Think COVID-19’s tough? Things were way worse a century ago

Mental Health Awareness Month: Finding ways to stay connected

By Adam Worcester
Contributing Writer

A year into the COVID-19 pandemic Jane* was getting restless. So she answered an ad in the Everett Herald for Homage virtual support services.

“It ended up being wonderful. We had great conversations; we’d learn things from one another,” she said.

Next came a writing group. Then another group. Then another.

She soon befriended a Zoom classmate, whom she hopes to meet in person.

“One day I got started, I got hooked,” Jane said. “Homage is doing a fabulous job of connecting seniors during this Zoom period. The opportunity they are putting out there is valuable.”

Homage offers four free programs to help older adults having a tough time during the pandemic.

The Older Adult Mental Health Access phone line provides information and support to older adults and their caregivers seeking mental health treatment, chemical dependency providers, and support groups.

The Depression Screening Program provides outreach, screening and early intervention to older adults concerned about depression.

A Peer Counseling Program links older adults with volunteers who provide one-on-one emotional support.

And a new COVID-Connect Program supports people of any age whose emotional or physical well-being is suffering in the pandemic.

“We do a lot of advocacy work,” said Christine Vervitsiotis, manager of the Homage Mental Health and Wellness Programs Manager, who counsels clients online.

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When care is needed, what are my choices?

By Gayle Alkire
MSN, RN, CRNN, CCM

As we age, chances are at some point we will need assistance—either to help us get stronger after an illness or accident, or when we are no longer able to perform tasks of daily living by ourselves. Many levels of care and forms of assistance are available. This article will help you understand the categories and characteristics of care facilities and in-home care.

A Skilled Nursing Facility, or SNF, is an option available after an illness or accident that requires hospitalization. SNFs are commonly referred to as Nursing Homes and are independent facilities from the hospital. SNFs provide rehabilitation to return a person back to their baseline function. They provide physical therapy to increase one’s mobility and safety, occupational therapy to improve capacity to dress and groom oneself, and speech therapy for those that have speaking or swallowing difficulties. SNFs can provide wound care and give IV antibiotics. They are staffed by Registered Nurses, Certified Nursing Assistants, Physical Therapists, Occupational Therapists, and Speech Pathologists. On an intermittent basis, residents are seen by the facility’s medical doctor. Medicare and most other medical insurance will pay for a SNF if the patient has a need that requires skilled professionals for care. The length of stay at a SNF for rehabilitation is short term. Another temporary option for those recovering from an acute illness or accident is an Inpatient Rehabilitation Facility. This type of facility differs from a SNF by providing more intensive physical therapy, occupational therapy, and speech therapy. Insurance requires that the patient must need and tolerate therapy for 3 hours per day. Many Inpatient Rehabilitation Units are connected to a hospital.

Home Health care is an option for someone who is safe to leave home, and has a skilled medical need, then they would qualify for Home Health care. This includes Registered Nursing, Physical Therapy, Occupational Therapy, Speech Therapy, and medical Social Work.

Home Health services are covered by Medicare and many other insurances. The Home Health care physician must sign an order and certify that the service is medically necessary.

We do a lot of advocacy work,” said Christine Vervitsiotis, manager of the Homage Mental Health and Wellness Programs Manager, who counsels clients online.

CONTINUED ON PAGE 7

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.

This report is courtesy of Authority Real Estate.

GET YOUR FREE COPY TODAY! 800-344-0807 ext 3159

*Not intended to solicit properties currently for sale.
By Sarri Gilman

Psychotherapist Author

I am writing about mental health in 2021, as we receive vaccines, mask removals, fear safer from the deadly virus. But we don’t have a vaccine for many of the other issues we are facing. As a mental health therapist, I see how the loss of loved ones to the virus, political division, racism, climate change, difficulty for businesses to remain staffed, to remain housed, a cost of housing, a year of being isolated, the fear of the virus, school closures, and a growing number of people living in tents. It is a lot to face.

If you have had a rough time this past year, I hope that some of your coping skills have not frayed and worn thin, that is a normal response to these times. You probably noticed emotional shifts and physically presence of stress.

The entire environment around you became more stressful in the last year. Let’s call the environment just that, an environment as there were so many big things move into our bubble. We are not used to having so much move our bubble at once and many of these things have been threatening those we love. When you are on alert for a long time, you get physical symptoms. Your mental health moves into your body. Any extra time may be too much, your head pounds, your stomach hurts, you get acid reflux, your back goes out. Your body hurts when there is too much in your bubble.

When you get physical symptoms, it is a sign that you need to do more serenity to help you cope. You should also get any physical symptoms checked out with your physician. When your body is stressed, you want to remind you that there are many things that have to be handled.

Coping skills can get worn out. Inside your bubble, there is a lot to feel. To try to accept whatever you are feeling rather than think you are broken and need to change your feelings. What helps is to accept your feelings and your coping skills.

Here are some things I did to help me cope with all of the feelings I experienced: I took a pandemic poetry class, started doing yoga in the morning, got announcements from my naturalpath, bought a weighted vest to swim in Puget Sound, started a garden, planted a small botanical watercolor (never painted before), and went to therapy. Yes, therapists go to therapy. I am sharing this to encourage you to do more serenity.

If you are getting physical symptoms from stress, try these things. Journal about your feelings, go to counseling, walk outside, read a novel, do art, talk with a friend, cook a healthy meal, join a group for support, write a letter to a friend, sit with a pet in your lap, listen to soothing music, go somewhere different, take an easy hike, meditate, change your diet, take up yoga. It is restorative and helps you release tension in your body. Now is a good time to try new things to help you cope.

Sarri Gilman (Photo by Somer Kreisman)

VOLUNTEER OPPORTUNITIES AT HOMAGE

By Michelle Frye

Homage Volunteer Manager

Intergenerational programs with Eastlake High Schools: Eastlake: Hallie Miura. Eastlake STEM High School in Redmond still want to connect older adults to fun events and activities during the pandemic. Please consider joining us for: Team on June 16. Please call for more details.

On-going opportunities for volunteers in the following programs, adapted to volunteer opportunities until Covid restrictions are lifted:

- Foster Grand Parent Program in Snohomish & King Counties: Older adults provide children with special needs one-on-one support at community locations such as schools and day programs. Volunteers must be 55+. A small stipend for those who meet income guidelines.
- Senior Companion Program in Snohomish & King Counties: Helps seniors stay in their homes by providing socialization, transportation, light housekeeping and support organization thru weekly visits. Must be 55+ and meet income guidelines.
- Senior Peer Counselor: Volunteers 55+ provide one-on-one counseling for adults 60 and older who are struggling with life changes, loss, or emotional issues. No training is needed, just the willingness to help. The seven stages can be handled, and home repairs are necessary. The entire environment is affecting mental health.
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Other Volunteer Opportunities:
- Advocacy: Join the Advocacy Team on June 16. Take moment to thank our elected officials for their support in securing funding for the Older American’s Act, Meals on Wheels, and emergency meals for vulnera-ble adults. Raise Awareness — help spread the word about Homage and receive the most updated news about our programs by signing up on Facebook and Twitter.
- Volunteer at Local Food Bank: Many of you are concerned that our clients have adequate food. Until you can use a food bank directly, please consider volunteering with our area food banks to ensure their clients utilize these resources.

Snohomish County Long-Term Care: Here, volunteers help us cope. When your body is stressed, your mental health moves to help us cope. Yes, therapists go to therapy. I am sharing this to encourage you to do more serenity.

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Sarri Gilman, LMFT is a psychotherapist in Whitefish Island. She is the author of Transform Your Mindset and Taming Overwhelm, and The Mystery of Knowing Ourselves.
Legislation session ends with victories and roadblocks

By Cathy MacCaul

Undaunted by COVID-19 and the challenges it created, our elected officials spent this 90-day legislative session weighing the pros and cons of bills in a virtual environment. Even though this was a highly unusual period in Olympia politics for the legislature and advocates, AARP Washington persisted and secured victories that increase consumer protections, improve healthcare, and promote financial resiliency.

Some priority legislation ran into roadblocks in the House and Senate but were transformed into emergency orders like ending the use of credit scores to determine insurance premiums, securing budget requests to ease our housing crisis and expanding technology access for older adults. Legislators did reach across the aisle to pass a few standout bills that penalize price gouging during emergencies, improve the well-being of long-term care residents, and expand access to the Washington Care Fund.

Price gouging: As the state was caught in the throes of the pandemic, scam artists were preying on fears and scarcity by selling products and services needed during emergencies. It also limits price increases to 15 percent of the original cost.

Food insecurity: Food insecurity is defined (I'm paraphrasing) as being concerned you will run out of money and can't buy more food before your next paycheck. Having to reduce your demand of a growing older population, and affordability remains a significant issue. Seventy percent of Washingtonians 65 and older will require some assistance to live independently as they age.

In 2019, Washington passed legislation to create an innovative new public program to help Washingtonians better prepare for a long-term illness, injury or disability. Workers will fund the Washington Care program through a small payroll premium of $9.98 on $100 earned, providing a benefit of up to $36,500 to help people live independently. House Bill 1323, sponsored by Representative Steve Tharinger (D-Port Angeles), expands coverage to include tribal employers, people who acquired a disability before the age of 18, and the self-employed who are the power of the new “gig economy.” It also has a provision that allows current long-term care policyholders to opt out of the pay-roll premium.

While we embrace the positive outcomes of several bills, we will continue to work alongside our legislators in a bipartisan way to advance legislation that helps older Washingtonians. Competing priorities and political disagreements impede progress on several issues. Our elected officials need to put their differences aside and find common ground to address the needs of all generations.

Cathy MacCaul
RSVP Volunteer Recruiter

By John McAlpine

OPPORTUNITIES

RSVP Volunteer

RSVP exists to help volunteers 55+ find fulfillment in their volunteer work. Volunteer opportunities exist all over Snohomish County. To find fulfillment in their volunteer work, volunteers can buy more. Reducing meals portions, or skip meals, because of the food/money that the bees have done their thing, we also end up with food. That is my way of introducing the idea of volunteering for a food bank.

I have mentioned plenty of times in this column about the studies regarding food insecurity and the seasonal awareness of most people about food banks.

Food insecurity is defined (I’m paraphrasing) as being concerned you will run out of money and can’t buy more food before your next paycheck. Having to reduce your demand of a growing older population, and affordability remains a significant issue. Seventy percent of Washingtonians 65 and older will require some assistance to live independently as they age.

CONTINUED ON PAGE 6

Passionate about making a difference? We need YOU to share your experience and skills to help meet critical community needs!

As spring is now full gear, besides seeing that the Ospreys have returned and days getting longer, there are more flowers sprouting up and trees are budding. With all this plant growth comes pollen. Pollen brings allergies to some and gives days getting longer, there are more flowers sprouting up and trees are budding. With all this plant growth comes pollen. Pollen brings allergies to some and gives

Cathy MacCaul
RSVP Program Recruiter
Carrying on the Memorial Day tradition

By Kim Womack
WeCare Medicare Advisor

Unlike Veterans’ Day that celebrates those who have served or Armed Forces Day that honors those who are currently in service, Memorial Day is the one day a year that the United States has set aside for the purpose of honoring the men and women who have died while in service to our country.

In my search on origins and traditions of Memorial Day I found that there are at least 25 claims to the origin of this holiday. One stating the holiday began in 1868, by Union Veterans to honor those who died in the Civil War and was originally known as Decoration Day. This day was set aside to decorate fallen soldiers’ graves with flowers. However, the practice of decorating soldiers’ graves with flowers is an ancient custom; American soldiers’ graves were decorated before and after the Civil War. In 1971, Memorial Day was established as a federal holiday, taking the place of Decoration Day. Our country has reserved the last Monday in May annually for this holiday.

Several traditions have been established and carried out these past 153 years to commemorate the fallen. At 3 p.m. on Memorial Day is set aside for a moment of remembrance. In that hour, Amtrak conductors sound one long whistle in honor of those who have died in service. In 1868, Congressman James Garfield said, “If silence is ever golden, it must be here beside the graves of fifteen thousand men, whose lives were more significant than speech, and whose death was a poem, the music of which can never be sung.”

The US Flag Code specifies how the American flag is displayed on Memorial Day. The flag is hoisted to the top at sunrise, then lowered to half-staff until noon, and then returned to the top of the staff.

Poppies have become the symbol of Memorial Day from a poem by John McCrae (1872-1918) titled, “In Flanders Fields,” its first verse reads:

In Flanders fields the poppies blow,
Between the crosses, row on row,
Scarce heard amid the guns below.

The larks, still bravely singing, fly
Over the titles of the men who died
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John McCrae (1872-1918) titled, “In Flanders Fields;” it’s first verse reads:

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Florida seniors isolated by pandemic find a virtual connection

By Bailey LeFever
Tampa Bay Times

The 70-year-old began putting in place for the pandemic, said Ann Marie Herlache, the program’s executive director.

"It’s kind of like Zoom, it’s not exactly that," she said. "But it’s something we’ve been thinking about for a while, and when COVID is hopelessly an issue, it was an issue during the pandemic, it will continue to be an issue after the pandemic."

"The program’s server is secure, and there are no commercials or ads shown on the platform,” Winter said. The agency is also working with the Senior Directors Guild and Education Services of Clearwater to bring two performances to the platform — Defy-

ing Gravity, which focuses on preventing falls, and Phoeny Bal-

ney, where the topic is scams. In addition, the agency plans to use the platform for its own programming. It’s something we’ve been thinking about for some time," Winter said.

"It took a while to find a platform that was specifically geared to seniors and had an interactive portion to it." So far, 109 clients have signed up, said Peggy Herlache, the program’s manager. At the end of January, the agency began offering 170 funded spots. A monthly membership and setup of the box at the client’s home are included.

Many seniors will likely prefer in-person services, but there’s continued interest in virtual programming, said Jeff Johnson, state director for AARP. The organization has had thousands of seniors participate in virtual town halls and other virtual events over the course of the pandemic.

"I think there are people who have always wanted this as an option," he said. "And certainly there are people who don’t have other options right now."

"The pandemic has forced some to acclimate to Zoom, FaceTime and other forms of communication, Johnson said. And now, taking online classes might feel less daunting for some seniors.

"My sense is that a lot of seniors are still very cautious about doing anything in public and there’s still obviously a need to connect," he said. "There’s a need to keep your mind and body active to keep moving and growing."
CONTINUED FROM PAGE 2

a Snohomish County Certified Ombuds, you will advocate for residents in licensed long-term care settings such as nursing homes, adult family homes and assisted living facilities. You will be trained to receive complaints and resolve problems in situations involving quality of care, transfer and discharge, abuse and other aspects of resident dignity and rights. You will work to ensure that residents in these facilities receive good quality of life and care by providing information about their rights, working to resolve problems on behalf of residents, monitoring the enforcement of the laws by DSHS, and advocating for improvements in the long-term care system. An online training program (36 hours) will be provided to prepare you for this amazing work (additional training will be offered). There are opportu-

nities for in-person as well as virtual advocacy following all current, state-mandated guidelines. Please contact Heidi L’Esperance, Snohomish County Regional Ombuds at hle@mschelps.org or 360-603-8889.

Consider giving a gift to the program that has special mean-
ing to you. earmark a donation to the program of your choice at Homage or leave it as unspec-
fied 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. We just received word of a new connec-
tion. Please call for details.

For more information about volunteer opportunities please call Michelle Frye at 425-740-
3787 or mfrye@homage.org.

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www.snohd.org/covidvaccine

Homage is an organization with a solid history and a growing future. We offer you the opportunity to work to your full potential while making a difference in the community. We encourage you to explore the employment positions we have available, and the opportunity to become a part of our dynamic and professional organization. Please visit our website at www.homage.org to apply

- Aging & Disability Resource Specialist - Chinese Outreach
- Aging & Disability Resource Specialist - Korean Outreach
- Black Community Outreach/Aging & Disability Resource Network Specialist
- Case Manager, MAC/TSOA
- Diversity, Equity, and Inclusion Manager
- Mental Health and Wellness Programs Manager
- Minor Home Repair Program Assistant

Homage is an Equal Opportunity Employer committed to being fair and inclusive in our hiring and advancement practices.
Health practitioners typically make 1-3 visits per week for hourly sessions.

For those needing assistance with activities of daily living but still able to be mainly independent, an Assisted Living Facility may be a good choice. These types of facilities usually provide prepared meals, housekeeping, and laundry services. Each resident has their own apartment and needs to be safe when left alone. Assisted Living Facilities can provide assist with dressing, medications, and bathing if needed. Medical insurance usually does not cover housing costs at an Assisted Living Facility, and the rate will depend on how much assistance is required. Some facilities will accept Medicaid as payment, but only after a resident has exhausted their private funds paying for rent over a year or two.

Memory Care facilities provide care for those with Alzheimer’s disease and other types of dementia. These facilities are structured for those with severe memory impairment or dementia and are usually locked facilities to prevent residents from wandering off. Assistance with activities of daily living is provided. Medical insurance usually does not cover the cost of this type of facility; however, a rare Memory Care facility may be a good option. These types of facilities usually provide prepared meals, housekeeping, and laundry services. Each resident has their own apartment and needs to be safe when left alone. Assisted Living Facilities can provide assist with dressing, medications, and bathing if needed. Medical insurance usually does not cover housing costs at an Assisted Living Facility, and the rate will depend on how much assistance is required. Some facilities will accept Medicaid as payment, but only after a resident has exhausted their private funds paying for rent over a year or two.

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Thankful for changes in healthcare

By Louise Lindgren

Are you breathing a sigh of relief now that you’ve received your Covid-19 vaccination? I am, too. And, I’m really looking forward to breaking out of our husband-wife bubble and seeing my grandchildren more safely, without masks. Absorbing the pain of this year has been tough, but looking back at a book I purchased in 1989, sponsored for our State Centennial by the American Medical Association, has helped me put our current troubles into perspective. It’s called “Saddlesongs to Scanners” and is available at the Everett Public Library’s Northwest Room (second floor, corner of Hoyt and California).

According to that book nurses in training in the 1930s and ’40s could expect to care for children dying of polio, workers decimated by smallpox, and patients hit with the bubonic plague, brought by ship from San Francisco, and two years later, a typhoid epidemic, because the Alaska, Yukon and Pacific Exposition of 1909 chose to pipe its drinking water from Lake Washington. Of course, there was also the 1918 flu epidemic that had everyone walking around with masks on, just as we have in the past year!

Ms. Rockafellar joined numerous writers in producing essays covering topics such as medical insurance, research and treatments, wartime hospital and field care, and medical politics. (They would have been amazed at how politics affected peoples’ perceptions of medical practice in the past year!) In particular, she concentrated on finding old records of this area to come up with stories such as the one about Salem Woods, who homesteaded north of Monroe.

It seems Salem was chopping wood one day and missed the block, slicing the ax blade deep into his leg. Normally such a wound, far from any medical help, would have carried a death sentence. He passed out, but fortunately for the unconscious man a woman who was a member of the Snohomish Tribe happened by and treated him with natural and
herbal remedies so successfully that he was able to walk out of the area within a month. If Mr. Woods had a physician he might have paid him with lumber or chickens instead of dollars. Such was often the case in the early days. One doctor, L.L. Stephens of Monroe, was able to build a hospital there in 1903 because a grateful mill owner paid his fee in fine lumber.

Hospitals were few and far between in transitory days with most organized as charitable institutions. The Sisters of Providence were well known throughout the state for setting up hospitals funded by “begging trips.” The need for pre-paid medical care was obvious too, and by 1886 the Sisters regularly sold dollar-per-month “hospital tickets” to loggers who reasonably could expect to need care in the future.

Hospitals and even logging camps would often contract with doctors to care for groups of patients, and sometimes individual doctors would set up systems of paying other doctors for contract work. An extreme example was one physician who had 196 others under one physician who paid him with tickets “to loggers who sometimes indifferent to cures for setting up hospitals funded by “begging trips.” The need for pre-paid medical care was obvious too, and by 1886 the Sisters regularly sold dollar-per-month “hospital tickets” to loggers who reasonably could expect to need care in the future.

Hospitals and even logging camps would often contract with doctors to care for groups of patients, and sometimes individual doctors would set up systems of paying other doctors for contract work. An extreme example was one physician who had 196 others under contract with him. Absuses of the contract system particularly led to the formation of county medical associations, which then spawned the Blue Shield insurance plans.

Thank goodness for that insurance. Who would have known that costs could rise so quickly? Bills from Providence Hospital in Everett show changes in 1921 for a week’s care at $18 plus medicine dispensed at $1.15 and a lab cost of $1 ($362 today). By 1943 the cost for a week’s stay had risen to $42 ($648 today), but the procedure of spinal puncture for one patient cost only $2 with X-rays adding another $7.50 ($146.65 today). Care to compare those figures with today’s complex insurance and Medicare payments?

How times change. It was undoubtedly inconceivable to the new nurses celebrating their graduation from Providence Hospital that the future would produce the pancreas of penicillin or that smallpox would be declared eradicated in 1980 by the World Health Organization.

In our museum’s pharmacy exhibit in Index we have an empty jug labeled “Microbe Killer,” advertised in 1892 as capable of curing all diseases.

Every time I read old medical books using too much opium or quack medicines back then. Last year it seemed inexcusable that a vaccine for Covid-19 would not only be developed but taken by enough people this spring to enable vaccinated people to shed our masks.

In our museum’s pharmacy exhibit in Index we have an empty jug labeled “Microbe Killer,” advertised in 1892 as capable of curing all diseases. Most quack medicines back then at least offered a more limited list, often including cancer. We also have books such as The People’s Common Sense Medical Advisor of 1909 that recommends Dower’s Powder, which contains opium for treatment of cold and fever. I even found an 1890s cartoon illustration that warns against using too much opium to keep a teething baby quiet.

Every time I read old medical books and pharmacy bottle labels I’m shocked and in awe of how many people survived in spite of bad advice and treatment. We’ve seen huge improvement since those bad old days, and the discoveries seem to come faster and faster.

So, in spite of rising medical costs and the complexities of the development process for new vaccines and insurance, either government sponsored or private, to cover seemingly outrageous costs, I’m thankful that the science of medical advancement has progressed so far since I was born in 1943.
Health and Wellness Program. “Our main goal is to help people access mental health and chemical dependency services.”

Demand for those services has skyrocketed in 2021, Vervitsiotis said. At first older people were reluctant to ask for help. “Now we’re a year in and people are really, really struggling,” she noted.

In the first quarter of 2020, Homage averaged 84 phone contacts a month through its access line, which Vervitsiotis called “the front door” to other programs. In the first quarter of 2021 it averaged 114.

“It’s definitely been a challenge to help people access therapy, because so many people need therapy right now,” said Leah Knopf, a Homage mental health specialist who answers intake calls. “We’re a year in and people are really, really struggling, “ she noted. “We’re trying to de-stigmatize it, to normalize emotional wellness as part of someone’s health.”

Even without the pressures of COVID-19, older adults face mental health hurdles adjusting to their sunset years.

“It’s not always easy when you’re retired,” Jane said. “You can’t just go to the water cooler and jibber jabber with people.”

For More Information: Please contact our Elder Abuse Advocates at: Michelle Burke at 425.678.8862 or email: mburke@homage.org

Gloria Nichols at 425.967.5294 or email: g Nichols@homage.org

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Homage understands the needs of seniors,” said Rose Johnson, 83. “And now with the senior centers not being open, we are at a higher risk for problems.”

Johnson is enrolled in a Zoom writing class. “I can stay at home and see and hear others and learn new skills.”

If you’re an older adult feeling bored, sad, restless, or overwhelmed, Knopf hopes you will pick up the phone. “I just want to encourage people to call us, and see if there’s a program that’s a good fit for them,” she said.

“It’s scary, but they should just feel it out. People’s emotional health is worth it.”

Call 425-290-1260 to get connected with a Homage program. There are no income requirements.

• a pseudonym

CONTINUED FROM PAGE 1

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— Leah Knopf, Homage mental health specialist

The Homage Senior Services, in collaboration with Homage Senior Services, bring to the community a brand new program:

Domestic Violence Services of Snohomish County, in collaboration with Homage Senior Services, bring to the community a brand new program:

Elder Abuse Advocacy

As Elder Abuse Advocates we help our elderly - 60 years and older and the vulnerable adult population - navigate abusive situations. We help them focus on their safety and well-being through the Domestic Violence Service programs of legal advocacy, support groups, shelter, and in our partnership with Homage and other community resources.

What is Elder Abuse?

• Physical abuse: Use of force to threaten or physically injure an older person
• Psychological/Emotional abuse: Verbal attacks, threats, rejection, isolation, or belittling acts that cause or could cause the abused person to believe they are in danger
• Sexual abuse: Sexual contact that is forced, tricked, threatened, or otherwise coerced upon an older person
• Financial abuse: Theft, fraud, misuse or neglect of authority, and use of undue influence as a lever to gain control over an older person’s money or property

As Elder Abuse Advocates we can:

• Connect you with appropriate community resources
• Provide you with information about elder abuse

For More Information: Please contact our Elder Abuse Advocates at:

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