Two role models for lifelong exercise

By Dr. Shelly Finn

Throughout history, humans have searched for a Fountain of Youth, waters that could reverse, or at least slow, the aging process. We have spent a great deal of time and money searching for something simple, like a pill or treatment, that would keep us vital and youthful. While progress on aging continues, the closest thing we now have to a Fountain of Youth is not a simple thing like a pill or a procedure, but instead is a habit. That habit is lifelong exercise.

I am impressed by how many of members of our community have remained or become active this past spring and summer, despite the limitations imposed by the COVID-19 pandemic. I see people walking outside, rain or shine, and hiking trail parking lots have been busy. A few people have tried a new activity, like cycling or yoga, at a park or online. A CDC study released early this year listed Washington as the second most active state in the US, behind only by Colorado. As I approach age 60, with an ache in one knee and less flexibility, I decided to approach two friends who are both professional and personal expertise for advice. Dr. Samuel Armstrong, a long-time cardiologist of mine, had an exemplary medical career as both an internist and oncologist. A native of upstate New York, Sam has been active since childhood, playing baseball in both high school and college. A demanding residency and fellowship did not allow for regular exercise for a few years; shortly after his training he joined the US Navy. “When I noticed the humans on my white Navy uniform getting tight, I knew something had to change,” Sam, now 75, told me. He began a regular running program which continues with a few adaptations to this day. While running was a regular individual and family activity, he also sailed, and played tennis and golf.

Local retired cardiologist, Dr. David Stewart, started playing competitive tennis in high school. Dave was one of the first cardiologists to believe that exercise could benefit people who had had heart attacks, both in terms of recovery and prevention of a second heart attack. “When I came to Everett, two of my key goals were to set up a Cardiac Rehab and Prevention Center, which I did with help from Dr. Pat Nolan, and to build an indoor tennis facility. I let my friends do that second one for me,” Dave explained. During their working years, Dave and Sam would meet before work at 5:30AM to start the day with a run. Now they meet several times weekly for tennis or golf. Dave, now 85 years old, competed in local and national tennis tournaments until age 79.

When I asked Drs. Armstrong and Stewart why they were so committed to exercise, their responses were remarkably similar. Both mentioned data showing regular exercise can help prevent heart disease and diabetes. Exercise seems to decrease recurrence risks of breast and other cancers. Both falls and Alzheimer’s dementia is less common in elders who exercise regularly. Moderate to high intensity exercise can help prevent osteoporosis.

Both felt that exercise helped them cope with their high stress jobs. Exercise has also been shown to benefit people with anxiety or depression.

CONTINUED ON PAGE 9

Commentary: AARP calls on candidates to protect 50+ voters

By Cathy MacCaul

AARP Washington Advocacy Director

As voters prepare to cast their ballots in the November Election, AARP is committed to helping protect the economic health of older Americans — their right to vote safely while holding candidates accountable on key issues.

In August, AARP launched Protect Voters 50+, which demands action from politicians to ensure that 50+ Americans — from working parents to family caregivers to seniors in nursing homes — can vote safely. AARP is urging candidates to talk about the issues that matter to 50+ voters — like strengthening Social Security and Medicare and protecting the economic health of older adults.

Strengthen Social Security

WASHINGTON State is home to more than 1.3 million Social Security beneficiaries — 18% of which rely on those funds for 90% or more of their income. As you consider a candidate, here are AARP’s priorities for the Social Security program:

Achieving long-term solvency and security. Social Security should be protected not only for current retirees but for future generations of Americans. Ensuring protections for those most in need. Any reforms should guarantee adequate benefits for those most reliant on Social Security and those who would have trouble postponing retirement. Recognizing the value of Social Security’s core elements. Social Security provides benefits that Americans earn through their working lives, and the program should be financed to ensure long-term adequacy and solvency. Protect and strengthen Medicare: Medicare provides affordable healthcare for all 12.2 million Washingtonians. Handworking Americans pay into the program their entire working lives and are guaranteed benefits that help make health care accessible and affordable. Lowering costs and improving the efficiency and value of health care spending is especially crucial for Medicare, as the number of nationwide enrollees is expected to grow to 60 million by 2030. As you consider a candidate, keep in mind some of AARP’s priorities for the Medicare program:

Maintain affordable benefits that meet the needs of Medicare enrollees. This includes allowing Medicare to negotiate the price of prescription drugs, ensuring affordable premiums and cost-sharing, as well as exploring ways to expand coverage to important services like dental care and hearing aids. Ensure all people with Medicare have access to a choice of high-quality health care providers sufficient to meet their needs. Sustain Medicare for the future by reducing waste, fraud, and abuse and making sure that its resources are spent wisely. Secure the economic health of Americans.

CONTINUED ON PAGE 9

ATTENTION SENIORS AND EMPTY NESTERS

Are you thinking of selling a place you call HOME?

DON’T DO A THING! Until... you’ve read this report: 11 THINGS YOU NEED TO KNOW to Pass a Home Inspection... BEFORE you list your home for sale... not after!

A new report has been prepared which identifies the 11 most common problems, and what you should know about them before you list your home for sale.
Make a note of what you’re thankful for in a Gratitude Journal

By Nancy Brosemer, M.S., C.C. Homage Lead Mental Health Specialist

Today we find ourselves experiencing a wide range of emotions from sadness to anger; from frustration to feeling anxious; from feeling overwhelmed to feeling powerless. All of these emotions are understandable under our present circumstances. Thus, the question arises, “How do we manage or control these vast array of emotions?”

I think this a truly individualistic question and sometimes there is no simple answer. I think in times of crisis or challenge, we might ask ourselves, “What can we do to help us get through each day when dealing with these emotions?”

One thing that has been extremely helpful to me in my life is thinking about all the things I’m grateful for. Gratitude is deliberately focusing on the positive things in your life. You may be grateful for waking up each day or having food in your refrigerator or having a roof over your head, even if it’s not your ideal home. Maybe you are grateful for your television to watch your favorite show or having a radio to listen to your favorite songs. Finding things that you are grateful for on a daily basis can be endless.

Making a gratitude journal can help in identifying those things for which you are grateful. Every day write down today’s date and three things you are grateful for. Even if you are having a difficult day emotionally or physically, still find time to write in your gratitude journal.

During the 4 to 8-week program, a Homage care coordinator engages with participants with complex health needs and their informal supports, if applicable, to set health goals and learn self-management skills. The Care Transition Program assists individuals discharging from acute care facilities with complex needs and their informal supports, if applicable, to set health goals and learn self-management skills.

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By Mary Ann Higgins
Homage Senior Companion Program Coordinator

Homage Senior Companion volunteers, such as Snohomish resident Marilyn Heuser, are using their extra time at home to serve others and improve their own health.

Serving since May 2018, Marilyn now calls her older adult clients weekly for social support instead of the usual in-person visits because of the COVID-19 pandemic. "This opportunity for regular conversation with others is critical for older adults. Loneliness and social isolation can be as damaging to health as smoking 15 cigarettes a day," the problem is particularly acute among seniors, according to a January 2019 Loneliness Epidemic article by the Health Resources and Services Administration. "By reaching out to others, I feel a sense of satisfaction and happiness. Along with my daily exercises, volunteering keeps me healthy," Marilyn said.

Nationally, Senior Corps volunteers such as Senior Companions are healthier because they regularly engage with others through a structured and supportive program. After two years of service in Senior Corps, 84% of older adults reported improved or stable health, according to an independent 2018 report sponsored by the Corporation for National and Community Service (CNCS).

Senior Companions and clients support each other by socializing about their families, interests or hobbies. "When I am on the phone, my clients often ask about my 13 year old cat, Winter, who is usually on my lap and listening to our conversations," Marilyn said. "He seems very interested in the vocal tones, and the clients find his behavior fascinating!"

Homage is recruiting lower income volunteers 55+ throughout Snohomish County; the needs are highest in Bothell, Everett and Monroe. Senior Companions receive small tax-free hourly and mileage reimbursements for their service, funded by a grant from CNCS.

For an application, call Mary Ann Higgins at Homage at 425-879-7605 or go online at: homage.org/health-wellness/senior-companions-program/
Help available for veterans with suicidal thoughts

By Raymond Miller

The coronavirus is taking a deadly toll on our veterans. Veteran suicides have increased during the pandemic despite a multitude of intervention, prevention, and mental health efforts by mental health professionals within the Department of Veterans Affairs.

Under normal circumstances veterans are 1.5 times more likely to die by suicide than Americans who never served in the military. For female veterans, the danger of suicide is even higher.

Female veterans are 2.2 times more likely to commit suicide than their male counterparts. The United States loses 22 veterans and former National Guard and Reservists each day to suicide. If trends stay the same, in the next 5 years there will be an additional 10,000 veterans who died by suicide.

In total the 2020 pandemic related increase in veteran suicides is estimated to be 16,000 deaths. That is in addition to the expected increase of 9,000 veterans died from suicide in 2019. A study by the American Journal of Emergency Medicine has found that there will be an additional 1000 suicides related to the pandemic and the closing of VA facilities to veterans during the pandemic. This has increased veteran isolation and the ability to seek treatment and care. But with limited in-person treatment, it is simply not acceptable to not do more.

The VA must reopen their facilities and provide veterans with the care and treatment that was promised to them when they enlisted in the military and served their country with honor.

If you are a Veteran having thoughts of suicide—or you are concerned about one—free, confidential support is available 24/7. Call the Veterans Crisis Line at 1-800-273-8255 and press 1, text to 838255, or chat online at VeteransCrisisLine.net/Chat.

Veterans Affairs.

The United States loses 22 veterans and former National Guard and Reservists each day to suicide. An estimated 10,000 additional veterans will have taken their own lives, by January 1, 2021. While the data is inconclusive because of increased social isolation and higher veteran unemployment during the pandemic it has been estimated that there will be an additional 1000 veterans expected to die from self-inflicted wounds in 2020. That is in addition to the expected increase from 2019, when more than 9,000 veterans died from suicide.

By Raymond Miller

Over the past decade, many efforts have been directed toward preventing veteran suicide. But with limited progress, it is simply not acceptable to not do more.

The VA must reopen their facilities and provide veterans with the care and treatment that was promised to them when they enlisted in the military and served their country with honor.

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Continued on page 5
RSVP Volunteer Opportunities
By John McAlpine
RSVP Program Recruiter
Other volunteer opportunities at Homage include:

- Advocacy & Outreach: Take a moment to thank our elected officials for their votes and support in securing funding for the Older Americans’ Act, Meals on Wheels, and emergency meals for vulnerable adults.
- Raise Awareness: Help spread the word about Homage and receive the most updated news about our programs, follow us on Facebook and Twitter.

Volunteer at Local Food Banks: Many of you are concerned that our clients have adequate food. Until we can use your skills directly, please consider volunteering with our area food banks. Many of our clients utilize these resources.

Consider giving a gift to the program that has special meaning to you — earmark a donation to the program of your choice at Homage or leave an unspecified gift and we can give it to the program most in need of support.

Write a letter to our troops: Through our connection with Heroes Café we are sending letters of appreciation and support to our troops. Starting in October we will be sponsoring a new troop. Contact Michelle for more details.

See you at our Candidates Forum on Tuesday, September 22, 4-6 pm. Register through our website – www.homage.org.

RSVP exists to help volunteers 55+ find fulfillment in their volunteer work.

Here’s hoping I’m seeing you in September and you have stayed more than 6 feet away from the Covid 19 virus. Not much is new on the recruiting front. That’s my way of saying we will always need volunteers no matter what is going on around us.

Volunteers interested in the economic health of others are sought to assist Habitat for Humanity in their mission. You can also lend a hand to the United Way and AARP Tax Preparation programs and there is a need for volunteers to assist in Disaster Preparedness.

RSVP has areas in the community (Snohomish County) we focus on for recruiting volunteers. This doesn’t mean volunteering in other places is not good, helpful or needed. It’s just that our funders want to see our efforts directed in a certain way. We seek first to help our community partners in Volunteer Services by recruiting Chore and Transportation helpers. We look for foodbank volunteers because that is one area that will NEVER have enough help. I am always on the lookout for people willing to mentor students both in and out of school. The method of delivering education is very different from when we went to school and anyone is capable of helping a second grader, for example. Volunteers interested in economic health of others are sought to assist Habitat for Humanity in their mission. You can also lend a hand to the United Way and AARP Tax Preparation programs and there is a need for volunteers to assist in Disaster Preparedness.

Having said all that I do have a project you might be interested in coming up on Thursday, September 24th. RSVP was contacted by the Friends of Depot Park. Depot Park is on Bond Street in Everett by the old train station. If you are interested in helping spruce up this lovely little pocket park and get it ready for winter, bring your own gloves and hand tools. But first call Linda Klinebaugh at 425-317-9705 and let her know you are coming. It’s a chance to work outside around others and still be 6 feet apart. I hope to see you there.

Keep wearing masks and staying safe. This will not last forever. If you have any questions about RSVP volunteering or any of the agencies you see listed here, call 425-374-6374 or email johnm@ccsww.org.
Got Medicare? Homage’s TakeCare Medicare team is here to help

By Ramonda Sosa
TakeCare Medicare Manager

Medicare can often feel like an alphabet soup, as you learn about Parts A, B, C, D and all the pieces of coverage. TakeCare Medicare is a service of Homage that offers no cost, customer centered, Medicare advice and enrollment. Our team works with beneficiaries beyond open enrollment. The team will also connect you to over 48 years of Homage’s experience and resources for older adults and people with disabilities. The TakeCare Medicare team works with beneficiaries beyond open enrollment. Our team works with beneficiaries throughout the year to provide education, advocacy, resources and overall peace of mind.

The TakeCare Medicare team consists of Ramonda Sosa, Neo Miriano and Kim Wimack. Ramonda has been employed in Homage’s social services program for 17 years. She understands needs for older adults go far beyond their Medicare coverage. Neo was formally an Aging and Disability Resource Specialist at Homage. She connected callers to resources and long-term services and supports. Neo is excited to work with beneficiaries to connect them to their best Medicare plan. Kim is new to Homage and has previous experience at the innovative Iora clinic. Iora Clinic provides patient centered treatment models for the healthcare. Kim understands the social impacts on health and that good health coverage leads to good health.

The TakeCare Medicare team is eager to advise and complete your enrollment! The team is currently taking appointments for open enrollment. Call us today at 425-513-1980 or visit our website at www.homage.org/takecare-medicare.

By Richard Hanks
President, President

B y mid-April 1918 there was a heightened level of concern among medical officers at Camp Dodge, Iowa. Soldiers at this central training facility were dying of grippe at an even alarming rate and so few knew what caused the fear. Fifteen soldiers had died in less than a week of pneumonia prompting an investigation. The fatality rate was 30 percent for those soldiers affected. Although reports existed of influenza throughout the Midwest by December of 1917, staff at Camp Dodge thought the more likely cause of their problem was the rigorous drill duty of the troops while being exposed to the thick dust clouds that swirled through the encampment. Camp Dodge was a central post for the training of army troops heading for the war in France — both African American and Anglo. Before the year was over the demand for nurses became imperative. Seven of them would die at Camp Dodge, including a 28-year-old Red Cross nurse from Salem, Washington.

Born on August 26, 1890, Emma Josephine Thorsen grew up on a dairy farm. Her Norwegian father, Folsom, came to the United States in 1886 when he found work in the mines of Michigan and Colorado and finally

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• Stage (both inside and outside of the home for an optimal sale price)
• Sell (create a market analysis for selling price and broker the visit)

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Dodge came at the height of her assignment to Camp Cody, but we do know that don't know why Emma and their siblings were sent to Camp Dodge. School was a four mile walk through hollows and hills to nearby Bryant and later to the Idaho schools. Emma worked as a nurse in Everett while studying to become a nurse at Providence Hospital. She remembered. Nearly 14,000 personnel were hospitalized for influenza at the Iowa facility "had one of the worst incidents among Army camps" for infections and deaths. Thoren, Red Cross nurse Robb and the other nurses were part of an additional 400 nurses who were sent to Camp Dodge to help with the outbreak, working 12 to 14-hour days. Robb wrote of the difficult time. The nurses worked in hallways and wards crowded with the ill and dying without protective clothing, adequate procedures or any medications or vaccines. According to one group of researchers, "in spite of the influenza epidemic — like a storm, one writer remembered. Nearly 14,000 personnel were hospitalized for influenza at the Iowa camp which prepared men for combat overseas. According to science historians Carol Booth O’Leary the Iowa facility "had one of the worst incidents among Army camps" for infections and deaths. Thoren, Red Cross nurse Robb and the other nurses were part of an additional 400 nurses who were sent to Camp Dodge to help with the outbreak, working 12 to 14-hour days. Robb wrote of the difficult time. The nurses worked in hallways and wards crowded with the ill and dying without protective clothing, adequate procedures or any medications or vaccines. According to one group of researchers, "in spite of the influenza epidemic — like a storm, one writer remembered. Nearly 14,000 personnel were hospitalized for influenza at the Iowa facility "had one of the worst incidents among Army camps" for infections and deaths. Thoren, Red Cross nurse Robb and the other nurses were part of an additional 400 nurses who were sent to Camp Dodge to help with the outbreak, working 12 to 14-hour days. Robb wrote of the difficult time. The nurses worked in hallways and wards crowded with the ill and dying without protective clothing, adequate procedures or any medications or vaccines. According to one group of researchers, "in spite of the influenza epidemic — like a storm, one writer remembered. Nearly 14,000 personnel were hospitalized for influenza at the Iowa facility "had one of the worst incidents among Army camps" for infections and deaths. Thoren, Red Cross nurse Robb and the other nurses were part of an additional 400 nurses who were sent to Camp Dodge to help with the outbreak, working 12 to 14-hour days. Robb wrote of the difficult time. The nurses worked in hallways and wards crowded with the ill and dying without protective clothing, adequate procedures or any medications or vaccines. According to one group of researchers, "in spite of the influenza epidemic — like a storm, one writer remembered. Nearly 14,000 personnel were hospitalized for influenza at the Iowa facility "had one of the worst incidents among Army camps" for infections and deaths.
Continued from previous page for the rigors of army life were being wounded out and discharged. Deaths from the flu were reported daily, and in May a time for 5 p.m. occurred with the area’s surgeon general proclaiming that general health conditions in the camps were “very good.” However, reports indicated the problem was “rapidly diminishing” from 1,212 deaths in April to only 55 in May of 1918.

Outbreaks continued throughout the summer. In July and August with the disease reportedly dipping in 1918. This faceless enemy, which had never really left, came back with a vengeance by September 28th. The next day a small paragraph in the Evening Times announced “Camp Dodge Infected” by influenza and a quarantine was expected. But the article only made it to page eight of the paper. On the same page, along with stories of stock market prices, an article warned that the flu was expected to “grip half of Nation,” but the story downplayed the risk. While as much as 40% of the population could be infected, the vast number of people were expected to recover according to officials.

Over six thousand soldiers were ill in the first week of October at Camp Dodge. Camp Dodge’s medical services. The Iowa Historical Society Archives. For more information, please call as well.

Robb remembered that the infirmity of the victims were black; three to one according to a study published in 1919 by the assistant camp epidemiologist. No evidence could be found, however, that the deaths from pneumonia at Camp Dodge in the spring of 1919 were included in the final tally of influenza deaths. Of the seven nurses listed as dying during the epidemic at Camp Dodge, Everett resident Mayme Dennis died October 24th. Following a month later on November 26th by Emma J. Thoren of Sloan Iowa. The Red Cross history noted that “Red Cross nurses and nurses not enrolled, nurses available for service later on as well. Those who would never be eligible for permanent enrollment, passed their boards and proceeded like soldiers to the camps.”

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Role models CONTINUED FROM PAGE 1 depression.

Both noted the social benefits of exercise, getting together periodically with friends or family and doing something active. They also noted that time alone running was peaceful and helped them recharge. I asked them how they have been able to stay active as they have gotten older. I found their advice invaluable.

Find something you enjoy. For some, that may be walking or running alone, for others it may be a team sport that provide social connections or competition. Some people may dance or yoga.

Be ready and willing to adopt your activities if physical changes occur. While Dr. Armstrong has completed many marathons, he now runs or walks 2-4 miles several days weekly. He gives himself a rest day here and there, and he does daily stretching. Both Drs. Armstrong and Stewart do balance training at home. They recommend using low level weights or elastic exercise bands to help maintain or build strength.

Consider joining a journal of activity. Joining your exercise routine can help set and maintain fitness goals.

If possible, find a friend or family member willing to exercise with you. Being accountable to someone else can help with commitment.

Stay safe. Hopefully our air quality will improve and good weather will continue for several more weeks.

There are many free websites and videos that can help you exercise from your home if needed. Of course, the need for wheelchair or walkers is limiting, but The National Center on Health, Physical Activity and Disability offers a free 14 week personalized physical activity and nutrition program to individuals with mobility limitations. https://www.aapad.org/14weeks/index.php. Another great resource is the AARP’s website: https://www.aarp.org/health/healthy-living/info-2019/get-moving.html

Thanks to Drs. Armstrong and Stewart for sharing their experience with us, and thanks to retired Everett Herald photographer, Beth Armstrong, for her photos!

Comment

CONTINUED FROM PAGE 1

50+ In 2019, work- ers over 50 made up nearly a third (31.7%) of Washington’s workforce. Sadly, the unemployment rate for older workers this year reached the highest on record since the federal government began tracking it in 1948. The COVID-19 pandemic is making it even more difficult for Americans 50+ plus to keep and find jobs. That’s why AARP is demanding action from our elected officials to protect the health and financial security of workers 50+.

AARP would like candidates to address the economic impact of the coronavirus pandemic.

Congress should extend emergency unemployment benefits, including additional categories of eligibility and additional benefits amounts, until the pandemic and its economic effects end.

State and federal lawmakers should provide additional support, including tax credits, to caregivers — $28,800 here in Washington — many of whom are spending more time caring for family members because of the pandemic.

Ensure that employers do not discriminate against older workers in hiring them back after the pandemic. For more than 60 years, AARP has been the champion of the 50+. Join us in calling on every candidate to Protect Voters 50+ — visit aarp.org/elec- tion2020 today! Do not stop there, share the website with your friends and family to get them involved as well and help or support them to vote even further.

Together, we can make the future of the 50+ the voter heard!
Learn how Medicare Advantage can save you 30–40% on health care costs.¹

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*A licensed insurance agent
¹ According to UHG Medicare Advantage Cost Savings Report 2020