS, Division of Senior Services-ADRRC) in partnership with CAMcare Health Corporation, provides dental services for Camden County residents.

“As a trusted provider of comprehensive medical and dental care, Zufall Health Center has successfully implemented access to oral health care to seniors living in public housing,” says Rina Ramirez, MD FACP, Chief Medical Officer at Zufall Health Center. Through the use of their mobile van, dentists at Zufall regularly visit seniors where they live to provide much needed dental services.

In addition, Zufall provides patient navigation services and programs to Morris County’s most vulnerable older adults for over 7 years. The health center’s patient navigators are trained, culturally sensitive health care workers who serve as liaisons between the patients/families and the treating physicians and other health care systems. Navigation spans a range of needs including enrollment and eligibility assistance, translation and interpretation services during a visit to a health care provider or social service agency, assistance with compliance with medical advice such as getting needed tests, obtaining appointments for subspecialty referrals, scheduling follow up appointments and completing medical forms, and transportation to and from appointments.

Zufall’s Intergenerational Program, or ZIP for short, joins together preschoolers and seniors to actively engage with health topics. The program runs for five weeks, covering topics such as healthy eating, going to the doctor, what to expect on a dental visit, and safety. Throughout the course of the program, seniors (also known as Grandfriends) help their very own preschooler to master health topics while reinforcing their own knowledge as well. It is the active, engaging, and hands-on format of the

series which makes the program so valuable for seniors and the kids alike.

Programs such as improving access to dental services to seniors, patient navigation services and ZIP are an integral part of Zufall Health Center, and provide individualized attention and support to patients in this older age group.

There are 20 FQHCs in New Jersey with satellite sites in every county, totaling 120 sites. All New Jersey FQHCs, are working to meet the health care needs of everyone in the communities they serve. To learn more about New Jersey FQHCs and to find a health center near you, please

visit the New Jersey Primary Care Association website at www.njpca.org

Linda Whitfield-Spinner, DMH, LCSW, PCMH CCE is the Quality Program Director of New Jersey Primary Care Association, Inc.

¹http://www.cdc.gov/features/agingandhealth/state_of_aging_and_health_in_america_2013.pdf (ii)

²Ibid, page iii

³Center for Disease Control and Prevention: <http://www.cdc.gov/chronicdisease/resources/publications/aag/doh.htm>

Federally Qualified Health Center (FQHC)		
FQHC	Address	Phone Number
AtlantiCare Health Services	2009 Bacharach Blvd. Atlantic City, NJ 08401	609-344-5714 www.atlanticare.org
CAMcare Health Corporation	817 Federal St. Suite 300 Camden, NJ 08103	856-541-3270 www.camcare.net
CompleteCare Health Network	53 South Laurel St, 2 nd Floor Bridgeton, NJ 08302	856-451-4700 www.completecarenj.org
Eric B. Chandler Health Center	277 George St. New Brunswick, NJ 08901	732-235-6700 Rwjms.umdj.edu/patient_care/chandler
Henry J. Austin Health Center	321 North Warren St. Trenton, NJ 08618	609-278-5900 www.henryjaustin.org
Horizon Health Center	714 Bergen Ave Jersey City, NJ 07306	201-451-6300 www.horizonhealth.org
Jewish Renaissance Medical Center	275 Hobart St Perth Amboy, NJ 08861	732-376-9333 www.jrmc.us
Lakewood Resource and Referral Center	1771 Madison Ave Lakewood, NJ 08701	732-364-2144 www.chemedhealth.org
Metropolitan Family Health Network	935 Garfield Ave Jersey City, NJ 07304	201-478-5827 http://metrofhcn.com
Monmouth Family Health Center	270 Broadway Long Branch, NJ 07740	732-923-7100 www.mfhcnj.org
Neighborhood Health Services Corporation	1700-58 Myrtle Ave Plainfield, NJ 07063-1038	908-753-6401 www.phcmednet.org
Newark Community Health Centers, Inc.	741 Broadway Newark, NJ 07104	973-483-1300 www.nchcfghc.org
Newark Department of Child and Family Well Being	110 William Street, Room 202 Newark, NJ 07102	973-733-5300 http://www.ci.newark.nj.us/government/city_departments/health_human_services/
North Hudson Community Action Corporation Health Center	800 31 st St Union City, NJ 07087	201-210-0100 www.nhcac.org
Ocean Health Initiatives, Inc.	101 Second St Lakewood, NJ 08701	732-363-6655 www.ohinj.org
Paterson Community Health Center	32 Clinton St Paterson, NJ 07522	973-790-6594
Project H.O.P.E. Health Care for the Homeless	622 Cooper St Camden, NJ 08102	856-968-2320 www.projecthopecamden.org
Southern Jersey Family Medical Center, Inc.	1 White Horse Center Hammonton, NJ 08037	609-567-0200 www.sjfmcc.org
VNA of Central Jersey Community Health Center, Inc.	1301 Main St Asbury Park, NJ 07712	800-862-3330 www.vnacj.org
Zufall Health Center	17 South Warren St Dover, NJ 07801	973-328-3344 www.zufallhealth.org

SNAP

The Supplemental Nutrition Assistance Program

See If You're Eligible for SNAP in Your County

ATLANTIC COUNTY
Department of Family
and
Community Development
Atlantic City Office
(609) 348-3001

BERGEN COUNTY
Bergen County Board
of Social Services
(201) 368-4200

BURLINGTON COUNTY
Burlington County Board
of Social Services
(609) 261-1000

CAMDEN COUNTY
Camden County Board
of Social Service
(856) 225-8800

CAPE MAY COUNTY
Cape May County Board
of Social Services
(609) 886-6200

CUMBERLAND COUNTY
Cumberland County Board
of Social Services
(856) 691-4600

ESSEX COUNTY
Essex County Dept
of Citizen Services
Division of Welfare
(973) 733-3000

GLOUCESTER COUNTY
Gloucester County Board
of Social Services
(856) 582-9200

HUDSON COUNTY
Hudson County Dept
of Family Services
Division of Welfare
(201) 420-3000

HUNTERDON COUNTY
Hunterdon County
Division
of Social Services
Division of Welfare
(908) 788-1300

MERCER COUNTY
Mercer County Board
of Social Services
(609) 989-4320

MIDDLESEX COUNTY
Middlesex County Board
of Social Services
(732) 745-3500

MONMOUTH COUNTY
Monmouth County
Division
of Social Services
(732) 431-6000

MORRIS COUNTY
Morris County Office
of Temporary Assistance
(973) 326-7800

OCEAN COUNTY
Ocean County Board
of Social Services
(732) 349-1500

PASSAIC COUNTY
Passaic County Board
of Social Services
(973) 881-0100

SALEM COUNTY
Salem County Board
of Social Services
(856) 299-7200

SOMERSET COUNTY
Somerset County
Board
of Social Services
(908) 526-8800

SUSSEX COUNTY
Sussex County
Division
of Social Services
(973) 383-3600

UNION COUNTY
Union County
Division
of Social Services -
Elizabeth
(908) 965-2700

WARREN COUNTY
Warren County
Division of
Temporary
Assistance
and Social Services
(908) 475-6301

SHIP

State Health Insurance Assistance Program – 800-792-8820

LOCAL OFFICES:

ATLANTIC COUNTY
Division of Intergenerational Services
888-426-9243

BERGEN COUNTY
Bergen County Division
of Senior Services
201-336-7413

BURLINGTON COUNTY
RSVP
Burlington County
Community College
609-894-9311 ext. 1494

CAMDEN COUNTY
Camden County Division
of Senior and Disabled
Services
856-858-3220

CAPE MAY COUNTY
Cape May County
Department on Aging &
Disability Services
609-886-8138

CUMBERLAND COUNTY
Cumberland County Office
on Aging & Disabled
856-459-3090

ESSEX COUNTY
Newark Day Center
973-643-5710

GLOUCESTER COUNTY
Senior Corps, Gloucester
County College
856-468-1742

HUDSON COUNTY
Hudson County Office on
Disability Services
201-369-5280, Press 1,
then Ext. 4258

HUNTERDON COUNTY
Hunterdon County Division
of Senior, Disabilities
& Veterans' Services
908-788-1361

MERCER COUNTY
Mercer County
Family Guidance Center
Corp
609-924-2098 Ext. 16

MIDDLESEX COUNTY
Middlesex County Office of
Aging & Disabled Services
732-745-3295

MONMOUTH COUNTY
Family & Children's
Services - RSVP
732-728-1331

MORRIS COUNTY
Skylands RSVP
Volunteer Resource
Center
NORWESCAP, Inc.
973-784-4900 Ext. 208
or SHIP Ext. 3501

OCEAN COUNTY
Office of Senior
Services
800-668-4899

PASSAIC COUNTY
Passaic County
Division of Senior
Services, Disability
and Veteran's Affairs
973-569-4060

SALEM COUNTY
Salem County Office
on Aging
856-339-8622

SOMERSET COUNTY
Somerset
County Aging &
Disability Services
908-704-6319

SUSSEX COUNTY
Sussex County
Division of Senior
Services
973-579-0555
Ext. 1223

UNION COUNTY
SAGE Eldercare
908-273-6999

WARREN COUNTY
Warren County
Dept. of Human
Services - Division
of Aging &
Disability Services -
Aging & Disabilities
Resource
Connection (ADRC)
908-475-6591

HELP IS HERE

New Jersey County Offices on Aging

For Senior Services and Information About Programs in Your County

Atlantic: 609-645-7700 x 4700
Bergen: 201-336-7400
Burlington: 609-265-5069
Camden: 856-858-3220
Cape May: 609-886-2784/2785
Cumberland: 856-453-2220/2221
Essex: 973-395-8375
Gloucester: 856-384-6900
Hudson: 201-271-4322
Hunterdon: 908-788-1361/1363
Mercer: 609-989-6661/6662
Middlesex: 732-745-3295

Monmouth: 732-431-7450
Morris: 973-285-6848
Ocean: 732-929-2091
Passaic: 973-569-4060
Salem: 856-339-8622
Somerset: 908-704-6346
Sussex: 973-579-0555
Union: 908-527-4870/4872
Warren: 908-475-6591
State Hotline: 1-877-222-3737

You may also get all office web addresses at:
www.njfoundationforaging.org/resources.html

NJ Adult Protective Services Agencies

To Report Abuse or Neglect Call the Office in Your County

Atlantic: 1-888-426-9243
Bergen: 201-368-4300
After Hours: 1-800-624-0275
Burlington: 609-518-4793
Camden: 856-225-8178
Cape May: 609-886-6200
Cumberland: 856-453-2223
Essex: 973-624-2528 x135
1-866-903-6287 (90FOCUS)
Gloucester: 856-582-9200 or
856-256-2101
Hudson: 201-537-5631
Hunterdon: 908-788-1253
After Hours: 908-782-HELP
908-735-HELP
Mercer: 609-989-4346
609-989-4347
Middlesex: 732-745-3635
Monmouth: 732-531-9191
Morris: 973-326-7282
After Hours: 973-285-2900
Ocean: 732-349-1500
After Hours: 732-240-6100

Passaic: 973-881-2616
After Hours: 973-345-2676
Salem: 856-339-8622
Somerset: 908-526-8800
After Hours: 1-800-287-3607
Sussex: 973-383-3600
Union: 908-497-3902
Warren: 908-475-6591

**You can also call
211**

24 hours a day, 7 days a week

Statewide APS Program Administration
NJ Division of Aging & Community Services
P.O. Box 807
Trenton, NJ 08625-0807
1-800-792-8820

Website:

www.state.nj.us/humanservices/doas/services/aps

Web Sites and Other Resources

Who to Call, Where to Go and What to Look For

FINANCIAL LITERACY RESOURCES

Financial Literacy: Important for Everyone!
www.360financialliteracy.org

INFORMATION ON INVESTING WISELY

www.finra.org/investors • www.sec.gov/investor
www.choosestosave.org • www.wiserwomen.org

CONSUMER PROTECTION

Office of Consumer Protection, Division of Consumer Affairs,
 P.O. Box 45025, Newark, New Jersey 07101 800-242-5846, or
 973-504-6200 www.njconsumeraffairs.gov

FIGHT SENIOR FRAUD

Senior Fraud Education and Protection Program, Division of
 Consumer Affairs, State of NJ Toll-free hotline 1-877-746-7850

THE FEDERAL TRADE COMMISSION

Federal Trade Commission (FTC) www.consumer.gov
 Federal Trade Commission Consumer Response Center
 600 Pennsylvania Avenue, NW Washington, DC 20580

STOP TELEMARKETING CALLS

www.donotcall.gov or 1-888-382-1222

STOP JUNK E-MAILS

Forward unsolicited commercial email (spam), including
 phishing messages, directly to the FTC at: spam@uce.gov.
 These messages aid law enforcement agencies.

HOUSING COUNSELING

NJ Home and Mortgage Finance Agency – Help for home
 owners, renters and first time home buyers. Deal with afford-
 able housing, mortgage and foreclosure counseling, etc.
<http://www.state.nj.us/dca/hmfa/index.shtml>

LEARN ABOUT SCAMS

www.lookstoogoodtobetrue.com is a web site sponsored by
 United States Postal Inspection Service and the FBI can be used
 to read about scams and information on how to protect yourself.

PROPERTY TAX REIMBURSEMENT

1-800-882-6597
<http://www.state.nj.us/treasury/taxation/ptr/geninfo.shtml>

CREDIT REPORTS

<https://www.annualcreditreport.com/index.action>
 877-322-8228
 Annual Credit Report Request:
 PO Box 105281 Atlanta, GA 30348

RUTGERS COOPERATIVE EXTENSION

Find your County Office and learn about the Master Gardener
 Program and other agriculture news and information.
njaes.rutgers.edu/extension/

NJ ANTI-HUNGER COALITION

Find a local food bank/pantry. Learn about volunteer and
 advocacy opportunities. <http://njahc.org/>

SOCIAL SECURITY ADMINISTRATION

Learn about retirement, disability and survivor benefits, apply
 on line and find answers to Social Security questions.
<http://www.ssa.gov/>

MEDICARE

Learn about Part A, B, C and D. Research plans and get answers
 to benefit questions. Get enrollment information.
<http://www.medicare.gov/>

STATE HEALTH INSURANCE ASSISTANCE PROGRAM (SHIP)

Find your local office for assistance with applying for and
 understanding your different health insurance options.
<http://www.state.nj.us/humanservices/doas/services/ship/>

NJ HELPS

Visit this site to determine if you are eligible for benefit pro-
 grams such as SNAP (Food Stamps) or NJ Family Care
 (Medicaid). <http://www.njhelps.org/>

NJ ONE APP

Visit this site to apply for benefit programs such as SNAP (Food
 Stamps) or NJ Family Care (Medicaid).
<https://oneapp.dhs.state.nj.us/>

NJ SHARES

To find help with utilities such as energy, phone and water.
<http://www.njshares.org/>

NJ DEPARTMENT OF COMMUNITY AFFAIRS ENERGY ASSISTANCE

To get information about LIHEAP, Universal Service Fund and
 Weatherization program.
<http://www.state.nj.us/dca/divisions/dhcr/offices/eap.html>

NJ 211

A place to turn when you need to find state or local health and
 human service resources to address urgent needs or everyday
 concerns - Free; Confidential; Multi-lingual; TTY accessible;
 Available 24/7
<http://www.nj211.org/>

NAVICORE

A Garden State Consumer Credit Counseling organization, a
 non-profit, financial management, housing counseling, social
 service agency.
<http://www.novadebt.org/>

PHARMACEUTICAL ASSISTANCE TO THE AGED AND DISABLED (PAAD)

See if you are eligible for PAAD or Senior Gold, learn to apply:
<http://www.state.nj.us/humanservices/doas/home/paaddetail.html>

OUT AND ABOUT IN NEW JERSEY



Winter Farmers' Market

Fosterfields Living Historical Farm
73 Kahdena Rd, Morristown, NJ

February 8 and March 8, 10:00AM – 2:00PM

Enjoy a variety of local, farm-fresh, foods all year long! The Winter Farmers' Market offers an assortment of meats, cheeses, winter produce, artisan breads, prepared foods, honey, preserves, and baked goods. This fabulous Market is brought to you by a partnership of The Morris County Park Commission, the Foodshed Alliance Farmers' Access Network, Sustainable Morristown, and local farmers. Free.

Wellness Clinic

Memorial Hospital of Salem County
March 5, 2:00PM - 5:30PM

Wellness Clinic every Thursday 2pm to 5:30 pm on the 3rd floor of the Salem Memorial Hospital. Cancer Screening, Health Screenings (Blood Pressure, Cholesterol and sugar), Adult Immunizations. 856-935-7510

Kosher Café East

Beth El Synagogue
50 Maple Stream Road, East Windsor, NJ

February 11, 12:30PM

"Inflammation: Learning to Cool the Fire" Dr. Aly Cohen will discuss a variety of causes for inflammation in the human body. She will offer practical ways that we can offset risk for disease by the simple choices we make in our everyday lives. A kosher lunch will be served and registration is required by 2/5. RSVP to Beth Englezos at bethe@jfcsonline.org or 609-987-8100, ext. 126. The program is open to all and there is a suggested donation of \$5.00 per person.

Adelphi Chamber Ensemble "Music on Sunday Afternoon"

Mahwah Library, 100 Ridge Road Mahwah, NJ
February 22, 2:00PM - 3:30PM

Brahms: Quartet for Piano and Strings no 3 in C minor, Op. 60. Brahms: Sextet for Strings no 2 in G major, Op. 36. The Adelphi Chamber Orchestra is the oldest chamber orchestra in Bergen County and Northern New Jersey. The concert is free and no tickets are necessary. Seats are on a "first come" basis. (201) 529-7323 ext 227

Extreme Couponing

Western Atlantic Parent Family Support Network
661 Jackson Rd., Newtonville, NJ

February 27, 6:00PM - 7:00PM

Whether it is a grocery store or department store, this workshop will give you the information you need to save money on the things you need. A light dinner will be provided. RSVP by 2/20/15. For more information please contact Jennifer Ortiz at 609-561-1149.

New Jersey Flower Show

New Jersey Convention and Exposition Center
97 Sunfield Avenue, Edison, NJ

February 12, 1:00PM - 8:00PM

February 13 & 14, 10:00AM - 8:00PM

February 15, 10:00AM - 6:00PM

Colorful garden displays, special guests, seminars, and a Garden Marketplace await you at the annual New Jersey Flower & Garden Show. Celebrating its 13th year, the show admission is \$15.00 for adults, \$6.00 for children (12-17), and \$10.00 for Seniors 65+. Children 11 and under are admitted free. For more information, call 732-449-4004 or <http://www.macevents.com/>

New Jersey Foundation for Aging's mission is to support innovative services that allow older adults to live in their communities with independence and dignity.



The New Jersey Foundation for Aging (NJFA) was established in 1998 as a public charity to raise public awareness on aging issues and the need to increase funding for community programs that serve NJ's growing senior and caregiving residents. NJFA does this by:

- ▼ Promoting public policy for aging well in NJ.
- ▼ Helping people age well and promoting more age-friendly communities.
- ▼ Advocating strategies for sustainable change and access to services.
- ▼ Fostering conversations with stakeholders and advocates.

Visit www.njfoundationforaging.org for these resources and more:

- ▼ *Renaissance* magazine online – its just one of the educational and outreach tools NJFA uses.
- ▼ Every episode of the Aging Insights TV show
- ▼ Links To your County's Aging Services
- ▼ Donate Online At NJFA's website. It's easy and secure!

Or make a donation and provide us with your contact information below.

Grace Egan
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