



Resourceful Thinking

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VETERAN'S AID & ATTENDANCE PROGRAM; SCAMS

VA PROGRAM MIGHT BE HELPFUL TO VETERANS & SURVIVING SPOUSES

The Veteran's Administration offers a program that could help veterans or their surviving spouses with in-home assistance or other care option costs. Many veterans and surviving spouses are unaware of the Veteran's Aid & Attendance program which may be a resource for those who qualify.

The Veteran must have been active for 90 days on active duty with at least one day during wartime, and during the following wartimes. They need not have served in a combat zone or out of the country.

- World War II (12/7/1941 - 12/31/1946)
- Korean conflict (06/27/1950 – 01/31/1955)
- Vietnam era (02/28/1961 – 05/07/1975 for Veterans who served in the Republic of Vietnam during that period; if not, 08/05/1964 – 05/07/1975)
- Gulf War (08/02/1990 – present)

There are other qualifying criteria that include (but are not limited to) medical and financial guidelines. Transfers of assets are not permitted to qualify for benefits.

For more information, go to https://www.benefits.va.gov/pension/aid_attendance_housebound.asp, or contact your local VA office.

SCAMS!

I've written about scams in previous issues of Resourceful Thinking but these efforts to steal are so prevalent that the information bears repeating!

We received a message on our answering machine at home telling us that our "Social Security Number is going to be being

suspend (sic) for committing some fraudulent and suspicious activity in the state of Texas". We were instructed to call a number with the area code 202 to find out more information and to resolve it. This is yet another in a long list of scams seeking to steal our identities or separate us from our money. Social Security will not suspend your Social Security number nor will they make a call of this nature. (AARP and Forbes have both written about this scam.)

We are entering the income tax season, also. Beware of scam calls, telling you that you owe the IRS money. If you think you owe the IRS, call them.

Two other scams that readers need to be aware of are the Grandparent Scam and the Sweetheart Scam. With the Grandparent Scam, you receive a call from a "grandchild in trouble" and they need money. Two measures for this scam: set a code word with your grandchildren, and ask the caller to give you the code word. And, quite simply, call your grandchild and see if they are OK.

Another popular scam is the Sweetheart Scam. The Sweetheart Scam is one of the most widely utilized modes of preying upon a victim for financial gain. It's a scheme that can be perpetrated online or in person. The scammer convinces their victim that they are in love and uses these emotions to bilk money from the unsuspecting person—oftentimes a lonely senior.

These are not the only scams out there. There are scams about "fixing" your computer, scams about your electricity being shut off, scams about construction repairs (especially after natural disasters), scams – scams – scams! There is no end to the efforts! Several of these scams are listed on the Federal Trade Commission's web page:

<https://www.consumer.ftc.gov/features/scam-alerts>

For any suspicious calls: Don't answer the phone and if you do – hang up immediately. Do not engage in conversation. Do not "Press 1" to talk to a representative. Do not call the number they give. Do not send I Tune cards or Wal-Mart cards. Scammers often "spoof" numbers so it looks like you're getting a call from Social Security, the IRS or a family member. Some even "spoof" YOUR number! Hang up! Do not talk to these people! Protect yourself!

If you suspect you have been scammed, call your state's Attorney General's office, and make a report to your local police.

DO YOU KNOW ABOUT THE 'CARE' ACT?

Many consumers are unaware of the existence of the CARE (Caregiver Advise, Record, Enable) Act. The CARE Act provides support for family caregivers when their loved ones go into the hospital. The legislation, enacted during the 2015 West Virginia Legislature, requires upon hospitalization that health care facilities:

- Record the name of family caregivers on the medical record of a loved one;
- Inform the family caregiver when their loved one is to be discharged back home; and,
- Give the family caregiver education and instruction of the medical tasks, such as medication management, injections, wound care and transfers, they will need to perform at home.

Several states have enacted the CARE act to help caregivers of older parents, spouses, or other loved ones. You can access information on your state at <https://www.aarp.org/caregiving/local/info-2017/care-act-aarp-wallet-card.html>.

Even if your state does not have the CARE act, make sure that the facility has information on the family caregiver(s). Ask questions about the care that will be required. Perhaps home health can be provided on your loved one's discharge home to teach the caregiver how to best care for their loved one. There is a great deal to providing care to a loved one, especially upon discharge from a hospital. Make sure you are pro-active, and have as much information as possible.

[AARP WV, www.aarp.org; CARE Act flier]

THE EMOTIONAL JOURNEY of CAREGIVING

Caregiving is a tough road. Whether you have 'eased' into the role of caregiver or whether you have been thrown into the caregiving world due to a crisis, you will experience many emotions. It is important that you take care of yourself, and part of taking care of yourself involves dealing with those emotions. They may be good or bad but all of your feelings are valid and important.

You need to recognize that your emotions may run the gamut. Suppressing them is not healthy, and they will come up, often bubbling to the surface when we least expect it. We may be ashamed of certain feelings as we go through the day-to-day tasks of caregiving for a loved one. Friends will tell us if we ever want to talk to give them a call but we may be embarrassed by our feelings or we may not want to burden our friends. If your fear of burdening someone is what keeps you from sharing your thoughts, perhaps you would do better with a support group or a therapist. Regardless of the outlets you choose, it is important for you to recognize, acknowledge and work through your caregiving feelings.

You may feel ambivalence. This is when you want to be doing what you're doing but on other days, you don't want to be doing it. The bad days can be so difficult but the good days can be a great gift allowing opportunities to share memories and make new ones.

Anger is a common feeling. We may have moments when we are providing care and just lose our grip, feeling like we have one nerve left! Forgive yourself. Move on.

Another common emotion is anxiety. Caring for a loved one most often means we are NOT in control. We can't control the disease but we need to be vigilant about concurrent problems. We can't control how our loved ones behave but we can control how we react. Pay attention to your anxiety. It can be very difficult on our bodies and our emotional well-being.

Depression and sadness can occur. We may feel hopeless or helpless. You have trouble getting up and facing a new day of the problems.

We may feel fear. Fear of what will happen to our loved one. Fear of missing a health issue that will worsen the situation.

Frustration. Some days we just can't seem to get anything right. We may be giving ourselves a lot of 'self-talk' about being worthless or not good enough. (It is really important to practice POSITIVE self-talk instead of negative self-talk!)

Boredom can result from day in, day out focus on caregiving. It's not that we don't have anything to do! Far from it! It's the lack of opportunity for any down time to do what completes us.

Disgust with the intimate components of caregiving such as helping with toileting and other personal care chores affects many caregivers. We may be embarrassed about our care receiver's behaviors or comments, or we may be embarrassed about the personal care tasks such as bathing or helping with personal hygiene.

And, did I mention being tired...fatigued? How often do you get the sleep you need? How often can you rest? Your loved one may be experiencing sleep disturbances which impacts our sleep. We may be worried, anxious, or we may be "sleeping with one eye and one ear" open in case our loved one gets up. And what happens when we get tired? A lot of us get cranky and irritable. Things can escalate quickly and we can say things that we really don't mean.

We become hypervigilant which is a state of increased alertness. It's like we're "ON" all the time! The emotional symptoms of hypervigilance can be severe. These can include: fear, panic, worrying that can become persistent, and increased, severe anxiety. You may fear judgment from others, or you may judge others extremely harshly. This may develop into black-and-white thinking in which you find things either absolutely right or absolutely wrong. You can also become emotionally withdrawn. You may experience mood swings or outbursts of emotion.

We may catastrophize. Catastrophizing is an irrational thought a lot of us have in believing that something is far worse than it actually is. Catastrophizing can generally take two different forms: making a catastrophe out of a current situation, and imagining making a catastrophe out of a future situation.

Resentment is not uncommon. We have been put in a situation that we didn't choose. Even if we willingly help our loved ones, we are still putting our lives and our dreams on hold. We may feel that our spouses, children, grandchildren and friends are being neglected due to our caregiving responsibilities. Perhaps siblings are not helping or are involved in any aspect of our loved one's care. For only children, there are no options for family support. Little things become big things. We may feel that we have to do it all, do it by ourselves and do it all the time. As much as we love our care receivers and want to help, it can be overwhelming to feel the burden of caring is totally on US.

Loss is so hard to get through. Loss is part of the anticipatory grief we feel as we see our loved ones slipping away. They may be suffering from dementia which means that they are losing us – their family members – as they move farther along with memory loss. Other losses are also felt as we move along the caregiving journey. Perhaps we've lost a job and income. We have lost control. We have lost independence. We have a sense of loss of the future.

Grief is common because we see our loved ones declining, and there is so little we can do. Then, there is guilt. Maybe we think we should have done more, or done things differently, or maybe we feel guilty because we want caregiving to end. There is guilt over impatience. Perhaps you don't like the care receiver and that is stirring up the guilt. There is no end to the things that can cause guilt to rear its head when we're providing care.

This is a long article but there are many components to the emotional side of caregiving. You may experience some or all of these emotions. It's complicated. Caregiving is not easy and takes many faces as move along the caregiving path. Your emotions may change as your situation changes. Acknowledge what you're feeling.

What can you do? Learn to walk away. Meditate. Breathe. Pray. Talk to friends, attend a support group or make an appointment with a private therapist. Take a few minutes for YOU – read a book, journal, take a walk. If possible, hire in home assistance to help or enlist family members. Take care of yourself with an eye toward solid nutrition, exercise and other types of self-care.

As a caregiver, you need to recognize and acknowledge the emotions that you are experiencing so that you can cope better and maintain your health as you provide care to a loved one. Take some reassurance in the fact that you are not alone. Be proactive with your emotional and physical health. Be kind to yourself. It's a tough job.

Would you be interested in a retreat for caregivers? Marty Cornett, MC Wellness Coaching, and Altenheim Resource Services offered a four-part series on caregiving last fall which was very well received. We would like to offer a retreat for caregivers, and are working on plans for this. If you'd be interested, give me a call. We'll have details in our newsletter and the Altenheim web page as plans progress.

[Source: Family Caregiver Alliance, www.caregiver.org, "Emotional Side of Caregiving"]

DRIVING TIPS FOR WINTER FROM AAA

Here we are! It's winter! We know we may face ice, snow and the wintry mix to go along with the cold. Severe weather can be both frightening and dangerous for drivers. Drivers should know the safety rules for dealing with winter road emergencies, and motorists need to be cautious while driving in adverse weather.

The Automobile Association of America (AAA) recommends the following winter driving tips:

- *Avoid driving while you're fatigued. Getting the proper amount of rest before taking on winter weather tasks reduces driving risks.
 - *Never warm up a vehicle in an enclosed area, such as a garage.
 - *Make certain your tires are properly inflated.
 - *Never mix radial tires with other tire types.
 - *Keep your gas tank at least half full to avoid gas line freeze-up.
 - *If possible, avoid using your parking brake in cold, rainy and snowy weather.
 - *Do not use cruise control when driving on any slippery surface (wet, ice, sand).
 - *Always look and steer where you want to go.
 - *Use your seat belt every time you get into your vehicle.
- Driving in snow can create many challenges! Here are some tips for driving in the snow:
- *Accelerate and decelerate slowly. Applying the gas slowly to accelerate is the best method for regaining traction and avoiding skids. Don't try to get moving in a hurry. And take time to slow down for a stoplight.

Remember: It takes longer to slow down on icy roads.

*Drive slowly. Everything takes longer on snow-covered roads. Accelerating, stopping, turning – nothing happens as quickly as on dry pavement. Give yourself time to maneuver by driving slowly.

*The normal dry pavement following distance of three to four seconds should be increased to eight to ten seconds. This increased margin of safety will provide the longer distance needed if you have to stop.

*Know your brakes. Whether you have antilock brakes or not, the best way to stop is threshold breaking. Keep the heel of your foot on the floor and use the ball of your foot to apply firm, steady pressure on the brake pedal.

*Don't stop if you can avoid it. There's a big difference in the amount of inertia it takes to start moving from a full stop versus how much it takes to get moving while still rolling. If you can slow down enough to keep rolling until a traffic light changes, do it.

*Don't power up hills. Applying extra gas on snow-covered roads just starts your wheels spinning. Try to get a little inertia going before you reach the hill and let that inertia carry you to the top. As you reach the crest of the hill, reduce your speed and proceed downhill as slowly as possible.

*Don't stop going up a hill. There's nothing worse than trying to get moving up a hill on an icy road. Get some inertia going on a flat roadway before you take on the hill.

*Stay home. If you really don't have to go out, don't. Even if you can drive well in the snow, not everyone else can. Don't tempt fate: If you don't have somewhere you have to be, watch the snow from indoors.

For more information on winter driving, the association offers the [How to Go on Ice and Snow](#) brochure, available through most AAA offices. Contact your local [AAA club](#) for more information.

[Source: <https://exchange.aaa.com/safety/driving-advice/winter-driving-tips/#.XCzG31aWyJA>]

HEALTH TALKS at WEST VIRGINIA NORTHERN

Lori McGlumphy, Integrative Health Coach, will be offering a series of Lunch 'n Learns on the second Friday of the month from 12noon – 1:00pm at West Virginia Northern Community College, 1704 Market Street, Wheeling WV. The series runs through May, and will touch on stress, sugar, acid reflux and gut health, autoimmune disease, supplements and more. To register, contact the Wheeling Chamber of Commerce at 304

233-2575. There is a fee of \$15.00. Join Lori to learn how to build health habits and discover how the smallest changes can produce significant results.

SENIOR SUITES IS OPEN!

Senior Suites at St. Clair Commons is a senior living community conveniently located at 101 Dorothy Place, St. Clairsville Ohio and offers all-inclusive pricing for its residents. The rates include all levels of assisted living. Weekly housekeeping and laundry services are provided, as well as many other features. The facility has a theater, game room, grand dining area, computer lounge, fitness center and chapel, as well as other community amenities. Residents have the opportunity to participate in daily activities and other social activities, and can live alone in a private suite or they can live with a companion. For more information on rooms, rates and amenities, or to schedule a tour, contact Brenda Myers, Admissions and Marketing, at 740 449-2700.

SAVE THE DATE!

*Belmont County Adult Services Coalition's
Older Adult Expo*
May 7, 2019
Ohio Valley Mall
Contact Ann Koegler at 304 243-0996 for information or to be put on our contact list.

WORKSHOPS PLANNED FOR 2019

The workshop planning committee has met and we are looking at several workshops for 2019! Topics that we are developing include self-care for professionals, workshops focusing on veterans' issues and ethics, and information on medications. Details will be available as plans are finalized!

**WVU SUMMER INSTITUTE ON AGING ON
HIATUS FOR 2019**

The WVU School of Social Work has decided not to hold the Summer Institute on Aging (SIOA) Conference in 2019. According to Jacki Englehart, the decision was not made lightly, but is a result of budget tightening at the university level, particularly around administrative supports. Also, the SIOA coordinator, Jacki Englehardt, has a new job role within the School of Social Work which precludes her ability to function in the role of SIOA coordinator moving forward.

PROGRAMS HELD IN 2018

We had a great year with our programs! We had workshops for our professional colleagues, personal enrichment programs for our community, and we participated in several health fairs! A four-part series on Supporting & Empowering the Caregiver offered caregivers information on taking care of themselves and their care receivers. A two-part series offered information on advance directives and also offered the opportunity to complete forms. It was a very busy year! Thank you so much to all of our presenters who dedicated their time and expertise, and thank you to our planning partners! If anyone has suggestions for professional programs or community programs, please contact me!

MANY THANKS!

Thank you to our program partners, those who have contacted us for information, our program participants, and all who have supported us! We are starting our 24th year of service to older adults and caregivers, as well as to our colleagues and others who need information on aging and caregiving. We are very grateful!

RESOURCEFUL THINKING

If you would like to receive an emailed copy instead of a snail mail copy (or if you would like a snail mail copy instead of the emailed version), please let us know. If you would like removed from the mail list, please call me at 304 243-0996 or email me at akoegler1995@gmail.com and your name will be removed. You can also access our newsletter on the Altenheim website at www.altenheimcommunity.com.



Let us be
Your Gateway to Care for Older Adults!

Altenheim Resource & Referral Services
1387 National Road
Wheeling WV 26003
304 243-0996

Monday – Friday
8am – 4pm

Akoegler1995@gmail.com
www.altenheimcommunity.com

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