

Meeting the Challenges

Summer 1997
Volume 6 Number 1

QUARTERLY

A SPECIAL PUBLICATION FOR SENIORS, PERSONS WITH DISABILITIES, THEIR FRIENDS AND FAMILY, AND THOSE WHO

Thanks to everyone who sent contributions to help us continue to publish the quarterly !!!!! Your generosity, including a contribution from **Wendy's International, Inc.** and a contract with the Riverside County Office on Aging, means another year of the quarterly will be coming your way!

Thanks also for the kind words of praise for *Meeting the Challenges* !!! We really are glad that you like what we are doing and that you look forward to receiving the publication. It makes us feel good to hear things like "I enjoy reading the magazine and my children enjoy it too." "I share it with my friends." Those great people who contribute their time to write important articles are the reason for this!

We will continue to work to provide useful, information-filled articles on subjects that help you meet the challenges in your life. Let us know if there are subjects which you would like us to cover or send us information you feel would be of interest to other readers. You can write an article of your own and send it to us. We would welcome contributions of recipes, humor, poetry, observations of life, personal experiences, accomplishments, and special interests, including hobbies.

We are now distributing about 9,000 copies of each issue, with the number getting larger everyday! Thanks again for your help and support. It is great to have you as our partner.

-Richard Smith, Editor

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Dial-A-Ride Service in Blythe is For

A

ll you have to do is make reservations by 5pm of the day before you need to travel!

Service is provided within an 18 mile perimeter around the City of Blythe, including Ripley.

Service is provided daily, Monday through Friday from 7:30am to 3:30pm. The cost of travel is \$1.25 in town up to 5 miles and \$1.75 from 5-10 miles per person each way.

For more information or to schedule travel, call Valley Resource Center at 922-3139.

Valley Resource Center is a non-profit organization created in 1979 to help adults with Developmental Disabilities reach their "maximum potential". They provide many other services in the

Meeting the Challenges

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POSTMASTER: Send address changes to Partnership

Summer Smog Alerts: What They Mean . . .

UNHEALTHFUL

EXCEEDS FEDERAL CLEAN AIR STANDARD

- ◆ Those with heart or lung disease and other susceptible persons should minimize outdoor activity

UNHEALTHFUL

HEALTH ADVISORY EPISODE

- ◆ **EVERYONE should AVOID PROLONGED, VIGOROUS OUTDOOR EXERCISE**
- ◆ Those with heart or lung disease and other susceptible persons should avoid all outdoor activity

VERY UNHEALTHFUL

1ST STAGE ALERT

- ◆ **EVERYONE should AVOID VIGOROUS OUTDOOR EXERCISE**
- ◆ Persons with heart or lung disease and other susceptible persons should stay indoors

HAZARDOUS

2ND STAGE ALERT

- ◆ **EVERYONE should AVOID OUTDOOR ACTIVITY**
- ◆ Those with heart or lung disease and other susceptible persons should stay indoors

HAZARDOUS

3RD STAGE ALERT

- ◆ **EVERYONE should STAY INDOORS AND MINIMIZE PHYSICAL ACTIVITY**

Office on Aging Senior HELPLINK:

1-800-510-2020

"A Gateway to Senior

Lung Volume Reduction Surgery

An Effective Treatment for End-Stage Emphysema

Many success stories have the medical community and emphysema suffers talking, but the Health Care Financing Administration (HCFA—pronounced *hickfa*), which governs Medicare, has decided not to pay for the operation (except for a select group of patients participating in a national study).

Take Elizabeth Jackson, for example, who had the lung reduction surgery a year ago this spring. Jackson, who had been diagnosed with end-stage emphysema in October of 1995 according to a Washington Post story, was able to “climb the steep stairs to the choir loft at her church and lift her voice to sing” within less than a month after having the surgery.

It was also reported that Alfred Munzer, a pulmonary specialist and former president of the American Lung Association, had been skeptical of reduction surgery. He conducted tests which indicated that the volume of air that Jackson’s lungs would hold had doubled as a result of the operation. The article quotes Dr. Munzer as saying, “The improvement was so dramatic that I’ve become convinced this is a good procedure.”

Consider the supplemental statement of Dr. Joel Cooper of the Washington University School of Medicine in St. Louis, to

testimony before the House of Representatives Ways & Means Health Subcommittee in April. Dr. Cooper showed a Before and 2 years After video of a 58 year old man “who was so disabled from his emphysema that he qualified for Medicare and his life-saving volume reduction procedure was covered by our local Medicare intermediary.” Cooper continued, “Had he not received his operation before HCFA’s national declaration of non-coverage, he would almost certainly have died within months.”

According to Steve Sternberg in his article in the Post, HCFA based its decision on a federal report that said there was no conclusive evidence that the benefits were worth the risk. HCFA apparently concluded that the surgical procedure was still in an experimental stage and claimed that it was unwilling to sponsor an “uncontrolled experiment involving thousands of frail, elderly patients with a life-threatening disease.”

Each surgery costs upwards of \$35,000 and Medicare pays the bills for about 60% of emphysema patients. Sternberg says that critics contend that HCFA feared that the sudden demand for the costly operation might further increase strain on Medicare’s budget - a charge HCFA denies.

Still, an independent technology assessment organization in Pennsylvania has estimated that operations on only 20% of the nation’s 2 million emphysema patients would cost between 12 billion and 20 billion dollars.

Sternberg reports that John Kramer, president of U.S. Lung Centers, a for-profit company, asserts that HCFA analysts “looked at the science as it existed a year and a half ago and decided that there wasn’t enough published research to justify covering the procedure. At the same time, insurance companies and HMOs looked at virtually the same scientific data published in peer-reviewed journals and decided the procedure should be covered.”

In patients with emphysema, lung tissue swells and presses against the chest wall and the diaphragm which reduces the patient’s ability to draw in air.

In Lung Volume Reduction Surgery (LVRS), doctors cut away 20 to 30 percent of the diseased lung tissue, which can improve breathing.

Not all patients are candidates for the procedure, nor do all patients benefit equally from the operation.

As many as 100 hospitals now offer LVRS.

[SOURCES: 5/20/97 Health Supplement to the Washington Post; Supplemental Statement to 4/17/97 Testimony before Health Subcommittee]

Riverside Transit Agency's Services for Those with Special Needs

7he Americans With Disabilities Act (ADA) became law in 1990. This legislation extended civil rights protection to Americans with disabilities in much the same way individuals are protected on the basis of race, sex, national origin and religion. The ADA made it illegal to discriminate on the basis of disability in the areas of employment, public services, public accommodations, telecommunications AND transportation.

To better serve the special needs of persons with disabilities, the Riverside Transit Agency (RTA) has expanded the areas served by Dial-A-Ride and has increased hours of service as well. RTA has also developed six *NEW* Intercity Dial-A-Ride services to take passengers where they need to go from city to city.

"Priority Service" is available for persons with disabilities of any age, including seniors, who qualify ADA Eligibility under the requirements of the Americans With Disabilities Act. When an individual is qualified for "Priority Service", their trip request will be honored before the requests of non-eligible persons are accepted when those requests are made 1 to 7 days in advance. Same day requests can only be honored on a space

available basis.

An application for ADA Certification can be obtained by calling HelpLink at 1-800-510-2020 or you may also call RTA directly at 684.0850 (ask for Contracts Department). When you have completed your application you will be scheduled for an eligibility interview. The certification process can take up to 21 working days to complete.

Once you are ADA Certified, you may begin to use the exciting ADA Intercity Services:

Intercity #1

Grand Terrace/Highgrove/
Loma Linda
Riverside/Woodcrest
Mead Valley/Perris
Moreno Valley

Intercity #2

Corona/Norco
Riverside

Intercity #4

Banning/Beaumont
Hemet/San Jacinto
Homeland/Romoland
Perris
Sun City

Intercity #5

ADA customers who have both their origin and destination within 3/4 mile of RTA's Route 35,

between Banning/Beaumont and Moreno Valley, may request the bus to deviate within 3/4s of a mile to pick them up and drop them off. This special service is available during the times the fixed route is operating in their area and needs to be requested 1 to 7 days in advance.

Intercity #6

ADA customers who have their travel origin in Banning or Beaumont and wish to travel to Calimesa or the Yucaipa transfer area can be picked up by the Calimesa Dial-A-Ride. This special service needs to be requested 1 to 7 days in advance. Information about services in San Bernardino County can be obtained by calling OmniTrans at 1-800-966-6428.

SOME INTERESTING ADA

RIDER FACTS

- ◆ Once ADA Certified, you can visit anywhere in the United States and use your ADA Priority privileges there for 3 weeks
- ◆ ADA riders requiring an escort may bring them along at no charge
- ◆ There are 1 million ADA eligible riders nationwide

For more information on ADA Intercity Services or to schedule a

Hungry? What We Choose to Eat Can Make a Difference!

Eating can be a lot of fun and it is important to eat food that is good for us at any age. Although we are not ‘growing’ at the same rate we did when we were younger, the food we eat still *becomes part of us!* We need the same vitamins and minerals we did when we were younger and healthful food choices help keep our bodies strong and might even prevent some diseases!

Here are some Food Tips for more enjoyment and better eating:

- ◆ Enjoy a wide variety of foods. To get all of vitamins, minerals and nutrients we need, we should eat foods from ALL the food groups. You love meat and potatoes? Try adding squash, carrots or zucchini to your favorite beef stew next time.
- ◆ Eat five servings of fruits and vegetables. Each day? Right. It’s easy! Add sliced or dried fruit to your cereal. Enjoy a glass of juice. Have a little vegetable soup or a salad. Whether fresh, frozen, canned or dried, fruits and vegetables are important sources of vitamins and fiber.
- ◆ Have six servings of breads, cereals, rice and pasta. Easy too! If you eat a bowl of cereal in the morning and have a sandwich for lunch, you are already half-way to the goal. This food group provides you with energy and doesn’t make you fat!
- ◆ Eat lean meat. For better health, trim fat from meat and remove skin from poultry. Meat cuts from the round and loin usually also have less fat.
- ◆ Drink milk or eat yogurt and cheese at least twice a day. Bones of all ages need calcium. Look for low fat dairy products such as 1% or skim milk, low fat yogurt and reduced fat cheeses.
- ◆ Read Nutrition Facts on food labels. Increasing the serving size listed will increase the amount of nutrients you get, but also will increase other contents like sodium or fat, which you may not want.

For More Information -

- ☎ National Institute on Aging’s Information Center: 1-800-222-2225
- ☎ Consumer Nutrition Hotline of The American Dietetic Association’s National Center to locate a registered dietitian in your area: 1-800-366-1655
- ☎ Food and Drug Administration to request the publication “Using the New Food Label to Choose Healthier Foods”: 1-301-443-3170
- ☎ Riverside County Office on Aging Senior Nutrition Services to locate a nutrition site near you: 1-800-510-2020

You can also write to the American Association of Retired Persons (AARP) to request a free copy of “Healthy Eating for a Healthy Life, stock #D15565, AARP Fulfillment (Ref. #EE0849), 601 E Street, NW, Washington, DC 20049

NUTRITION GUIDELINES from the American Cancer Society

- Choose most of the foods you eat from plant sources.
- Limit your intake of high-fat foods, particularly animal fat.
- Stay physically active: achieve and maintain a healthy weight.
- Limit consumption of alcoholic beverages, if you drink at all.

What is a *LIVING WILL* ?

by George F. Dickerman, Attorney at Law

A

“living will” or, more properly titled, a Durable Power of Attorney for Health Care, is a legal document which allows you to retain control over your medical treatment if you become physically or mentally incapacitated and no longer able to give informed consent.

Two main reasons you might want to have one are:

- 1 to enable you to decide what kind of medical treatment you receive if you become incapacitated
- 2 to take the emotional burden of making these choices off your family.

If you have already experienced this dilemma with a loved one, you know how emotionally draining these decisions can be, particularly when there is no time for objective reflection.

The desires you express in this document are solely yours and should be tailored to express your individual wants. Your wishes will be carried out by an agent you select, called your attorney-in-fact. That person will have the authority, pursuant only to your written instructions, to consent to your doctor not giving treatment or stopping treatment necessary to keep you alive.

Obviously, you should give much thought to the creation of this document and make sure it fully explains your desires

regarding the giving or withholding of medical treatment, as well as making sure it is legally enforceable. Many legal stationary stores sell pre-printed forms which can be used without the advice of an attorney. However, the legal effect of these forms depends on the date it was printed and whether it complied with applicable probate code laws in effect at that time.

The document you ultimately use must be signed by you, dated, and either notarized or signed by you in the presence of two witnesses along with their signatures. These witnesses cannot be one of the persons whom you give authority to, nor a medical provider. Numerous other restrictions and requirements apply to the persons who will sign your living will. These persons do not have to know what your document says, but they must verify that it is your document and your signature.

Remember, the person you select as your attorney-in-fact can only make decisions for you in accordance with your written instructions, and you may revoke or change this authority at any time while you are still mentally and physically able.

Who should you select as your attorney-in-fact? Treating physicians, community care operators, and their employees

may not act as your agent, nor may a conservatee unless certain statutory provisions are met.

Obviously, you should select a loved one whom you unconditionally trust and who has the compassion and courage to carry out your wishes. You should also designate one or two alternate agents in case your first choice is unable or becomes ineligible to assist.

You should also discuss your living will with the person you choose, and make sure he/she is comfortable with and agrees to carry out your instructions.

If your spouse is named as your agent at the time you have a living will prepared, but you later divorce, then you spouse will be disqualified as your attorney-in-fact (probably a good idea), unless your written instructions state otherwise.

What instructions should you make? This decision is entirely yours. You control the type of medical treatment you want or don't want. You may want to consider the following:

- Do you want to obtain or refuse life-prolonging care? For example, if you are on life support systems with no medically probable chance of recovery, would you want your doctor(s) to withdraw any further heroic measures to keep you alive?

On Riverside County Highways: PUSH BUTTON FOR HELP

Yellow boxes on posts and marked "CALL BOX" are all along Interstate Routes 10, 15 and 215 and on portions of State Routes 60, 71, 74, 79, 86 and 91. Inside each box is a phone which will connect you directly with the California Highway Patrol. All you have to do is open the box cover, lift the phone and press the red button. No numbers to dial. Very simple.

Use the Call Box to report a vehicle break down or to report a traffic hazard or accident. Always use the most convenient Call Box which you can safely access. Always park your car as far on the right shoulder as possible. Exit your vehicle on the passenger side. Stay on the road side and off of the highway surface. Never cross traffic. Always look for a call box you can reach without crossing an on-ramp or an off-ramp.

The Call Boxes are spaced from about 1/2 apart in high traffic areas to two miles apart in remote desert areas. It is comforting to know that help is always so close at hand!

Living Will.....

- Do you want resuscitative measures to be taken?
- Do you want your agent to have the right to authorize an autopsy?
- Do you want to make any anatomical gifts of your body to help other patients or to aid in medical research?

Your living will should be a personalized statement of your wishes and desires. It must be properly drafted and executed in order to be valid. With a little advance planning, you will relieve much of the emotional burdens of your loved ones and know that your medical treatment will be given in accordance with your wishes.

George F. Dickerman is an attorney who practices and resides in Riverside. Much of his time is spent on Elder Law issues and assisting seniors with legal matters which arise as a consequence of aging. He will be happy to answer any questions you may have and can be reached at (909)788-2156.

SCORE One For The Good Guys...

You've retired, but you believe you would enjoy sharing your years of work experience and the knowledge and wisdom you have gained? Then you may be qualified to become a SCORE counselor.

SCORE is the Service Corps of Retired Executives, which is a volunteer group of retired men and women who provide free management counseling to small businesses. To volunteer your services, call 909-652-4390.

SCORE is sponsored by the Small Business Administration in cooperation with local Chambers of Commerce.

If you own a small business and would like to receive SCORE counseling, call your local Chamber of Commerce.

What Do I Know?

True OR False

- 1 Olive oil is lower in fat than other oils?
- 2 Regular exercise encourages better eating
- 3 If my weight is OK, it doesn't matter what I eat!
- 4 Taking vitamin pills is the best way to fight cancer.
- 5 "No cholesterol" means low in fat?

ANSWERS

- 1 **False.** Olive oil is a fat and has as many calories as other oils.
- 2 **True.** Studies indicate regular exercise (about 30 minutes per day) will make you more likely to eat more fruits and vegetables.
- 3 **False.** What you eat affects your cancer risk.
- 4 **False.** Getting vitamins from foods is far more effective.
- 5 **False.** Many products labeled "low" or "no cholesterol" are high in fat.

[SOURCE: American Cancer Society]

REAUTHORIZE THE OLDER AMERICANS ACT

Now is the time to speak out for those frail older adults who cannot advocate on their own behalf and are dependent on services made possible by the Older Americans Act. And now is the time for older adults who can *speak out* to do so.

We are witnessing once again the development of “budget driven” rather than “vision driven” public policy at both the federal and state level. The budgeting approach we see relies on piecemeal and incremental tinkering rather than on bold new initiatives for service redesign. “Repair vs. reform” seems to be the norm, with political pressures dictating decisions that could be better formulated by vision, judgment and realistic trade off and cost benefit analyses.

It is in this budget climate that we face the challenge to achieve reauthorization of the Older Americans Act, which is small in its total funding allocation compared to the big Medicare/Medicaid programs. This Act is the *only public policy statement at the federal level that defines and commits to a vision for a home and community based service system for older adults to assist them to live in their homes for as long as possible.*

We are well aware of the need to cost skyrocketing Medicare and Medicaid costs that are responding to both inflation

and incentives that favor costly medical and institutional care. We do not hear about a plan to emphasize health promotion, prevention of illness, personal empowerment and responsibility for health, and comprehensive integrated coverage of health and social services to maintain individuals at home with family, volunteer, and community supports to leverage public dollars.

The heart of the Older Americans Act is to prevent decline and support independence. It works. Through nutrition programs and in home and advocacy support services,

“..political pressures dictating decisions that could be better formulated by vision...”

thousands of frail older adults at risk are sustained. In addition, the act promotes community planning, coordination, and new program development, which are essential ingredients for a workable community based system.

The Older Americans Act must be reauthorized by Congress, not only as a symbol of their commitment to the philosophy that it embodies, but also as a cost saving measure to relieve strain on an already strained acute and institutional health care budget.

The Older Americans Act is customer vs. provider focused, and has placed strong emphasis on

customer satisfaction, and outcome tracking. An individual experiences needs in a holistic manner, with all facets of his or her life being interrelated. The Older Americans Act recognizes that an older adult is not a diagnosis or a treatment methodology, but rather a member of our “community family” with social, emotional, physical, and spiritual needs...all of which must be addressed together to achieve a quality and cost effective result.

The Older Americans Act recognizes that health care costs more without social supports in place, and that home and community based services have a successful track record of leveraging substantial cash, family, and volunteer contributions toward care.

The Riverside County Board of Supervisors has passed two resolutions calling for reauthorization. Our Congressional representatives and Senators in Washington would benefit from your guidance on this vital piece of legislation.

.....
Share your thoughts with Congress:

Senator Matthew Martinez
 Rayburn Bldg. #2234
 Washington, D.C. 20515

and

Representative Frank Riggs
 1714 Longworth House Office Bldg.
 Washington, D.C. 20515

Understanding Long Term Care

by Mary Frances Villagómez, Outreach Coordinator, HICAP

Long term care is often needed by older people when, as the result of a prolonged illness, disability, or injury they can no longer do the ordinary tasks of everyday living such as bathing, dressing or eating. In addition, long term care is necessary when an elderly person requires regular supervision. While long term care is often equated with nursing homes, most care is provided at home or in community settings like adult day care or assisted living facilities.

Anyone may need long term care services due to an accident or a sudden, serious illness or the slow progression of chronic diseases such as rheumatoid arthritis, Alzheimer's Disease or Parkinson's Disease. People who live longest are more apt to need long term care.

In addition to age and disability, there are other factors that determine the likelihood of needing long term care services:

- ◆ Gender. Women are more likely to need long term care than men. One reason may be their longer life expectancy - women outlive men by about eight years. At any given time, of those age 75 and over, 30 percent of men need assistance with personal care.
- ◆ Marital Status. Women tend to marry men who are older. Since women also have longer life expectancies, they usually outlive their husbands. It is not

unusual to find an older man being cared for by his younger wife. When a woman needs long term care services, they are more often provided by a daughter or daughter-in-law, or in a nursing home. [Only 25% of people who were married at the time of their death spent time in a nursing home, while 40% of those who were widowed, divorced, separated or never married spent time in a nursing facility.]

- ◆ Functional Limitations. Women have more chronic diseases that impair mobility, such as arthritis and osteoporosis, than men. Men have more acute health episodes that lead to earlier and quicker death.
- ◆ Mental (Cognitive) Impairments. This often leads to the need for long term care. Confusion and poor judgment may mean that individuals need to be supervised in an assisted living facility or at home long before they need care for physical infirmities.
- ◆ Family Circumstances/Support System. Whether a person can remain at home is often dependent on his or her support system. Many do not live near their children; their support system consists of neighbors and friends who may not be available on a

regular (and possibly unpaid) basis. If an older person does live near family, family caregivers may work full time or be unable to offer as much help as is needed.

What are your chances of needing long term care?

Government estimates that about 43% of us will be in a nursing home at some point in our lives. For most of us though, the risk of needing nursing home care before age 75 is relatively small, and most of us will not need it for longer than two months. In fact, 43% stay in a nursing home for 3 weeks or less; 61% for under 2 months; and only 16% for a year or longer. Only 4% of people over age 65 are in nursing homes at any one time.

What about long term care insurance?

Regular health insurance does not cover long term care. About half of all nursing home expenses in this country are paid for out-of-pocket by patients and/or their families. Medi-Cal, designed to subsidize those who cannot afford long term nursing home care, pays for slightly less than half of all nursing home expenses. Private health insurance or Medicare only pay for about 2% of all qualified stays in nursing facilities. Even less help is available to meet the cost of care at home or in the community. One relatively new

option for covering
[continued on next page]

Long Term Care....

these costs is long term care insurance (LTCI).

Should I Purchase Long Term Care Insurance?

Maybe. People give the following reasons for considering LTCI:

- To preserve assets for spouses and heirs.
- To avoid being a burden on their families.
- To be cared for at home as long as possible.
- To be able to get into the nursing home of their choice should they need one.
- To avoid Medi-Cal.
- To have peace of mind.

While these are all valid reasons, LTCI may or may not be the best ~~way for you to achieve your goals.~~

For more detailed information and to schedule an appointment with a volunteer counselor who specializes in Long Term Care, contact HICAP (Health Insurance Counseling and Advocacy Program) at 1-800-273-4227. HICAP is a program of the California Department of Aging and is administered in Riverside, San Bernardino, Inyo and Mono counties by the Inland Agency in Riverside, Ca. All services provided by HICAP are unbiased and objective and are available to persons 60 years of age and older and to Medicare beneficiaries and/or their caregivers.

New Emphasis Placed on Early Diagnosis of Alzheimer's

With the advent of new research into the cause and treatment of Alzheimer's Disease, a new emphasis has been placed on the importance of obtaining an early diagnosis of "probable" Alzheimer's.

The diagnostic process includes the review of detailed family and health history, physical and neurological examinations including psychiatric and laboratory testing. When completed, a diagnosis of "probable" Alzheimer's Disease can accurately be made 80-90% of the time.

Early diagnosis of probable disease can help the patient and caregiver prepare for the future in meaningful ways:

- 1 It provides an opportunity for the patient to address significant life issues and relationships.
- 2 The patient can participate in the creation of legal documents, like a durable power of attorney, to empower a chosen representative to act on their behalf.
- 3 It can allow the patient time to design a financial plan to help provide for the needs of the patient and caregiver during the potential 15 to 20 year course of the disease.

Obtaining a definitive diagnosis can reduce the cost of ineffectual treatment. The Alzheimer's patient and caregiver may then research the latest clinical studies and elect the best possible course of disease management. For example, early diagnosis may allow election of participation in a clinical research study, which may prove financially beneficial and psychologically satisfying to the patient and their family members. Also, new medications have recently been introduced into treatment modalities which show growing promise for delaying the progression of symptoms associated with the disease process.

Caregivers may benefit from joining a local support group through education, peer support and having an opportunity to talk with others during the often lengthy disease process who are having similar experiences. Support groups are frequently organized at daycare or Senior Centers, and may include programming for the Alzheimer's patient as well.

Another important resource is the local Alzheimer's Association Chapter. Many chapters offer such services as research referral, respite care and facility evaluation. The Riverside-San Bernardino Chapter sponsors seminars for professionals and caregivers. Our mission is "Someone to stand by you..." Our phone number is 1-800-660-1993.

Full Scope of Services Offered at Braille Institute

by Sherry West, Assistant Director, Braille Institute

Braille Institute is a full service nonprofit organization serving persons who are blind or visually impaired throughout the desert and Souther California.

The typical student at the Desert Center in Rancho Mirage is 72 years of age with a diagnosis of age-related macular degeneration (AMD). People who have AMD or other visual impairments can come in for a free visual aids consultation. When glasses no longer work, a Visual Aids consultant assesses a client's vision and suggests devices such as a hand-held magnifier or a closed-circuit television to make the most of their remaining vision. A visual aids consultation opens the door for people with visual

impairments, enabling them to read mail or newspapers, and often, introduces them to Braille Institute's broad array of classes in independent living skills and enrichment.

A written referral from an ophthalmologist, stating legal blindness, is necessary for people to take part in the Institute's free curriculum. A person who is legally blind has central visual acuity of 20/200 or less in the better eye, with corrective lenses, or visual acuity of more than 20/200 if the field of peripheral vision is 20 degrees or less.

Seniors who are legally blind take 10 core courses in independent living skills before moving on to enrichment courses in arts and crafts. Independent

living skills courses teach seniors how to perform daily tasks in new ways with confidence.

Confidence and self-reliance increase rapidly with each course, as each student regains control over his life.

Students can learn how to cook again with adaptive techniques or label canned goods and frozen foods so that they can find things in the refrigerator on their own. Students learn to identify money by the way they fold it and mark clothes to help them match colors. Seniors can learn how to get around town safely using their remaining senses and a white cane. Braille reading and writing and English-as-a-second-language are taught too.

Subscription Information.....

- 1 If you reside in Riverside County you may request to receive *Meeting the Challenges* each quarter for free. We welcome donations, which are fully tax deductible, but we do not charge a subscription fee.
- 2 If you reside outside of Riverside County, the annual subscription fee for four quarterly issues is \$5. [Issues will be sent to you at the non-profit bulk rate. We do not currently have provisions to send issues by first class mail and are unable to honor foreign subscription requests.] Payment must accompany your subscription request.

Send subscription requests, including complete name and mailing address, with payments or donations payable to:

The Partnership To Preserve Independent Living
 for Seniors and Persons with Disabilities
Meeting the Challenges Quarterly
 6296 Rivercrest Drive, Suite K
 Riverside, CA 92507

Upon finishing the core courses, students receive a certificate of completion. They can then apply their skills and creativity in enrichment courses, which include jewelry making, sculpture, painting and drawing, and music appreciation. Sometimes students who have mastered independent living and enrichment skills go on to be assistant volunteers.

Braille...

Volunteers are the heart of the Institute. The scope of programs and one-on-one attention would not be possible without them.

The Braille Institute gives people a sense of belonging.

Those who have lost their vision find that they are not alone. They meet people with whom they can relate and develop long-lasting friendships.

The Institute also has a library of talking books for people who are blind or reading disabled (unable to read print or physically turn the pages of a book). Library patrons can receive talking book machines and talking books free of charge. Library patrons can either order books over the phone or come to the library.

The Braille Institute conducts Community Outreach programs in Hemet, Corona, Sun City, Claremont and Redlands for people who are unable to come into the library or the Institute for

classes.

Seminars to help family and friends understand sight loss, as well as other community education seminars designed to help people become more aware of eye diseases and how to care for their vision, are conducted by the Institute.

For more information, you

SUCCESS TIPS

- 🕒 **Gather Information - Educate yourself**
- 🕒 **Determine Alternatives**
- 🕒 **Set Your Goals**
- 🕒 **Be Willing to Pay the Price**
- 🕒 **Live Your Life to the Fullest!**

[SOURCE: Amputees Are Able]

Partnership to Preserve Independent Living for Seniors and Persons with Disabilities

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