

Meeting the Challenges

Summer 1998
Volume 7 Number 1

QUARTERLY

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

Untreated Vitamin B₁₂ Deficiency Can Lead to Serious Medical Complications

A deficiency of vitamin B₁₂ can lead to many serious health problems, according to research conducted for the American Society of Aging.

Symptoms include fatigue, weakness, numbness, prickling, or tingling in the extremities, loss of muscular coordination, sore tongue, appetite loss, weight loss, AND forgetfulness. If left untreated, permanent neurological damage can result, including

dementia, disorientation, confusion, agitation, irritability, dimmed vision, delusions, or hallucinations.

Vitamin B12 is essential for the:

- growth and repair of body cells
- development and maintenance of normal nervous system function
- formation of red blood cells

It is normally obtained from eating animal products, such as meats, fish, eggs, and dairy products and absorbed from the small intestine. Except

in strict vegetarians, dietary deficiency is rare. Most vitamin B₁₂ deficiency results from malabsorption caused by the insufficiency of a necessary stomach secretion and by disorders of the small intestine.

When this occurs, dietary or oral B₁₂ supplements are simply not absorbed by the body.

As we age, our stomachs produce less acid, which can also lead to a vitamin B₁₂ deficiency.

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Office on Aging
Senior HELPLINK:

**1-800-
510-2020**

**“A Gateway to
Senior**

*“Giving does not drain
our resources,
but provides a space
for us to refill.”*

- Anonymous

Meeting the Challenges

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B₁₂

Nutrition researchers now believe that as many as 1 in 5 Americans over the age of 65 are vitamin B₁₂ deficient.

In addition to the older adults, other high risk groups include persons:

- who have had a stomach or small intestine resection
- are living with HIV/AIDS
- who have Crohn's disease
- who have pernicious anemia
- who are taking proton pump inhibitors of H₂ blockers over a long period of time.

Your doctor can perform tests to determine if vitamin B₁₂ deficiency is a problem. Once identified, vitamin B₁₂ injections, which get it directly in the bloodstream, are necessary since the deficiency is the result of an inability of the body to absorb the vitamin from foods or oral supplements.

Standard monthly vitamin B₁₂ injections may be self-administered, but most people don't feel comfortable giving themselves or their family injections.

Normally, those identified with this health threat have had to schedule monthly visits to their doctors to receive their

injections. The Food and Drug Administration (FDA) has, however, now approved another method, which is convenient for use at home and doesn't require an injection. Vitamin B₁₂ now comes in the form of a gel to be placed inside of the nose and is self-administered once a week.

If you suspect that you might be suffering from a vitamin B₁₂ deficiency, it is a serious health threat and you should contact your doctor immediately for testing.

If you are currently being treated for B₁₂ deficiency by monthly injections, you might want to ask your doctor about the new intranasal gel alternative.

The information for this article was provided by the American Society on Aging.

**New 12-minute
Educational Video
on TRIP, PEER
and 1-800-510-2020
Services**

**is now available
FREE OF CHARGE
to public agencies for
staff training, senior
and community centers,
support groups and
other organizations.
To request a copy,
call 1-800-510-2020.**

PAYING FOR NURSING HOME CARE (Medi-Cal Planning)

by George F. Dickerman

Your loved one needs a nursing home, but you can't afford it. You look into the federal medicare program, but find out that it will only pay for skilled nursing care (not custodial care), and even then only the first 20 days of care are covered. Days 21 through 100 require you to pay most of the cost, and after that, medicare won't pay at all.

You are not financially destitute, and don't believe that your loved one can qualify for our state's Medi-Cal program. Where can you turn for help?

Here is a question I often hear:

"My spouse and I have saved a substantial nest egg for our retirement, and we own an expensive house and car. My spouse now has to enter a nursing home. We can't possibly qualify for Medi-Cal....can we?"

Let's consider one issue at a time -

Savings and Investments.

Most people believe that they can't qualify for Medi-Cal if they have substantial savings or investments. This is not necessarily true. Couples with \$100K, \$200K, or more in various savings or investments may be able to keep their retirement funds intact and not have to spend retirement money for nursing home costs.

One strategy may be the purchase of certain annuities which qualify for Medi-Cal eligibility. Generally speaking, the annuity must be structured to make periodic payments of both principal and interest so that the balance is fully exhausted within the

life expectancy of the annuitant.

With proper planning, retirement money can be structured to make it completely exempt for Medi-Cal purposes. There are various strategies, which can be used, to keep your retirement money safe from the long arm of Medi-Cal.

The Home.

No matter what the value, Medi-Cal can't force you to sell your home to pay for nursing home care. It's crucial, however, to indicate on the Medi-Cal application form that the ill spouse *intends to return* to live in the house at some point in the future. So long as the ill spouse (or his/her representative) makes a written statement to return home, Medi-Cal can't force you to sell.

Once the ill spouse is on Medi-Cal, the home should be transferred into the name of the well spouse. That way, Medi-Cal can't later make a claim on the home to try to recover medical costs it paid on behalf of the ill spouse's nursing home care.

The Car.

One car, regardless of value, is yours to keep. Medi-Cal will not even consider it so long as the car is substantially used to benefit the ill spouse. Using the car to run errands, obtain prescriptions, do some shopping, etc., are all examples of how the automobile can be used for the benefit of the ill spouse and be exempt as for Medi-Cal purposes.

A COUPLE OF WORDS OF CAUTION -

Many friends, although well

meaning, are wholly misinformed about Medi-Cal rules and regulations. Don't make the dangerous mistake of listening to misguided advice to "...just transfer your house and investments into the names of your children ...they can hold it for you until you need it." **This won't work.** In fact, criminal penalties can attach to anyone who advises you, for a fee, to make such a transfer when it results in a period of ineligibility for the ill spouse.

Similarly, don't listen to people who tell you to buy a living trust and transfer all of your property into the name of the trust. This won't work either. Medi-Cal can go after all non-exempt property you placed in a living trust.

Medi-Cal rules and regulations are complicated, but qualifying for Medi-Cal is not difficult if you have a thorough knowledge of the laws and regulations. Competent legal advice can be very helpful.

George F. Dickerman is an attorney who devotes much time to assisting seniors in matters of elder law. He is happy to answer any questions you may have and can be reached at (909) 788-2156.

Or look for his WebSite, under *Professional Services*, at: <http://www.vitalco.net>

DIALYSIS.....It ain't so bad!!!

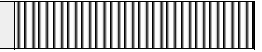
A funny thing happened to me on the way to the hospital last July...well, it really wasn't that funny! After many tests and poking and prodding, guess what? I've got RENAL FAILURE.

So, what's the use of living? That's got to be the end of like as I knew it! As Frank Sinatra sings, "I'll just roll myself up in a big ball and die." Then I learned, THERE IS LIFE ON DIALYSIS! There must be. There are hundreds of dialysis clinics across the U.S., in foreign countries AND ON CRUISE SHIPS!

Yes you can even travel when you are on dialysis. If you plan ahead, you can make arrangements for your dialysis treatments to and from your destination. A couple of things to watch out for though. If you are over 65, Medicare does not cover you in a foreign country and treatments can cost between \$400 and \$500 each. If you take that cruise, make sure the ship is American registered, not Norwegian, etc., so your treatments are covered by Medicare. So far, since starting on dialysis, I've been to Lake Arrowhead, Waikiki, and Kona. And had wonderful times! No matter where you go, the dialysis technicians are pleasant (even funny), and well trained.

The treatments themselves are a piece of cake - three times a week, 3 hours each time. But listen to this - most places give you your own TV and you can watch the Soaps, or read, or snooze, and you can eat! In my case, I like to eat "snow cones" and apples. Just lay back and enjoy. I think of my treatments as visiting a "sick friend". If you're retired, scheduling your time for the treatments probably isn't too bad, but if you are still working, as I am, you have to keep your datebook handy! If you know you will be needing dialysis, take a tour of your local clinic and familiarize yourself with what to expect.

Ed Feldmann is a member of the board of The Partnership and the owner of the Senior Insurance Center in Palm Desert, which specializes in Medicare Supplements and Long Term Care. If you would like to talk with Ed about how to live with dialysis, his phone number is (760) 346-6565, or he says you can drop him a note at 73-710 El Paseo, Suite 2, Palm Desert, CA 92260.



How to Recognize CROOKED LOTTERY SCAMS...

- ! Never trust someone who says you can win the lottery by purchasing a set of “winning numbers” instead of a ticket. Real lotteries required you to buy a ticket from a lottery vender to have a chance to win a prize.
- ! Never believe a letter or phone call from someone who offers you a guarantee of winning a prize! There are no guarantees.
- ! Never join a “lottery pool”. Real lotteries do not ask people to join lottery prize pools.
- ! Never accept a collect phone call from someone claiming to be a lottery official! Real lotteries do not call collect.
- ! Never send cash to an unfamiliar or foreign business.
- ! Never give your credit card numbers over the phone to an individual or business promising lottery jackpots!
- ! Never believe letters or phone callers that promise “instant” lottery prizes.
- ! Never be taken in by a promise that you can play several national or international lotteries without ever leaving home!

Illegal lottery scams, operated in and outside of the U.S., are stealing millions of dollars from innocent people, and mostly from American seniors! Businesses violate federal and state laws to operate these scams because they want your money and your credit card numbers!

If you receive information or phone calls from suspicious businesses about lotteries, call the California State Lottery, Security Division, at (916)322-6752 [or TDD (Telecommunications Device for the Deaf) 1-800-345-4275]

SOURCE: California State Lottery, Security Division,
600 North 10th Street, Sacramento, CA 95814

Some FACTS About Animals
true or false?

Pit Bulls are born vicious!

False. No breed of do is. They are made vicious by their owners.

Pets need to eat grass as part of a balanced diet.

False. Truth is that their systems can't even absorb any nutrients from grass. They nibble it because they like the taste, kind of like us and cheese puffs!

Cats really can see in the dark.

True. Actually, so can dogs! Both have far better night vision than humans.

Dogs and cats do not have emotions the way we do.

False. They respond to the things we do to them in very emotional ways. They can be happy and they can be sad and depressed. It is not uncommon for an abandoned pet to grieve itself to death.

SOURCE: "Paw Prints", the newsletter of Orphan Pet Oasis in North Palm Springs. Orphan Pet Oasis is a "no kill" shelter. Orphan Pet Oasis is a non-profit group, affiliated with the Humane Society of the Desert and, supported in part by donations. Their phone number is: (760) 329-0203. Their web site is: www.geocities.com/Eureka/Gold/1700



COMPUTERS and THE INTERNET:
Are you too old for all this new stuff??
by Richard Smith, Editor

“Age is not important, unless you are a cheese.”

- Helen Hayes

Some say they are too old, or computers are too complicated, or give some other reason for not keeping up with the times! But more and more are taking up the computer everyday and finding that it ADDS many elements of quality to living well and successfully!!

Better Communication. It costs 32 cents to send a letter; using the computer, you can send the same letter electronically (practically for free) and it usually gets there in a matter of seconds! Many older adults I know use their E-Mail (short for “electronic mail”) everyday to keep in touch with their kids and their grandkids at college, and even arrange outings with their friends. Families and friends can meet in special places (called “chat rooms”) and catch up on all the latest news, even show the latest photos of the new baby!

Education and Information. It’s easier than going to the library. The Internet is an incredibly rich source of information of all sorts. Want to know about the latest advances in the fight against cancer? In a matter of seconds you will find more information on The Internet than you would in just about any library! The Internet is an exciting place for exploration and discovery and it exercises the mind. Get the information you need about Medicare or Social Security with no inconvenient and frustrating phone calls!

Entertainment. On The Internet today, we can play professional bridge, visit museums, get the latest news, weather and sports instantaneously - get movie reviews, hear music! The options are endless.

Learning to use a computer is easy. I’ve read of a child who is only 2½ who can start up his family’s computer and play games all by himself! How hard can it be?

A good system, everything included, now costs less than \$1,000, and when you figure the benefits you receive and the expenses you save, it pays for itself in no time. AND IT IS JUST PLAIN FUN!

Internet Service Provider
teams with
The Partnership
to provide
Low Cost, Unlimited
Monthly Service !!

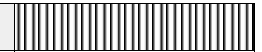


Internet Services
are now available
for a monthly
charge of \$17.95 for
unlimited monthly use hours,
including E-Mail service.

All access numbers
are local to save you the
expense of long distance
hook-up. The low monthly
charge also includes free
technical support to help
make your Internet
experience as easy and
rewarding as possible, even
for first time users.

.. If you, or your family,
or friends select Millennium
for Internet service, and
mention that you heard
about Millennium through
The Partnership, your first
month’s service will be free.
Plus, from then on, one
dollar of your monthly
service charge will be
donated to The Partnership
to help support our
education and service
programs.

To sign-up,
call (909) 873-8878
or go to our new website,
called *Vital Connections*,
at: www.vitalco.net



New DESERT HEALTH CAR Transportation Service Now Available in the Coachella Valley

If you need a ride to a "healthcare-related appointment" in the Coachella Valley, and you live in Desert Hot Springs, Thousand Palms, Palm Springs, Cathedral City, Rancho Mirage, or Palm Desert (west of Cook Street), a new free service is now available to provide you with free transportation, according to Frederic "Ric" Supple, of

the Desert Healthcare Foundation.

Rides are offered weekdays, from 8am to 5:30pm and may be scheduled with 24-hour notice, and a physician's authorization code, by calling (760)837-3937.

If you would like more information on the *Desert Health Car* service, call (760)323-6242.

The initial fleet consists of four *Desert Health Cars*, which were gifts to the Desert Healthcare Foundation from the Desert Regional Medical Center Auxiliary, Jo and Bob Pond, the Hanson-White Foundation and the Jeanette McIntyre Foundation.

BUS STOPS HERE....SEMINAR AND WORKSHOP to be held in Riverside !!

For many persons with disabilities, transportation is a significant challenge. The American Disabilities Act (ADA) requires that curb-to-curb services be provided for persons who are unable to use accessible fixed-route buses.

Curb-to-curb service is a godsend to many, but is also restrictive because it requires pre-planning for travel, and limits a person's ability to make multiple stops on one trip.

By comparison, persons who are able to use fixed route buses are pretty much free to travel as they

want or need to travel.

The objective of the national training project, called "The Bus Stops Here", is to assist persons with disabilities, who have been dependent on less flexible paratransit services in the past, to gain the ability and confidence to attain the transportation freedom of fixed route bus travel.

The Riverside seminar and workshop is scheduled to be held at the Riverside Convention Center from 9am to 4pm on Saturday, September 19, 1998. Attendance is limited to 50 participants who are already using Riverside Transit

Agency (RTA) **Dial-A-Ride** or City of Riverside Special Services.

The program will include hands-on experience boarding an accessible bus, learning to read bus schedules, and individualized travel itineraries. Participants will also learn their ADA rights and responsibilities. There is no charge to attend and a free lunch will be served. Pre-registration is required. If you would like to attend this important event, call Richard Smith at 1-800-510-2020.



Politicians Do Care..... but they aren't mind readers! - by Toni Rhodes

It always amazes me when people sit and complain that politicians just don't care or that they just do not understand. I believe that we, as individuals, have a serious degree of responsibility to MAKE OUR GOVERNMENT WORK.

Sadly, it is typical that we sit back and figure that this responsibility belongs to others. What others? How are these "others" supposed to know what our needs are? Do we really want others, without any knowledge of our needs, to speak for us?

A few years ago, faced with a multitude of problems relating to issues affecting people with developmental disabilities, I actually heard myself say "There is no hope. The agencies that receive the money could care less so long as they get their money and the politicians do not have a clue or care." Thankfully, I eventually came to my senses and began to take the action necessary to begin the process of positive change.

In order to be successful, we have to work with our legislators. Before you contact a legislator, you need to be very clear on what you need. You may think you already know, but sit down, write it out and spend some time thinking about how you would explain that need to someone who has absolutely no understanding of your situation and, therefore, no clue as to why they should step in and assist you.

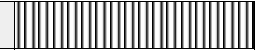
Politicians are people. There are good ones and bad ones, but we really can't expect them to understand or care about something that we can't clearly explain or discuss. We need to do our homework and remember that working with our elected

representatives needs to be a *team effort, and we need to be a strong player on that team.* Simply writing a letter or making a phone call, and then sitting back and waiting for someone to take action won't work. Often we make calls or write letters to blow off steam and once we've done that we don't do any more. *We have to hang in there and keep driving the issue home in a very clear and concise manner.*

When you first call the office of your Assembly Member, Senator, or Congress Member, you will initially talk to an intake person. Never discount that person, because they are your link to the member. With your assistance and diligence, they will seek out the information to help you to clearly decide what your legislator can do to assist you in reaching a resolution.

Do whatever you need to do to get over any feelings of intimidation or uneasiness you may have before meeting with your legislator. They are very busy people and you need to make the best use of your time with them. It is not a bad idea to take a script along to ease your anxiety. If the only way you are able to calmly and clearly state your concern is to read from your script, then by all means read it. I still carry a script or notes with me from time to time to make sure I have said all I had planned to say.

You will need to know, before you actually meet with your legislator, the amount of time you will have for the meeting. If no one has mentioned that, be sure to ask. Then practice what you are going to say to make sure that your most important points will fit into that time frame and do not forget to allow some time for



questions and discussion.

It is always a good idea to include others who have the same or similar concerns and join your energies in your efforts with the legislative member's office.

Do not be afraid to talk with your legislator. I have often heard from legislators that, in their opinion, people like you and I do not come to them enough with our concerns and then stick around to work with them in resolving the issues. *They want us to be part of the team.*

As with so many things in life, meeting with and getting your legislator to assist you in resolving important issues is as difficult or as easy as we choose to make it!

Toni Rhodes a mother of three adult children. Her daughter Christy has Cerebral Palsy, Epilepsy, and was diagnosed early in ~~life with Profound Mental Retardation and Autism.~~ Toni writes that, "Selfishly I have reaped the benefit of most of her love and affection as we continue to live together. She has a wonderful sense of humor and an amazing capacity to love and make the people she meets know that they are loved." Christy has mastered her challenges to become a political advocate and marvelous public speaker. Christy is also "the first Volunteer Fire Prevention Officer for the City of Rancho Cucamonga, who just happens to have Developmental Disabilities." Toni is an active advocate for the rights and needs of persons with Developmental Disabilities.

Help Keep *Meals on Wheels* Rolling...

...to those, living in the Coachella Valley, who are not able to shop for or prepare meals because of current health or disability reasons....

Meals on Wheels is a balanced nutrition program, consisting of one hot meal per day, five days a week, and one cold meal per day, five days a week. They are delivered by volunteers who care about their neighbors, donate their time and use their own vehicles to check in on those among us with special needs, deliver the food, and provide daily human contact.

Recipients of the meals are asked to pay a nominal fee for the two meals, but many require subsidy. This is where you or your organization comes in. Your support of this program in the Coachella Valley is necessary now to keep the program operating. For \$25.75 per week or \$103 per month, Meals on Wheels will keep rolling for one needy individual. Divide it up among your members/25 members @ \$1 per week. It's really nothing, but it will make a big difference in the lives of those who are fed as a result of your caring and generosity.

Mail your support to: Meals on Wheels, 223 W. Overlook Road, Palm Springs, CA 92264, or call (760) 322-0138.

You have the right to file a grievance if you feel that decisions or actions of the staff, management or board of directors of the Partnership to Preserve Independent Living for Seniors and Persons with Disabilities have adversely affected you in some way. Please call 1-800-510-2020 and discuss your concerns with a member of our staff. If they are unable to resolve the problem, you may call the Executive Director personally at 1-800-510-2020.

If the Executive Director is unable to resolve your concern satisfactorily, you may file a written complaint with the Executive Committee of the Board of Directors. Send your written complaint to: Grievance Resolution Committee, Board of Directors, Partnership to Preserve Independent Living for Seniors and Persons with Disabilities, 6296 Rivercrest Drive, Suite K, Riverside, CA 92507. You will be notified in writing of the decision of the Grievance Resolution Committee.



S E X and THE SENIOR

excerpts from a talk given to the Aging Community Team February 26, 1998
by Dr. Herbert C. Lazenby

EDITOR'S NOTE: Dr. Lazenby has been practicing social work psychotherapy for some 25 years. He is a Senior Fellow of the Society for the Scientific Study of Sexuality and has completed a 10 year longitudinal study of *Life Satisfaction of Same Sex and Opposite Sex Couples* and has presented his findings internationally. He is Director of the Life Change Institute in Palm Springs and the Executive Director of the Desert Council for Aging. Discussion of this subject matter is usually avoided in our society as a whole and certainly in "senior" publications. We believe, however, that it is something we need to talk about openly to help dispel some of the myths that pervade popular perceptions of older adults, and it is also particularly important now because HIV infection, among older Americans, is a serious health threat.

Comments of an older woman at a public reading of *The Vagina Monologues*
by many female celebrities in New York on Valentine's Day:
I don't know what they are talking about! I haven't been down there since 1953.

.....

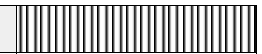
"Essentially our society does not preserve senior adults' sexuality,
but rather denies that it even exists."

"Sex is part of a full and good life. It is not just physical, but is the integration of mind, body and soul in a physical release that is not about control and power, but about love and caring. We were created as sexual beings and we can express ourselves in any way that is not physically or sexually displeasing or repugnant. It is natural."

"I believe that Sexuality is a God given gift and is meant to be understood and utilized in our humanity. Values and morals through the ages have arisen that cause us difficulty in freely expressing that gift. Institutional frameworks have arisen that cause us difficulty in freely expressing that gift."

"The Boomer and Generation X groups are changing those values and standards and set up conflicts with (older) parents. Many middle age individuals think their parents only had sex once - when they were conceived."

"Many individuals are asexual because of genetic makeup, lack of opportunity and lack of interest, as well as religious and family constraints. Opportunity for sex becomes less frequent often as we grow older."



“I cannot repeat this enough. Don’t hunt unless you know what you are hunting for...Is it marriage? Is it recreational? Is it friendship with occasional sex? Do you want monogamy or a number of partners? How will you handle finances?”

“Older adults engage in risky behaviors because they don’t see themselves to be at risk. They usually have unprotected sex. Doctors may be less likely to consider the possibility. From 1991 to 1996, Aids rose twice as fast among older adults than among young adults. Those who are going to be sexually active need to have the HIV test regularly and insist upon safe sex.”

“The moral and values issues of sexuality are often generationally determined - no sex outside of marriage, for example. Performance issues are also involved - ‘How did I do?’ I am used to one client saying ‘our sex life is great’ - the other saying ‘lousy’. Communications issues (between sexual partners) are the same at any age.”

“I am sexual. I am glad that I am sexual. I am glad that you are sexual. I love to touch, to kiss, to care and be cared for. Sex is good and for seniors it has some minor differences from earlier ages. See seniors as sexual beings and rejoice with them that while free from physical creativity, they are spiritually creative.”

“Thank you for letting me be with you. Let’s do a sexual act in closing. Reach out and give a hug to those who are comfortable receiving it. God bless.”

Volunteer Escorts and Drivers Are Needed!



Why volunteer to assist an elderly individual or a person with disabilities who has no other way of getting to the doctor’s office or to go shopping?????????

- **It will make you feel good.** There is almost nothing that is more satisfying than providing mobility for persons who otherwise would be homebound and alone.
- **It is an important job that needs to be done,** and it ordinarily won’t take much of a time commitment, especially, for example, if you plan

- **It can mean extra income.** Through *Faith In Action* and the *TRIP* program, you may be able to receive extra cash each month through mileage reimbursements.
- **You will receive recognition** for being the caring person you are, and your community will be a better place in which to live because of you!

Call *Faith In Action* today at (909) 929-0423 and tell them you would like to volunteer to help.

Get your church or temple involved. *Faith In Action* is a non-profit, interfaith cooperative program, which can help support your organizations’ care giving ministry with outreach, networking, training and free insurance.



Some Keys to Help You Get a Job and Keep It!

by Judy Hargus, JPTA Program Coordinator, Riverside County Office on Aging

It's been said that "I could do a great job" or "I would really enjoy my work if I didn't have to deal with people." Yes people are a necessary and valuable part of this world's resources. Many times the quiet, methodical worker is overlooked for hiring or promotion because someone else was able to "outshine" them. Not in skills or knowledge, perhaps, but in how they communicated those abilities to others.

When you know how to interview for a job and you are interviewing for a position you are qualified for, it is more likely you will receive a job offer.

What do employers look for in today's marketplace? Here are some keys to help you get and keep the job you want:

Personal Values. Valued workers are -

- Honest
- Have good self-esteem and a positive self image
- Demonstrate emotional stability
- Exhibit a positive attitude
- Are self motivated
- Do not limit themselves

Problem-Solving and Decision-Making Skills.

Valued workers are -

- Flexible, can adapt to changing demands on a job
- Creative and innovative
- Can plan and organize work
- Can reason and make objective judgments
- Can keep their mind on several parts of job at same time

Relations with Other People.

Valued workers -

- Work well with peers
- Accept authority and supervision
- Accept constructive criticism
- Are team workers
- Are friendly
- Are consistent in their relations with people
- Are cooperative
- Accept assignments pleasantly
- Respect the rights and property of other people
- Have leadership qualities

Communications skills.

Valued workers -

- Ask questions
- Seek help when needed
- Listen well
- Clearly express themselves orally

Task-Related Skills. Valued workers -

- Complete work on time
- Can follow, oral, visual,

written and multi-step directions

- Work neatly
- Stick with a task and keep busy
- Are precise and meticulous
- Constantly improve their performance

Maturity. Valued workers -

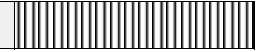
- Work well without supervision
- Are reliable and dependable
- Show initiative
- Don't let personal problems interfere with work
- Accept responsibility for their behavior
- Use time wisely

Commitment to Job. Valued workers -

- Are punctual and have good attendance
- Observe all policies
- Consider work more than a job
- Are interested and enthusiastic.

Seniors can call Judy Hargus at

1-800-510-2020 for more information on the JPTA program, including job counseling, resumes, job search and interviewing skills.



The Doctor is NOT Always Right!

by Cis LeRoy, caregiver and loving niece

NOTE: *Since 1993, Cis has been the primary caregiver for her elderly aunt Margie, who suffers from Alzheimer's disease. She brought Margie to live with her and cared for her in her own home. When the disease worsened, it became necessary to move Margie to an assisted care facility, where she is living today.*

It is sometimes difficult for physicians to treat the "whole person".

When you are making decisions for a loved one, be very careful of the advice you are given by anyone, including physicians. I came to this conclusion by several things that happened to my 84 year old aunt who is in the Alzheimer's wing of a nursing home.

The first time, her assigned nursing home physician recommended a hysterectomy to cure vaginal bleeding. The doctor had not done a pelvic exam, but insisted that the only effective treatment for her was a hysterectomy. I took her to a gynecologist for a second opinion. It was determined that Margie had

polyps. They were removed, and the bleeding stopped. The hysterectomy was clearly not needed.

The second time, a dentist decided that, since my aunt's teeth were breaking and because she was generally in poor health, she needed to have all her teeth extracted and be given a new set of dentures. I consulted with friends and specialists, including the Alzheimer's Association, and we determined that Margie would probably not adjust well to dentures, and could even choke to death as a result. Since she was already on a soft diet, I decided to treat each bad tooth as it came. In the meantime, the dentist visited her at the nursing home, took impressions for full dentures, and was preparing to remove her teeth - without my authorization! When I told him I didn't want that done, he told me *Medicare would pay for it* and that I was "denying her care."

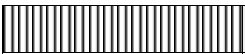
Next, the nursing home suddenly discovered (?) a large lump on Margie's breast. Since she had a

mastectomy on the other breast several years earlier, I strongly suspected cancer. After consulting with the American Cancer Society and the Alzheimer's Association, I decided that the proper procedure to follow in Margie's particular case was a minimally invasive biopsy. I then met with the surgeon and told him that I wanted him to perform the biopsy. I was presented with a form to sign to authorize surgery and the doctor had worded the authorization for entire tumor removal instead of the requested biopsy procedure. When I called him on it, he argued for entire tumor removal, but finally agreed to do only what we wanted.

When the biopsy results came back positive, the surgeon recommended mastectomy, followed by chemotherapy (on an 84 year old woman with advanced Alzheimer's disease!). Based on discussions I had already had, with the American Cancer Society and the Alzheimer's Association, I suggested that I thought such a radical treatment program might be too much for Margie.

continued on Page 14





NOT Right.....

The surgeon responded belligerently that I was “irresponsible” for not taking his advice. He finally agreed to refer my aunt to an oncologist, which is a specialist in dealing with tumors.

The oncologist told me that “no further tests were necessary” and that Margie was “an excellent candidate” for chemotherapy, followed by a month or so of radiation, concurrent with hormone therapy.

The Alzheimer’s Association had previously referred me to a specialist for the treatment of persons with Alzheimers, who had recommended a pain management program in my aunt’s case. I told the oncologist that I believed Margie was not strong enough to take the treatment plan she was proposing. She then told me that I was “neglecting her care”.

I understand that a surgeon cuts, an oncologist may be used to the idea of pursuing every possible treatment to eradicate a tumor, and a dentist usually removes bad teeth. But it seems to me that what they all forgot in this case was

Margie - the 84 year old woman with a bad heart, who is unable to walk 10 feet without tiring, and who has advanced Alzheimer’s. I prefer to think they were just focused on fixing the teeth and curing the cancer, but there is the worse possibility that what they were all really focused on was the money they would make by treating my aunt.

In any case, the moral of this is:

- always listen to physicians carefully and think about what they tell you
- try to get doctors who are committed to treating the “entire person”, get second opinions and talk to other experts and specialists who may have a wider range of experience
- keep a level head, compare the recommendations of medical professionals with the other expert advice you have received and think about the total effect that any course of action will likely have on the person to be treated
- do not let anyone railroad you into

thinking you are a bad person for really caring about your loved one!

Physicians are only human, and as such they can make mistakes. The result can be a long and painful recovery, or even a long and tortuous death. They can, however, also be nasty, abusive and self-serving, and in those cases you should report them.

We need to be advocates for our own well-being and the treatment of those we care for. We need to require that our doctors regard us as their partner in determining the best treatment in every individual situation.

If you suspect medical misconduct, you may report it to the:

The Medical Board
of California
1-800-633-2322



NEW from.....the Partnership

VITAL CONNECTIONS is the **new Internet Network** which provides important information and resources for seniors, persons with disabilities, their families, friends and caregivers, whether they live in the same city or are thousands of miles apart!

You can visit the Vital Connections Network by typing this in the "Location" space on your Internet browser -

<http://www.vitalco.net>

Tell everyone about this new and exciting resource.

At the first page, you can enter by moving your mouse pointer to the french doors, or Come On In, and clicking the left button on the mouse.

Once inside, you will see several different boxes, called a "split screen". On top are "banners" (long rectangular boxes) for the Office on Aging and for business sponsors of the Network. You can move the mouse pointer to a banner, click on it and you will go

directly to their information.

The big box on the left is where you can reference the articles of *Meeting the Challenges*. By clicking your mouse pointer on the magazine cover, you will go to an index of articles from this issue and previous ones, which you can read again or print if you like.

On the right side of the screen is a list of "On-Line" resources, including: Government services, Health and Medical services, Transportation services, Support Organizations, Financial services, Professional services, Volunteer organizations, senior and community centers, in-home services, and other things like news on government programs, health developments, local-national-world news, weather, sports..all just a click away. You can also "Ask the Experts" questions about things that are important to you and receive personal answers from everybody we know who might be able to help.

The key to "navigating" Vital Connections is your mouse pointer. Move it around and explore. Anytime the arrow turns into a pointing finger there is information waiting for you to "click on" under the text or picture, so just click and it will appear.

Use the "scroll bar" on the right edge or bottom of each box to read its full contents - Up arrow to move up; Down arrow to move down; Right arrow, right; Left arrow, left. Play with it and soon you will be a pro!

If you want to go back and start again, just click on Categories. If you get lost, just click on Home to get you back to where you started! For those readers who are already computer pros, none of this is probably new. To those who have never used a computer, doesn't this seem really simple? It is. We can all use, learn from, and have fun at Vital Connections!

****PLUS****

Over the next 12 months, The Partnership will produce eight 30 minute, educational videos on health related subjects. They will be distributed, free of charge to agencies and organizations for public health education purposes. If your organization would like to receive copies of the releases as they become available, please call us at 1-800-510-2020.



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