

engage

LIVE WITH PURPOSE

INSIDE THIS ISSUE:

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- Empowering Seniors
- Life in Your 80s
- Gender Identity &
Sexuality



engage

a magazine by
North Shore Senior Center

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The mission of North Shore Senior Center is to foster the independence and well-being of older adults, enhance their dignity and self-respect, and promote their participation in and contribution toward all aspects of community life.

North Shore Senior Center is a 501(c)(3) organization. It is our policy to not discriminate against any person served or person employed or seeking employment based on age, race, color, gender, disability, pregnancy, ethnicity, national origin, genetic information, gender identity, sexual orientation, religious tradition or spiritual practice. If you feel that you have been discriminated against, call the Senior Help Line at 800.252.8966 or 888.206.1327 (TTY).

A MESSAGE FROM OUR EXECUTIVE DIRECTOR:

Tish Rudnicki

“Do not measure success by today’s harvest. Measure success by the seeds you plant today.” —Robert Louis Stevenson

As I take a moment to savor the success of our annual Gala held on September 28, it would be easy to become complacent and to continue to bask in the after-glow of the event. (It was an extraordinary evening! 250 guests attended and raised a record \$250,000 to support the work of the Center). While I am grateful we had the opportunity to inform and educate our guests about the important work we do, I am aware that we need to continue to spread that message.

Many think of North Shore Senior Center as the building located in Northfield, yet it is so much more. The Center’s caring, competent professionals have been empowering older adults, their care partners and families, and the surrounding communities for 63 years. Whether helping a victim of abuse live free of fear and harm, assisting with an application for desperately needed benefits, providing counseling to manage feelings of grief and loss, or providing the opportunity to learn new things and develop lasting friendships, we are here. It is North Shore Senior Center’s mission *to foster the independence and well-being of older adults, enhance their dignity and self-respect, and promote their participation in and contribution toward all aspects of community life.* Last year we touched almost 25,000 lives, yet there is more to do today—more of our neighbors are in need of assistance and support. We will continue to work tirelessly to strengthen our foundation, continue our important work and create a vision for the future that empowers the older adults we serve.

As we enter the season of giving thanks I am appreciative of our staff, supporters and stakeholders. I look forward to the challenges of educating and informing the community of our services, increasing awareness of all that North Shore Senior Center is, and creating innovative and enriching programming.



With gratitude,

Tish Rudnicki, MSW
Executive Director

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GALA 2019

“HELPING PEOPLE BY CHARITY IS THE MOST HUMAN THING WE CAN DO.” –OPRAH WINFREY

The 250 guests at Gala 2019: Empowering You, Your Family and the Community showed their support in full force on September 28 when they gathered for North Shore Senior Center’s annual fundraising event.

Guests were treated to an elegant evening at the charming Skokie Country Club in Glencoe. Highlights of the evening included the multitalented Chicago favorite Wayne Messmer as Master of Ceremonies, live musicians, a silent auction and a sit-down dinner. Guests were enlightened on the Center’s Adult Protective Services program with a captivating video introduced by the Illinois Department on Aging Director Paula Basta.

Each year, North Shore Senior Center honors individuals and community partners whose generosity embodies the Center’s founder, Janet Burgoon. This year’s recipients of the Janet Burgoon Philanthropic Excellence awards were Phyllis Berning, who received the Outstanding Philanthropist Award, and the Golder Family Foundation, which received the Distinguished Community Partner Award.

The sold-out event raised \$250,000. Many thanks to those who made this event a resounding success!



Wayne Messmer



Outstanding Philanthropist Award honoree Phyllis Berning (center in red) with her sister (seated left) and friends

GALA 2019



1. North Shore Senior Center Executive Director Tish Rudnicki (center), presents Joan and David Golder of the Golder Family Foundation with the Distinguished Community Partner Award

2. North Shore Senior Center Board Members Babs Rosenthal, Chair Stuart Smith and Men's Club President Jim Ahtes



3. Guests peruse the silent auction which featured an array of high-end experiences and lavish trips

4. Chris Rudnicki and his wife, Maddy, were among many guests who raised their paddles in support of North Shore Senior Center

5



6



7



8



5. Gala Committee Co-Chairs
Ann Mommsen and Maureen Mohling

6. Illinois Department on Aging Director
Paula Basta, AgeOptions President and Chief
Executive Officer Diane Slezak and Peck
Ritchey, LLC, Managing Partner Kerry Peck

7. North Shore Senior Center staff
members (from left) Holly Lichtman, Kathy
Honeywell, Janet Takehara and Lisa VanErden

8. Sapphire Sponsor Assurance representatives
(from left) Shar Knuth, Neil Macadio, Mike
Scarzone and Theresa Davy

Honoring Ou



Bill Redlich served in World War II as a flight engineer in the 73rd Bomb Wing of the Army Air Forces in Saipan, located in the Northern Mariana Islands.

er Veterans:

An Interview Bill Redlich

Bill Redlich joined North Shore Senior Center when it was located at the Winnetka Community House and remained a member until the Center moved to its current location in Northfield. Bill was a member of the Men's Club and played in the golf league for many years. As a member of the Center, he also participated in the Library of Congress's Veterans History project, which collects, preserves and makes accessible the personal accounts of American war veterans, enabling future generations

to hear directly from veterans and better understand the realities of war. Their stories are told through audio- and video-taped personal narratives, letters, personal diaries, photographs, drawings and scrapbooks.

Last fall, the Smithsonian's *Air & Space Magazine* published *Voices of the Veterans*, a special issue which covered air combat stories from World War I to Afghanistan. Excerpts of Bill's audio-recorded interview appear on page 37 of that publication. In it, he talks about how difficult it was to get the heavy B-29 airborne:

"We took off with the absolute maximum weight we could get off the ground. We barely got off. The whole point was to have as many bombs as you could for Japan."

He also describes the difficulty in bailing out of a B-29:

"It's hard to bail out of a B-29. First you had to depressurize. And the only person that could do that was the engineer, so he had to be alive. To get out of the forward compartment you had to lower the front landing wheel and crawl down through the wheel well. Or maybe you could get out through the bomb bay, but somebody had to open the bomb bay doors, and you had to get the bomb bay tank out of the way. So very few were able to get out. You either all got back or nobody got back."

We recently sat down with the 97-year-old and probed into his experience as a World War II flight engineer in the 73rd Bomb Wing of the Army Air Forces in Saipan, located in the Northern Mariana Islands.

Tell us how you ended up stationed in Saipan.

I was 22 years old and had just graduated from Purdue University with an engineering degree. In November of 1942 I was sworn in and did my training in Kansas. When it was time to go overseas, I called my girlfriend, Ann, on a Monday and asked her to marry me. I got a three-day pass to Chicago, and we were married that Saturday. It was October of 1944. I didn't see her again for one year.

(continued on page 8)



Honoring Our Veterans (continued)

I signed up to be a squadron engineering officer on the ground. I was a cadet at Yale University training in aircraft engineering when I was assigned to a newly formed P-38 squadron in California. I had 87 mechanics under me.

Shortly after that, the B-29 program took priority and, just like that, I went from being a ground pounder to a flyboy. The U.S. captured the Mariana Islands from Japan in 1944, and it was then that I got assigned to the 73rd Bomb Wing and was deployed to Saipan. The idea was that the B-29 was the first aircraft that could fly from the Marianas to Japan and back, making it easier to bomb our enemies.

What was your experience in Saipan?

I was a flight engineer, which means I ran everything on the aircraft. The B-29 had state-of-the-art technology and was the first bomber aircraft to have a pressurized cabin and electronics.

There were 11 of us in our crew. All in all, we flew 35 missions to Japan in 11 months. To put that into perspective, Japan is 1,200 miles from Saipan. It took 14 to 16 hours to fly there, drop

bombs and fly back. During the flying missions we were awake for 30 hours at a time.

Initially, we lost one in 15 planes. We'd fly in formation, and we'd see planes go down. We didn't dwell on that or even talk about it. We'd exchange looks for a few seconds and move on. We knew we had a mission to complete, and we knew we'd have to go out again. We had to compartmentalize those situations because it just wasn't healthy to dwell on those we lost.

Besides being away from loved ones and surrounded by violence and death, what was the worst part of being in the war?

The flying missions were very stressful, due to sleep deprivation and the fact that you didn't know if you'd make it back to base alive. During one mission, we were down to just a little fuel in the bottom of the tanks. As we nosed down to come into the runway, which was surrounded by water, the fuel in the bottom of the tanks moved forward and was not lined up with the outlet. All four engines stopped. We weren't going to make the runway so we got into "ditch" position. As we

leveled off to ditch, the fuel went back to the bottom of the tanks and into the engines, and we had enough power to come back up.

Another thing is we felt that we were the "forgotten war." In the big picture of the war, Europe was in the spotlight and nobody was talking about the invasions in the Pacific. We were never publicized in the military newspaper *Stars and Stripes*. The U.S. didn't want Japan to know they were successful in their air raids on us. So we felt forgotten.

We also couldn't tell our families where we were or what we were doing. It was all kept very secret. My buddy's plane crashed and he got two weeks off to go home and recover. While he was home, he called my parents and all he could tell them was that the weather was good where we were and that I was doing fine.

You hear about veterans coming home with post-traumatic stress disorder. How did your service and war experiences affect your life?

World War II was a period in my life that was different from anything, but for me it is just that: one of the chapters of my life. The memories are vivid—using my helmet as a sink, the smells, the air raids on our camp, and the lights formations on our night missions—they are part of my life experience.

My crew and I were bound very close and stayed in touch after the war. We'd get our families together for reunions and visits. They're all dead now.

Bill served from 1942 to 1945. Following the war, he returned to Chicago where he had a career in manufacturing. He and Ann raised two daughters and a son, who gave them five grandchildren. Ann passed away 10 years ago. At time of print, Bill was expecting his first great-grandchild.



Bill and his wife, Ann

Medicare Made Easy: Healthcare Choices for Older Veterans

by Melissa Versch

As veterans turn 65 or retire, they must make a decision about how to get healthcare coverage. Most veterans are eligible for Medicare, but those who have served active duty also may be eligible for coverage through the Veterans Administration (VA). Though the two federal programs do not work together, enrolling in both Medicare and VA healthcare balances flexibility and affordability.

MEDICARE

Advantages: Medicare offers choice and convenience because it is an insurance accepted by the majority of healthcare providers. Medicare Part A allows a beneficiary to go to virtually any non-VA hospital for inpatient care. With a \$0 premium for most, enrolling in Part A is an easy decision. Medicare Part B covers outpatient care, including doctor visits, tests and medical equipment. According to the Kaiser Family Foundation, over 90% of primary care physicians accept Medicare Part B. That means freedom of choice and quality. In 2019, the standard monthly premium for Part B is \$135.50.

Disadvantages: Though the basic premiums are affordable, Medicare gets pricey due to deductibles, coinsurance and prescription drug costs. Medicare supplement plans (also referred to as Medigap plans) help cover charges after Parts A and B pay, but premiums for these plans start at an average of \$68 per month for a high-deductible plan and reach over \$400 per month for a comprehensive plan. Part D drug plans range from about \$150 to thousands per year, depending on the plan and drugs being filled. As an alternative, Medicare Advantage plans can offer lower fees, but at the sacrifice of convenience.

VA COVERAGE

Advantages: Because Medicare costs can add up, VA coverage is attractive for those looking to save. There are no premiums or deductibles with VA health coverage, and copays are low or even zero, depending on service connection and income. In addition, the VA has expertise for service-related health issues and veterans may get benefits that Medicare does not provide. The VA can

provide hearing aids, dental coverage and long-term care for those who qualify.

Disadvantages: Disadvantages of VA coverage include a lack of convenience and risk of non-coverage. While a veteran can enroll with the VA at any time, applications are processed based on priority groups, and enrollment wait time can be lengthy. If the government does not provide enough funding, lower priority groups can lose benefits. Additionally, VA coverage must be used within the VA system. For those who cannot travel to a VA facility, authorization to use VA coverage at an approved outside facility must be provided in advance.

BEST OF BOTH WORLDS

Having both Medicare and VA coverage empowers individuals with choice. Martin Small, a veteran and Senior Health Insurance Program (SHIP) counselor, uses Medicare Parts A and B with a Medicare supplement plan, plus the VA for drug coverage. "For me," Small said of prescription costs, "nothing has been higher than \$8 for a 30-day supply, and not less than \$5." These low medication copays make VA coverage a good alternative to costly Medicare Part D payments. A Medicare supplement helps avoid high out-of-pocket expenses when using Medicare, and in some cases the VA can bill the Medigap plan for copays. Small also uses the VA for hearing aids, which are not covered by Medicare.

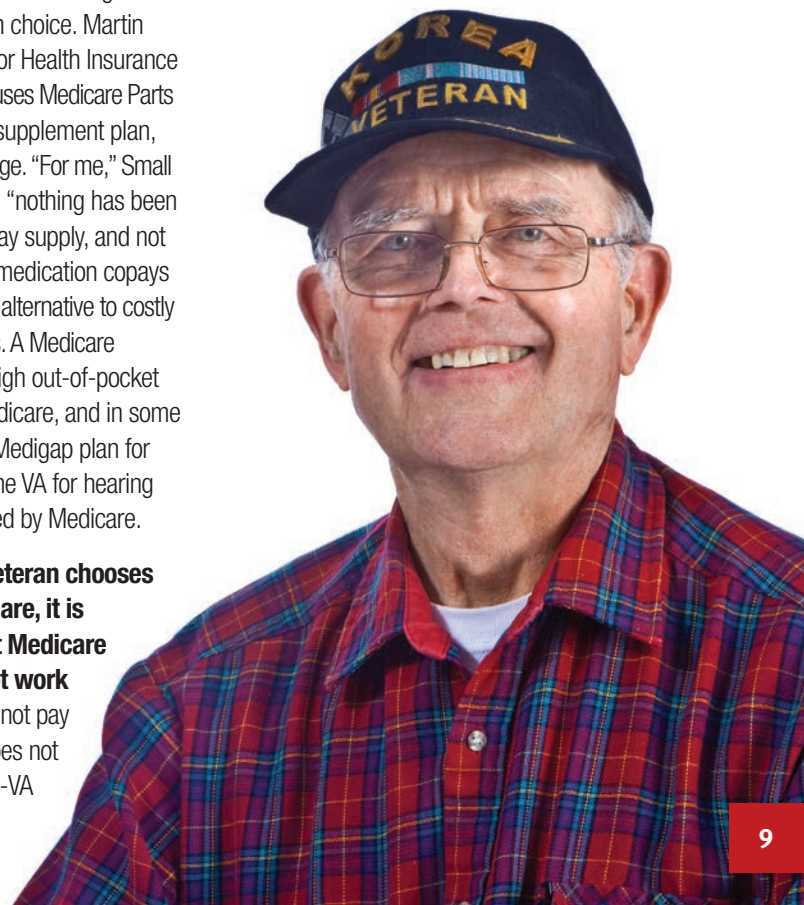
Regardless of how a veteran chooses to receive their healthcare, it is important to know that Medicare and VA coverage do not work together. Medicare does not pay for VA care, and the VA does not cover services from a non-VA facility, except in special

situations. If a person chooses to use both systems, the providers do not communicate or coordinate care.

Time of enrollment is also important. VA healthcare applications are accepted at any age and any time of year. But with Medicare, a person is subject to late enrollment penalties if they do not get Parts A and B when they turn 65 or lose qualifying employer coverage.

If you have questions or need assistance with Medicare, please call our Senior and Family Services Department at 847.784.6040 to make a SHIP appointment.

For questions about veterans benefits, call 844.698.2311 or go online to www.va.gov.



One Story of How Adult Protective Services **PROTECTS AND EMPOWERS** Seniors and Their Families

The summer issue of *Engage* featured the behind-the-scenes work of our Senior and Family Services department on behalf of older adults and their families. One of the many programs within Senior and Family Services is our Adult Protective Services (APS) program.

No one likes to think of anyone—especially an older adult—being abused, neglected or taken advantage of in any way.

The sad truth is approximately one in 10 Americans age 60-plus has experienced some form of abuse or neglect. According to the National Council on Aging, up to 5 million older adults are abused each year, but only one in 14 cases are reported to authorities.

Abuse takes many forms and, in most cases, victims are subjected to more than one type of mistreatment. Elder abuse can include physical, sexual or emotional abuse; confinement; passive neglect; willful deprivation; or financial exploitation.

As one of 45 agencies designated by the State of Illinois to investigate reports of abuse, neglect and financial exploitation of seniors and people with disabilities ages 18-59, North Shore Senior Center provides services to residents of Maine, New Trier and Northfield Townships in the northern suburbs of Chicago. All Adult Protective

Services are confidential and free of charge. Last year the Center's APS team investigated a record 308 cases.

"Sometimes the clues that someone is being abused or neglected are subtle," explained Holly Lichtman, program supervisor of the Center's APS team. "Someone who's experiencing abuse or even passive neglect can become withdrawn, seem depressed or unusually quiet, or suddenly have a disheveled appearance or odor. These are all signs that something could be wrong and should be reported for the safety of the individual. I can't stress enough that if you suspect something to call the hotline or North Shore Senior Center. If there's something going on we can help. If it turns out everything's all right, then at least we checked it out and made sure everyone in the home is doing well."

Flora had suspicions that her aunt was being neglected—not purposefully—by her adult daughter so she called APS. "I frequently visited my aunt and my cousin who lived together, and I could tell something wasn't quite right. My aunt was showing signs of dementia, and my cousin was in poor health and would have to leave her mom alone at home while she ran errands," Flora said. "My cousin didn't drive so she would take a taxi to the closest store, which happened to be a Walgreens, to do the grocery shopping. I was worried about what was going on over there, so I made a call to APS and they sent someone out to the house to assess the situation."

Fortunately, Flora made that call. Within a month, her cousin was hospitalized and diagnosed with stage four cancer. She moved to a hospice rehabilitation facility and passed away the following month. After her cousin's death, Flora arranged for a caregiver for her aunt. "My aunt adored her caregiver, and she had a new lease on life during her last few months," Flora said.



“If I wouldn’t have made that call to APS when I did, the chances are high that my cousin would have died at home and my aunt wouldn’t have known what to do. She was no longer capable of telling time or making a phone call. I shudder to think what might have happened to her,” Flora said.

According to the Illinois Department on Aging, the Adult Protective Services Act provides that people—who in good faith report suspected abuse, neglect, financial exploitation or cooperate with an investigation—are immune from criminal or civil liability or professional disciplinary action. It further provides that the identity of the reporter shall not be disclosed except with the written permission of the reporter or by order of a court. Anonymous reports are accepted.

To report suspected abuse, neglect or financial exploitation of an adult age 60 or older or a person with disabilities age 18-59, call North Shore Senior Center’s APS team at 847.674.6000, or the statewide, 24-hour Adult Protective Services Hotline at 866.800.1409, or 888.206.1327 (TTY).

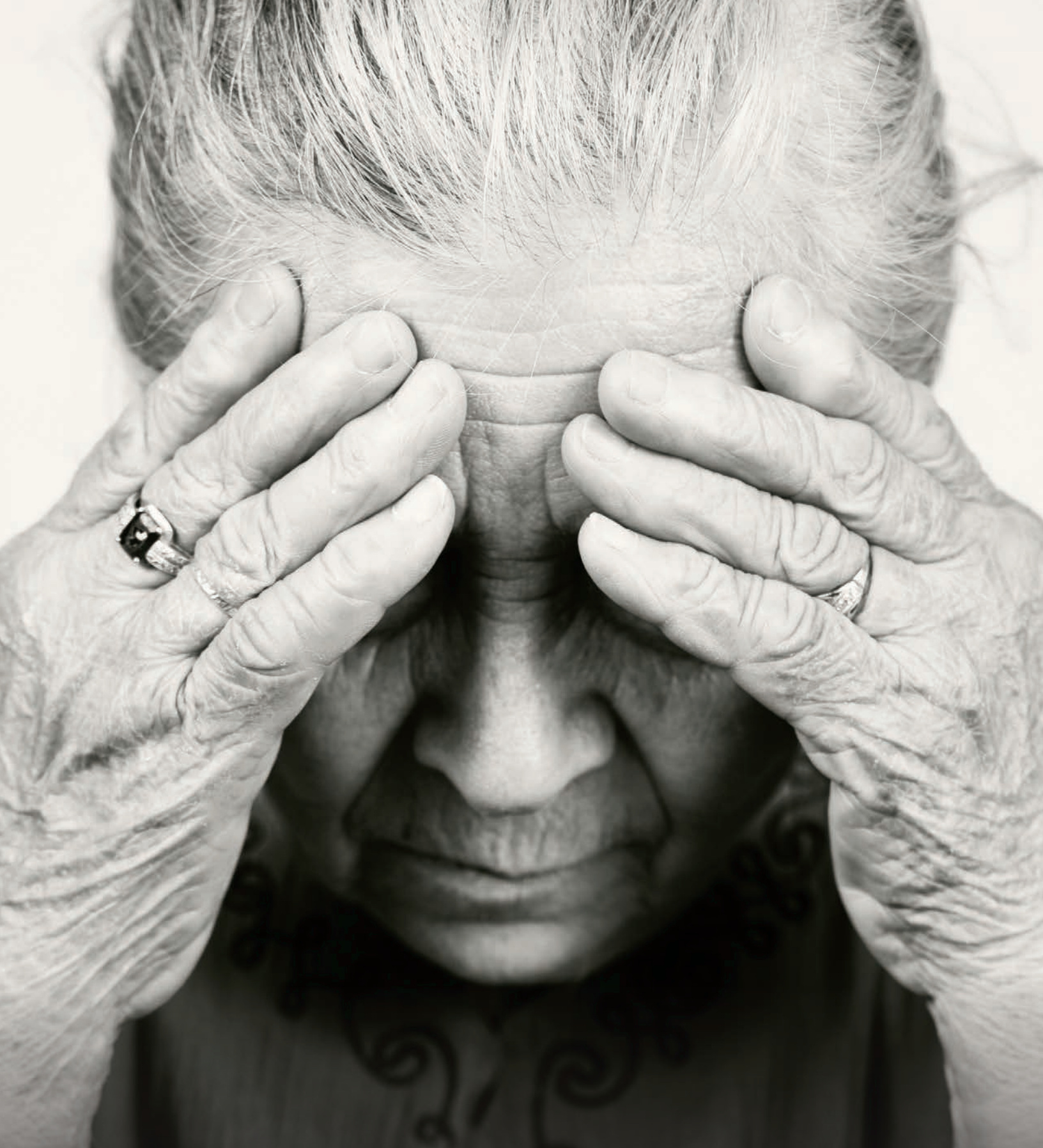


*(Top of page)
Flora with APS Care
Manager Lisa VanErden*

*Flora (on right) with
her cousin when they
were teenagers*

*(Right) Flora’s cousin
with her mother*





Abuse. Exploitation.

The Sad and Often Secretive World of Senior Oppression

by Jon Labaschin

Something told Sheri that all was not right with her neighbor. She used to see Linda and her son at least once a week, either in the elevator or the lobby of their building. But she hadn't seen her during the course of the week. Linda was in her 80s and fairly frail, but had seemed to be navigating old age rather well.

She was somewhat relieved to see Linda a few days later, but Linda looked decidedly worse for wear. Her face was ashen and her hands were shaking. Her son, who accompanied her, seemed to push her along. Sheri stopped Linda and asked how she was doing. Linda looked to her son first, as if she were asking permission to reply, "I'm doing as well as one can expect."

Sheri reminded Linda that if she needed anything she should just call. Linda thanked her and shuffled off down the floor to her apartment, much slower than she had in the past.

Sheri thought it was odd that since Linda's son had come to live with her, her state had changed. She wasn't out as often, she looked thinner and far more disheveled. Sheri didn't want to poke her nose in where it didn't belong, but she was worried. What should she do? Perhaps she should just wait a bit longer before doing anything? Maybe it was all in her imagination? I mean, her son was looking after his mother. He would know what's best for her . . . wouldn't he?

A few weeks followed and Sheri would see less and less of Linda. She would see her son, but not Linda. She occasionally asked the son how Linda was and he would give a somewhat curt and perfunctory response. This did not sit well with Linda. It was time to do something, but what?



Sheri decided she would speak to her pastor and get his thoughts. After recounting what she had seen, her pastor suggested that together they put a call in to North Shore Senior Center. Her pastor had worked with the Center before and knew that Adult Protective Services would be able to help.

The story of Linda is indeed tragic. Working with local police, Adult Protective Services was able to determine that, not only was Linda being physically abused and bullied by her son, but that thousands of dollars had been depleted from her bank account.

Unfortunately, Linda's story is not unique. Senior abuse—financial, physical or psychological—continues to rise. The demands on North Shore Senior Center's Adult Protective Services goes far beyond what its resources command.

Now that you have read about Linda and understand the great need that is out there to protect our seniors from abuse, exploitation and neglect, we ask you to consider **making a gift today to our Year End Appeal** so that we can continue providing important social services to you, your family and the community.

For more information, please contact Jon Labaschin, Director of Development, at jlabaschin@nssc.org or 847.784.6020.

Neglect.



INFORMATION AND REFERRAL WITH

Caring and Kindness

by Janet DeRaleau

For seniors and their family members seeking information and assistance, the first step is a phone call or visit to North Shore Senior Center's Senior and Family Services Intake Team.

"Intake is like the first responder," explained Team Manager Nashisha Soto. "We basically take a problem, decipher it, and see if we have a program to assist the person. If not, we refer them to another agency that can help them."

The Intake Team answers questions, guides callers to various resources, provides

information, describes programs, and completes intake forms detailing demographic and financial information for specific services. Then cases are assigned to care managers who see clients in their homes and conduct full assessments. While most people phone in their questions, the team also sees drop-in clients and receives referrals from outside agencies.

Saying this group of one part-time and four full-time staffers is busy is an understatement. In fiscal year 2019, the Intake Team provided information and assistance to 3,791 individuals.

This job is kind of like being a detective," noted Felicia Falk, who also serves as a receptionist at the Administration Desk. "You really have to listen to what people are saying and not lead them, but ask questions that help you direct them."

Staff training is done in-house with experienced team members teaching newbies. However, Nashisha and Jay Shanahan, lead intake specialist and a 14-year veteran of the team, have taken online courses to become certified by the Alliance of Information and Referral Systems, an international association of information and referral service providers.

Inquiries can run the gamut from someone seeking a hair stylist who makes home visits to a senior being evicted from his home in two weeks with no place to go. When an existing program doesn't meet the caller's needs, the



In fiscal year 2019, the Intake Team provided information and assistance to 3,791 individuals.

intake specialist will take some time to think outside the box and call the person back.

Such was the case for Jay, who was confounded by a caller wondering how to find insurance for her condo. Although the question had nothing to do with social services programming, Jay didn't give up on the woman. After considering the problem for a while, she called her back with several suggestions.

"I just try to think how I would feel if I were the caller," Jay says. "Sometimes you just need someone with compassion who is really listening to you rather than someone who is just giving some verbatim response."

CENTER PROGRAMS

There are 16 free programs available through Senior and Family Services, but some financial guidelines may determine eligibility. Some of the offerings include:

- Home-delivered meals
- Support groups
- Adult Protective Services
- Caregiver respite
- Chore housekeeping
- Short-term counseling for depression, anxiety, bereavement, etc.
- Lending Closet for borrowing durable medical equipment like walkers, canes and raised toilet seats
- Medicare counselors to assist with issues related to Medicare or hospital/physician bills
- Friendly visitor program where volunteers visit home-bound older adults

Felicia's job within the Intake Team is to organize requests and assign screenings for the Choices for Care program. Designed to ensure that individuals who are planning to enter a skilled nursing facility or rehabilitation center actually need that level of care, this program also explores alternative community resources and options so that an informed decision can be made.

Another program called Options Counseling entitles the caller to a one-time, one-hour consultation to determine his or her needs and make a plan. A subsequent follow-up evaluates how the plan is working.

“Every once in a while I hear a lot of anxiety in a caller’s voice. When people don’t know what to do and don’t have a plan, they can become panicky. After we talk about some programs and some possibilities, I hear that anxiety level go down and that’s very gratifying.” —Jay, Lead Intake Specialist

In addition, the Center's affiliate North Shore Senior Options, is a fee-based program that offers a suite of services to help seniors and their families manage the many challenges faced by older adults. Services include daily money management, therapy and counseling, and guardianship of person and/or estate.

MORE THAN INFORMATION AND REFERRAL

Nashisha describes the team as “311 with compassion,” comparing it to the City of Chicago’s information phone line, but with an abundance of heart.

Compassion tops the list of job skills for members of the intake team along with critical thinking, problem solving, excellent listening and speaking skills, and patience.

“We’re dealing with a senior population,” said Annette Burke, MSW, a two-year member of the team. “A caller may have a disability that makes her difficult to understand or she may have hearing loss which can make communicating over the phone challenging.”

In addition, many callers don't speak English. When Annette encountered a Spanish-speaking client, her quick thinking allowed her to complete the call by combining her high school Spanish skills with Google Translate. If required, conference calls including translators can be arranged.

Intake team member Eugina Holt relies on active listening skills to show the clients that she cares. “I’ve learned that callers appreciate having someone take a moment to hear them out.”

Team members agree that helping people find answers to their problems using kindness and caring is the best part of the job.

“Every once in a while I hear a lot of anxiety in a caller’s voice,” said Jay. “When people don’t know what to do and don’t have a plan, they can become panicky. After we talk about some programs and some possibilities, I hear that anxiety level go down and that’s very gratifying.”

READY AND WAITING

Nashisha sums it up in two sentences: “If people don’t know where to go, just call us. We’re open Monday through Friday from 9 a.m. to 5 p.m. We want to help!”

For a complete list of our programs and descriptions, visit our website at nssc.org/senior-family-services or call the Intake Team at 847.784.6040. Walk-ins are welcome.

“I’ve learned that callers appreciate having someone take a moment to hear them out.” —Eugina Holt, Intake Specialist



Quarterly Donor Honor Roll

Gifts of \$10,000 or more from
April 1 to June 30, 2019

- Estate of Robert Appelbaum
- Phyllis L. Berning
- Evanston Mental Health Board
- The Healthcare Foundation of Highland Park
- Colonel Stanley R. McNeil Foundation, Bank of America, N.A., Trustee
- New Trier Township
- Jerald & Marcia Richman
- Village of Glenview

#GIVING TUESDAY

#GivingTuesday is a global day of giving fueled by the power of social media and collaboration. Celebrated on the Tuesday following Thanksgiving—December 3—this worldwide one-day giving event kicks off the charitable season.

This year North Shore Senior Center will devote every dollar raised on #GivingTuesday to our House of Welcome (HOW) Adult Day Services to benefit people living with memory loss and their families. Since its opening 36 years ago, HOW has been a place for individuals with memory loss to feel valued, safe and respected. It offers a structured Day Program that provides therapeutic small-group activities in a comfortable home-like setting as well as an award-winning program for those in the early stages of memory loss. Both programs provide participants with meaningful activities and friendships, while caregivers benefit from time on their own.

Once again, The Retirement Research Foundation will provide a 1:1 match (up to \$5,000) on all #GivingTuesday donations.

Making a donation is easy. Simply visit our website at www.nssc.org, mail a check to North Shore Senior Center noting in the memo that your donation is for #GivingTuesday, or stop by the Center on Tuesday, December 3, where staff members will be on hand accepting donations and assisting with secure online donations from 9 a.m. to 1 p.m.

FORMERLY
SILVERADO
COMMUNITIES



WELCOME TO

The Auberge

Memory Care Communities

For more information, call or visit us today!

Highland Park
224-765-0094

11651 Richfield Ave
Highland Park, IL 60035

Orchard Park
847-583-9800

85520 Lincoln Ave
Morton Grove, IL 60053

Naperville
630-778-9221

1936 Brookdale Road
Naperville, IL 60563

Lake Zurich
847-307-6990

555 America Court
Lake Zurich, IL 60047

Philanthropy: A Social Connector

by Alice Kelley, North Shore Senior Center Board Member & Associate Dean of Administration, Finance and Planning, McCormick School of Engineering, Northwestern University

One morning before getting into the office I was in a rush to drop off a small package at the post office. It was a return of an online purchase using a prepaid label and seemed to be a quick errand. My physical mobility is a bit challenged due to a weak leg muscle so every in and out of the car takes extra effort. After patiently waiting in line, I was informed by the clerk that I needed to go to UPS, not USPS. As I walked away dejectedly, a woman in line reached out and said she was going near the UPS Store and would be glad to drop off the package. I was stunned and appreciative. I handed her the package and thanked her profusely. But that wasn't the end of the story. I could not believe the kindness of a stranger. The unexpected brought a smile. The relief of not having to make another stop. I was now back on schedule. When I got to the office, I told several colleagues and each was amazed. The act of kindness had brought sunshine to the entire day.

Philanthropy is a magnified, extended version of my post office moment of unexpected help from someone I did not know personally: an act of kindness that lifted me. And more than that, it was a connection.

Some might say this is all fluff, but over the years numerous research studies have proven the emotional, biological and social benefits of philanthropy. And not just to the recipient, but also to the donor and to the community. *5 Ways Giving is Good For You*, an article by Jason Marsh and Jill Suttie (Greater Good Magazine. Science-based Insights for a Meaningful Life. December 2010) provides an illuminating and proven roster of the benefits of giving:

- **Giving makes us feel happy.** A 2006 study by Jorge Moll and colleagues with the National Institutes of Health (NIH) found that when people give it activates regions of the brain associated with pleasure, social connections and trust, creating a "warm glow" effect.

- **Giving is good for our health.** Research demonstrates that people who provide social support to others had lower blood pressure than those who didn't, and that giving may decrease stress, helping to improve physical health and longevity.
- **Giving promotes cooperation and social connection.** In our fast-paced, technology-driven daily routines, the importance of human connection cannot be forsaken.
- **Giving evokes gratitude.** Gratitude expands our world and our view becomes larger than ourselves.
- **Giving is contagious.** Giving spurs a ripple effect of generosity throughout the community. A study by James Fowler of the University of California, San Diego, and Nicholas Christakis of Harvard (Proceedings of the National Academy of Science) indicates that when one person behaves generously, it inspires others to behave generously later, toward other people. They found that altruism can spread by three degrees—from person to person to person.

As a new member to North Shore Senior Center's Board of Directors, I'm already experiencing the benefits of giving to an organization that's in line with my own personal values.

Oh, and what about the end of my story? I regretted I had not asked the name of my package angel. A few days later, an envelope arrived and inside was the UPS receipt for my package. Aha! I now knew her name and address. I sent her two books of stamps.

What goes around comes around.



philanthropy:
the desire to promote
the welfare of others,
expressed especially
by the generous
donation of money to
good causes





“We get the most out of life because we are active and happy and fill up each day with activities.” –Dave

Life in Your 80s

as Defined by Peggy and Dave AuBuchon

How do you spend your time when you're a retired couple in your 80s? If you're Peggy and Dave AuBuchon, you tutor grade school students, make sack lunches for the homeless, volunteer with older adults who are living with memory loss, tap your inner artist through sculpturing, take Pilates and Zumba classes, and run in the National Senior Olympic Games.



The involved, active couple keeps busy every day and they wouldn't have it any other way. Peggy spends her time exercising in the forms of walking, strength training, Pilates and Zumba classes. She also spends Thursday afternoons volunteering at House of Welcome (HOW) Adult Day Services. When asked how she got involved with HOW, she shared her uncle's story.

"Shortly after my aunt passed away, my uncle took a fall and he could no longer take care of himself. He was also diagnosed with Alzheimer's disease. There were no other family members to help him, so I moved him here from Racine, Wisconsin. I had heard of House of Welcome and its Day Program so I took him there a few days a week while I was at work. I was so impressed with the care he received that I vowed to volunteer there after I retired," she said. She started volunteering at HOW 16 years ago while she was still working.

"It's such a needed program, and I cherish the time I spend with the participants," she said. Her favorite part of the day is lunchtime where she spends time talking with participants. "With Alzheimer's, many people retain memories from long ago, and I love when people are able to reminisce about special times in their lives."

A retired patent attorney, Dave is a fixture in the Center's Art Studio, spending several days a week working on his sculptures. He began sculpturing after high school and again during law school. He took a long break during his family-raising, working years and found his way back shortly into retirement. It was Peggy who gave Dave a sculpturing workshop as a gift. Little did she know that



the class involved a nude model that the participants would sculpt. "He really loved that gift," she laughed. Through the Center's Art Studio, Dave also reconnected with his kindergarten friend, Anne Essex, who is a member of the Sculpture Club.

Dave's other passion is running, something he took up when he was 40 years old. His doctor told him he had high blood pressure and

needed to incorporate exercise into his life. "My father died of a heart attack when he was 52, and I didn't want that to be my fate," he said. So, like Forest Gump, Dave took off running and never looked back.

Despite having knee surgery two years ago, Dave regularly runs in local races, specializing in 5Ks, where he is often the winner of his ever-shrinking age group. The 86-year-old trains with the Evanston Running Club year round and runs five to six miles twice a week on his own. This year was his fourth time qualifying for the Senior Olympic Games in the 1500-, 800-, 400- and 200-meter races.

"Going into it, I thought this would be my year for a gold medal, but it didn't go that way," he said. Instead, with 100 yards to go in the 1500-meter race (four times around the track)—his first race of the day—his hamstring snapped and he went down. Determined to finish the race he worked so hard to qualify for, he picked himself up and limped his way to the finish line. He managed to come in sixth place. Stubbornly, Dave was bent on running the other three races he qualified for, but after a visit to First Aid and attempting to run the preliminary 400-meter race, realized competing in the other races wasn't in the cards. "I was really disappointed, but it didn't change my love of running; I have no plans to stop."

Married since 1967 and four children and three grandchildren later, Dave and Peggy truly live each day to the fullest. "We get the most out of life because we are active and happy and fill up each day with activities."



“Ask an Attorney”

Prepared by Kerry R. Peck, Esq.

In this edition of “Ask an Attorney,” Kerry addresses questions on guardianship, administrator of an estate and estate planning for couples in same sex marriages.



Q. My uncle has been significantly declining over the past year. I would like to become his guardian. I know he needs assistance with his personal finances and overall healthcare. What is the process for becoming his guardian?

—Antonio, Winnetka

A. Petitioning for guardianship is a multiple step process that may require the assistance of legal counsel. If you choose to pursue guardianship for your uncle’s estate in addition to his person, you will be required to obtain counsel when managing his money. First, you will need to obtain a current medical opinion as to your uncle’s ability to care for himself. Second, you will use this information to begin preparing a petition to appoint a guardian. Once this has been completed, you will need to have your uncle served with the petition, so he is aware of the proceeding. In the interim, the court will appoint a guardian ad litem to speak with your uncle and obtain his opinion. Once this has taken place, a hearing will be held as to whether your uncle needs a guardian and, if so, who should act as the guardian. The process is very detailed-oriented, and an experienced probate attorney should be consulted to avoid undue delay in the appointment of a guardian.

Q. My mother recently passed away, and I was named as the dependent administrator of her estate. What is my role in this position? What is the difference between an independent and dependent administrator of the estate? Is there any way I can alter the court’s decision?

—Julia, Des Plaines

A. Typically, the court will appoint an individual as the “independent administrator,” or the “supervised administrator” of an estate. Based on your question, it sounds like you have been appointed as the supervised administrator of the estate. As the

supervised administrator of your mother’s estate, you will need to obtain the court’s approval for various decisions involved with handling the estate including, but not limited to: disbursing funds from your mother’s estate; selling any real property; paying any debts or claims; and distributing the assets amongst her heirs. An independent administrator does not need to obtain the court’s approval to do any of the aforementioned actions. Based on the nature of the proceeding, you might be able to petition the court to attempt to alter your role as administrator of your mother’s estate.

Q. I am married to another man. I know the laws on marriage equality have changed in recent years. However, neither of us currently have a will or estate planning documents prepared. Should we consider drafting estate planning documents or will each of our shares go to the other upon passing? —Paul, Highland Park

A. The law provides that if you die and do not have a will, your assets pass under the rules of descent and distribution. As you note, marriage equality provides that the rules of descent and distribution apply equally to all married couples, regardless of gender. As such, if you are married, have no children and no will, all assets pass to your spouse. Further, if you are married, have children and no will, then your assets are divided among your children and spouse. It is always a good idea to prepare an estate plan so you can direct the distribution of your assets as you see fit.

Note: The responses provided in the “Ask an Attorney” column are not legal advice and do not create an attorney-client relationship. Peck Ritchey, LLC has not been retained to represent any of the above individuals for purposes of this magazine.

For more information on the services offered by Peck Ritchey, LLC, visit www.peckbloom.com or call 847.509.1099.

“Tax

Talk”

Prepared by
Laurie Kaplan, CPA, Partner,
and Josh Prince, CPA, MST,
Manager

In this edition, we put your knowledge to the test with several true/false statements to common taxpayer situations.

TRUE OR FALSE? My accountant just notified me that I have a tax balance due on my federal tax return, but I do not have the funds to pay all of it now. The IRS offers free payment plans and they guarantee all payment plans will be accepted because that is in the best interests of the United States.

FALSE. While the IRS offers taxpayers the option to request a monthly installment agreement on any unpaid tax balances, they will charge a user fee, interest, and a late payment penalty, even if your request to pay in installments is granted. To limit interest and penalty charges, file your return on time and pay as much of the tax as possible with your return or notice.

Only certain taxpayers are eligible for guaranteed approval on an installment agreement request. You may be eligible for a guaranteed installment agreement if the tax you owe isn't more than \$10,000, you've filed and paid timely in the past five years, and you agree to pay the balance due within three years.

TRUE OR FALSE? I am considering retirement and moving to a tax-free state like Florida, Nevada or Washington. I will be able to eliminate my Illinois state income taxes by spending more than half the year in one of these states.

FALSE. Living more than half the year in another state does not automatically exempt you from owing Illinois resident state income taxes unless you are able to document your intent to be a non-resident of Illinois. Here are some steps you should take: consider selling your primary home in Illinois or, at a minimum, give up the homeowner's exemption; maintain a log of days spent in each state; register to vote in the new state; apply for a new driver's license and cancel the one from Illinois; change your address for all personal and financial records including tax returns; update vehicle registrations; establish relationships with new physicians; and join a local religious organization. These are only some of the factors to consider.

In some cases, you may not save as much as you think by moving to a tax-free state. For instance, most retirement income is not taxed in Illinois. On the other hand, even as a non-resident, you will still pay tax on Illinois source income. This would include income from a rental property or business in Illinois. Contact your tax advisor before making any move.

TRUE OR FALSE? I own a rental home in Michigan, and occasionally invite friends and family to join me on weekend stays. Since I sometimes use the rental property for personal purposes, I may not be able to deduct all my rental expenses.

TRUE. If you have any personal use of a rental property, then you will not be able to deduct your entire rental expenses as a portion of those expenses will be disallowed as personal. In addition, if you use the property for personal use for the greater of 14 days or 10% of the total rental days in a calendar year, you will not be able to show an overall loss from the property.



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Gender Identity

No surprise: Many older adults find their heads spinning at the ever-evolving world of sexuality and gender.

Older people grew up with a very clear understanding that a person identified as one of two genders—male or female, said Tim Hayes, assistant superintendent for student services at Winnetka’s New Trier High School.

But old ways of classifying sexuality are no longer valid (if they ever were), as those who study gender issues discover more and more about the reality that gender identity must be classified on a far broader, even nebulous spectrum. (See sidebar, “Resources for a Better Understanding of Gender Identity.”) All manner of organizations are better recognizing the leading role of gender in one’s overall identity. For example, the Illinois Department on Aging recently added gender identity to its intake process.

A record 4.5%—more than 11 million U.S. adults—identify as lesbian, gay, bisexual or transgender, according to a recent estimate by Gallup, Inc., a U.S. analytics and advisory company. That number is up from 4.1% in 2016 and 3.5% in 2012, the year Gallup began tracking Lesbian, Gay, Bisexual, Transgender, Queer (LGBTQ) identification. A 2016 study of almost 81,000 Minnesota high school students estimated that nearly 3% identified as transgender

or gender nonconforming, meaning they don't always self-identify as the sex they were assigned at birth.

But no matter the numbers, the wish of every person of every gender is the same—to be accepted, included, listened to, understood and cared for. It's as natural as a spring shower, and it's practically embedded in human DNA.

North Shore Senior Center strives to be an inclusive, diverse community, one where people are free to be who they really are and to express themselves openly.

Audry Farber, IT consultant at North Shore Senior Center, is thankful for finding herself on the receiving end of the Center's progressive, welcoming approach. Farber, who sometimes goes by her legal name of Jim Habel, began working at the Center in 2008. She came out as transgender at an office Halloween party four years ago when

Located in Chicago's Lakeview neighborhood, the Center on Halsted is the Midwest's most comprehensive community center dedicated to advancing community and securing the health and well-being of Chicago's LGBTQ community.

Coming out is never easy, no matter how empathetic and understanding one's family is. Young people in the midst of gender questioning need reliable peer outlets and support, resources they find easily available at local high schools. At Glenbrook High School, SAGA (Sexuality and Gender Alliance) offers a safe place for students to talk to like-minded peers and allies—friends who support their journeys.

Matthew Bertke, a French teacher who doubles as a staff support person for SAGA, offered this counsel: "Listen without judgment. It's also important to ask genuine questions and show empathy and

(continued on page 20)

Issues:

Increasingly Up for Discussion by Betsy Storm

she dressed up as "Grace O'Malley, the Irish Pirate Queen," a historical figure born in 1530. "When people asked about my costume, I just said, 'I am transgender.' It was very freeing."

She found her co-workers to be enthusiastic, positive and understanding—without exception. The then executive director (a male) also expressed support. In September 2018, she started presenting as Audry at work full time. "When I first appeared as Audry, it created a bit of a stir with my copper jacket and colorful top. Nonetheless, I received hugs and smiles." There were some challenges, not surprisingly, in interactions with a few members and volunteers. "At first they didn't recognize me, but they became supportive once they realized who I was and what I was doing." Farber enjoys interacting with volunteers at the gift shop where she buys scarves and jewelry. She said many of the men she encounters are often "befuddled, but there is never a hint of unkindness."

Farber's emphasis on acceptance resonates with what the guidance experts dispense about how older adults can best communicate with their adult children, grandchildren, or other loved ones who may want to talk about their gender-identity journey.

Britta Larson, senior services director at the Center on Halsted, emphasized that the most important thing older adults can do is express unconditional love, acceptance and a willingness to learn.





Gender Identity Issues

(continued)

caring.” Teens are looking for allies, he emphasized, and your early behavior and reactions to their news will show whether you can be one. With that goal in mind, don’t bring up sexual or anatomy-related issues. Last, “Teens are especially aware of and sensitive to tone of voice so speak with compassion and understanding.”

Echoing everything Bertke said, New Trier’s Tim Hayes, assistant superintendent for student services at New Trier High School, also pointed out the negative consequences that often arise when kids are not supported in their gender-identity journeys by parents,

grandparents and others who’ve always provided what every human being desires—a safe place to fall. Not surprisingly, Hayes said, a range of negative consequences ensue when there’s no safe spot readily available. “When kids are confronting a lot of confusing questions, but they can’t talk to their older family members about them, then they have to keep secrets. They have to hide. Not surprisingly, their academic performance suffers.”

Added Hayes, “In families that really struggle with these issues and are not supportive of their kids, it makes everything much more challenging.” Conversely, “When parents (and others) are really open minded and tell their kids, ‘Okay, let’s explore this together’ (even if the parents or grandparents aren’t really convinced yet), it brings the family much closer together. Give teens the space they need to explore.”

Resources for a Better Understanding of Gender Identity

Websites

PFLAG: Parents and Friends of Lesbians and Gays

is a national organization providing confidential peer support, education and advocacy in communities in nearly all 50 states, the District of Columbia and Puerto Rico. Founded in 1972, PFLAG strives to save lives, strengthening families and changing hearts, minds, and the law. www.pflag.org

GLSEN (pronounced “glisten”) is an organization whose mission is to create safe and affirming schools for all, regardless of sexual orientation, gender identity or gender expression. GLSEN has championed LGBTQ issues in K-12 education since 1990. www.glsen.org

Books

“This Book Is Gay” by Juno Dawson,

answers many questions about what being LGBTQ+ is, the difficulty and importance of coming out, and general information that could help grandparents to understand without needing to ask questions they maybe aren’t ready or comfortable asking.

“One in Every Crowd” by Ivan E. Coyote,

includes stories about being LGBTQ+ and how it feels when things aren’t going so great.



Gender Identity: Terminology

Many Americans refrain from talking about sexual orientation and gender identity or expression because it feels taboo, or because they're afraid of saying the wrong thing. This glossary was written to help give people the words and meanings to help make conversations easier and more comfortable.



Ally: A person who is not LGBTQ but shows support for LGBTQ people and promotes equality in a variety of ways.

Androgynous: Identifying and/or presenting as neither distinguishably masculine nor feminine.

Asexual: The lack of a sexual attraction or desire for other people.

Bisexual: A person emotionally, romantically or sexually attracted to more than one sex, gender or gender identity though not necessarily simultaneously, in the same way or to the same degree.

Cisgender: A term used to describe a person whose gender identity aligns with those typically associated with the sex assigned to them at birth.

Closeted: Describes an LGBTQ person who has not disclosed their sexual orientation or gender identity.

Coming out: The process in which a person first acknowledges, accepts and appreciates their sexual orientation or gender identity and begins to share that with others.

Gay: A person who is emotionally, romantically or sexually attracted to members of the same gender.

Gender dysphoria: Clinically significant distress caused when a person's assigned birth gender is not the same as the one with which they identify. According to the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders (DSM), the term—which replaces Gender Identity Disorder—is intended to better characterize the experiences of affected children, adolescents and adults."

Gender expression: External appearance of one's gender identity, usually expressed through behavior, clothing, haircut or voice, and which may or may not conform to socially defined behaviors and characteristics typically associated with being either masculine or feminine.

Gender-fluid: According to the Oxford English Dictionary, a person who does not identify with a single fixed gender; of or relating to a person having or expressing a fluid or unfixed gender identity.

Gender identity: One's innermost concept of self as male, female, a blend of both or neither—how individuals perceive themselves and what they call themselves. One's gender identity can be the same or different from their sex assigned at birth.

Gender non-conforming: A broad term referring to people who do not behave in a way that conforms to the traditional expectations of their gender, or whose gender expression does not fit neatly into a category.

Genderqueer: Genderqueer people typically reject notions of static categories of gender and embrace a fluidity of gender identity and often, though not always, sexual orientation. People who identify as "genderqueer" may see themselves as being both male and female, neither male nor female or as falling completely outside these categories.

Gender transition: The process by which some people strive to more closely align their internal knowledge of gender with its outward appearance. Some people socially transition, whereby they might begin dressing, using names and pronouns and/or be socially recognized as another gender. Others undergo physical transitions in which they modify their bodies through medical interventions.

Homophobia: The fear and hatred of or discomfort with people who are attracted to members of the same sex.

Intersex: An umbrella term used to describe a wide range of natural bodily variations. In some cases, these traits are visible at birth, and in others, they are not apparent until puberty. Some chromosomal variations of this type may not be physically apparent at all.

Lesbian: A woman who is emotionally, romantically or sexually attracted to other women.

LGBTQ: An acronym for "lesbian, gay, bisexual, transgender and queer."

Non-binary: An adjective describing a person who does not identify exclusively as a male or female. Non-binary people may identify as being both a male and a female, somewhere in between, or as falling completely outside these categories. While many also identify as transgender, not all non-binary people do.

Outing: Exposing someone's lesbian, gay, bisexual or transgender identity to others without their permission. Outing someone can have serious repercussions on employment, economic stability, personal safety or religious or family situations.

Pansexual: Describes someone who has the potential for emotional, romantic or sexual attraction to people of any gender though not necessarily simultaneously, in the same way or to the same degree.

Queer: A term people often use to express fluid identities and orientations. Often used interchangeably with "LGBTQ."

Questioning: A term used to describe people who are in the process of exploring their sexual orientation or gender identity.

Sexual orientation: An inherent or immutable enduring emotional, romantic or sexual attraction to other people.

Transgender: An umbrella term for people whose gender identity and/or expression is different from cultural expectations based on the sex they were assigned at birth. Being transgender does not imply any specific sexual orientation. Therefore, transgender people may identify as straight, gay, lesbian, bisexual, etc.

Transphobia: The fear and hatred of, or discomfort with, transgender people.

Forever

By Joanna Verney

As a new contributor to *Engage*, I have had the interesting assignment of talking to volunteers, members and employees about how they stay engaged and fulfilled. Not only have I met wonderful people, but I also had the pleasure of gaining words of wisdom from them.

These five creative and inspirational people are living proof that a fulfilling life continues well into retirement. From the words of Bob Dylan: *“May your heart always be joyful, may your song always be sung, and may you stay . . . Forever Young.”*



ALBERTA SCHOEN

Alberta aka “Bertie” has had a multitude of careers from real estate, owning a bed and breakfast, modeling, counseling alcohol and drug patients and teacher. Impressively, she is currently working on her Ph.D.!

Four years ago, she retired at 88 years old. Though retirement has not slowed her mind or body. She is still an avid reader (biblical history is her forte), performs crossword puzzles, exercises and listens to music.

When asked for what advice she would give someone preparing for retirement, her response was, “Do not retire your mind.” Obviously, she’s living proof and adheres to her own advice.

JIM YOUNG

Jim has been a volunteer here at the Center’s Library for more than three years. Jim surrounds himself with books, and his love of literature has led him to volunteer here and at the Winnetka Library, shelving and organizing books. If you are looking to investigate your heritage, visit Jim at the Glenview Library where you’ll find him in the genealogy department assisting members who wish to trace their lineages!

Jim’s advice for growing young: “Stay active and read!” Jim is always on the lookout for large print books. Keep that in mind if you have any books you’d like to donate to the Library.



Young



SHARON MOYER

A member since 2012, Sharon has an eye and a talent for aesthetics.

It began in high school when she would set up displays for events and parties, but that was put on a back burner to raise her family. Sharon began painting seven years ago and has been on the Arts Commission for the last two years. She enjoys plein air painting (outside painting) and also spends her time in the Center's Art Studio working with her favorite media—pastels.

Sharon's words of wisdom: "You are never too old to do the things you love."

JUDITH GROSS

Judith retired 11 years ago from a fulfilling career running a showroom at the Merchandise Mart for more than 40 years. She said it gave her confidence and independence. So much so, that after retirement she experienced a bit of loss. She felt her creative outlet was gone. However, she is still able to lead a fulfilling life by continuing a lifelong passion—baking! Her love of baking has been a part of her life since she was a young girl, and has become enhanced in retirement. Judith's advice: "Get involved and always do what you love."

Visit this inspirational woman in the Center's Shop where she volunteers. You might just be able to taste a sample of her delectable goodies!



CHAR PADAVONI

Char is the new volunteer coordinator at North Shore Senior Center. She stepped down from all-encompassing professional responsibilities at the American Cancer Society where she managed cancer prevention and early detection. Char now leads a fulfilling life balancing part-time work, along with volunteering as a client advocate for disabled veterans, and knitting, to name a few.

This Renaissance woman shared her advice: "Develop interests and passions before you retire."

Sing Along



with the Goldenaires



It's official: we all sound amazing when we sing in the shower or while we're driving in the car.

If you are ready to take your singing to another level, consider joining our mixed chorus, the Goldenaires. Directed by Jan Peterson since 2009, the Goldenaires rehearses from September to May and performs seven concerts each year.

"We welcome everyone to sing with us, and there's no prior singing experience necessary. We only ask that you have a passion for music," Jan said.

The Goldenaires performs regularly between September and May at local retirement communities, senior centers and other venues. The group holds three performances each year at North Shore Senior Center: a holiday concert for the Men's Club (this year on Tuesday, December 10), House of Welcome Adult Day Services for people living with memory loss, and our annual Volunteer Appreciation celebration in the spring.

Jan, who has a bachelor's of music in piano pedagogy and many years of experience as a music teacher and accompanist, ensures that participants' experiences with the Goldenaires is enriching and fun. "I put a lot of thought into the song choices and scripts. All of the music is appealing and accessible. The sheet music is set in large print to make rehearsal and performance easier."

In addition to songs of holiday cheer, the group's selections span the 1930s to the 1970s, including standards, show tunes and novelty songs. They sometimes have guest artists such as Debbie Katz Knowles who assists on percussion, flute and clarinet.

Rob Budge, a retired technology specialist, has sung with the Goldenaires for the last three years. "Our group has a wide range of musical experience and skills, and Jan makes everyone feel welcome.

She leads us through an interesting mix of songs you've heard throughout your life," he said. He went on to say the social aspect of the chorus is rewarding and the group often goes out to lunch after rehearsals.

HOW DOES SINGING HELP?

A 2018 study published in *The Journals of Gerontology* found that older adults who sang in a community choir for six months reported less loneliness and more interest in life than a control group. The study included 390 people who sang together weekly in 90-minute sessions and performed publicly three or four times.

Stephen M. Scheinthal, DO, a gerontologist and chair of psychiatry at Rowan University, said the power of participating in a choir may stem from two sources: the sense of community and the music itself. "Participation in cognitive leisure activities, such as singing groups, can offset the declines in cognitive ability, function and motor skills. Plus, going to choir gives you a sense of belonging and a sense of community," he said.

To learn more about the Goldenaires, contact Jan Peterson at 847.912.2742 or thegoldenaires@gmail.com. You may also view their video at www.nssc.org/lifelong-learning.

It's not too late to join!

Goldenaires Rehearsals

Wednesdays

10:30 a.m. – 12 p.m.

September – May

Rauner Music Room, North Shore
Senior Center, Northfield

\$60/semester for members

\$75/semester for non-members

NUGGETS FROM THE GOLDEN YEARS

by Beverly Oberfeld Friend

BLIND DATE WITH A STINGY RUSSIAN

DATE #1

Several years after becoming a widow, I had an initial blind date with a Russian who had been described to me as tall, handsome, educated, speaking imperfect English, with limited hearing ability—and stingy.

Didn't sound too great—especially the last part—but I was game. After an email, we set up a 10 a.m. date at a nearby restaurant. As an aside, Paulina, the Russian lady who made the match, was surprised I hadn't set up an evening meeting—because dim light is more flattering! Anyhow, thinking “what you see is what you get,” I arranged for the morning.

I arrived a few minutes before he did and ordered a coke (to avoid who pays for what). I had told him I would be dressed colorfully, wearing a red hat (but would not have a red rose between my teeth as it would interfere with sipping the coffee). I also wore a red scarf with purple hats printed on it and carried the “when I am an old woman I shall wear purple” poem to share with him in case we ran out of conversation (I'm a teacher and teachers always like handouts).

“Sasha” arrived. Tall? Well, taller than I am. Nice smile. I have more hair than he has (which isn't saying much). He sat down and we began to talk. He resisted ordering anything to eat and told me he only eats twice a day: breakfast and dinner. So there went any hope of lunch.

My estimate is that he understands about one in five of my words. Proof? After I had told him I was an only child, he queried whether I had brothers and sisters. I learned some about him, and while he said he was taking ESL classes, he seemed to have no information about emeritus classes. I couldn't have that! So, for something to do, I took him on a tour of the local branch of Oakton, the community college where I teach and plied him with school handouts (it shouldn't be a total loss).

Then, we took a stroll through the nearest mall. By now, I was getting even hungrier, and decided that I wasn't a shy 16-year-old and, as I am a diabetic who needs to eat, I would have to say something. I took him to the food court, told him to sit down and that I was going to get a sandwich. I asked if he would like anything. He said, coffee, so I got him that—and also got him a chocolate chip cookie because I couldn't stand eating while he merely looked on.



After I finished eating, I drove him back to his car. My impression—I think I wowed him (or at least stunned him thoroughly). He kissed my hand when we parted, and we made a second date to go to the Botanic Garden and then come back to my place for a swim and supper.

DATE #2 OR FAREWELL TO RUSSIA

Sasha's car had no air conditioning, so we took mine. As I am a member of the Botanic Garden, parking is free. So far, no costs for him. We strolled. Communication was difficult. I could see he was not going to buy a tram ride, which was OK. However, I did want him to see

the miniature railroad exhibit, so I treated him to that. Before heading home, I asked if he was thirsty. He declined, and when I said that I would like a cold drink, he said he would wait for me outside while I got it. I SAW RED! THAT WAS THE LAST STRAW!

I regretted inviting him to swim after and tried to cancel it saying I was too tired. He assured me that I could stay inside and rest while he swam. When we got to my house, he asked for bread and I gave him that and lemonade which he—obviously hungry—wolfed down.

—SIGH—

Being a good hostess, I took him for a swim in my condo association's pool. Matchmaker Paulina was also at the pool. After she told me he would hear nothing when he swam without his hearing aids, I reported my negative impressions. In response, she assured me he was certain to be bringing something to the dinner: candy, wine, flowers, something! SHE WAS DEAD WRONG.

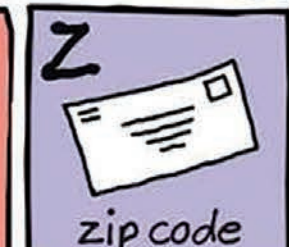
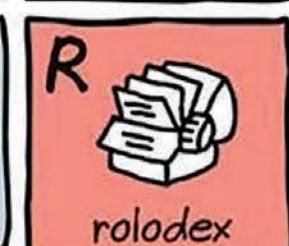
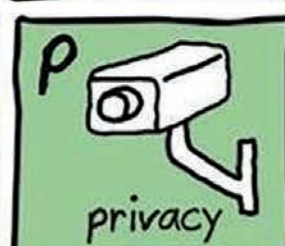
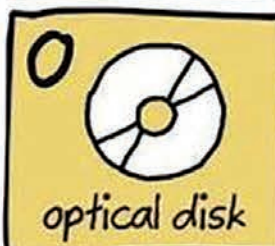
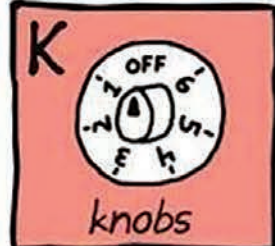
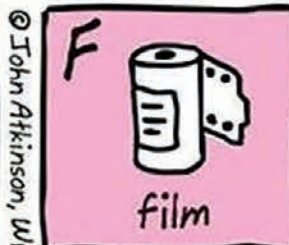
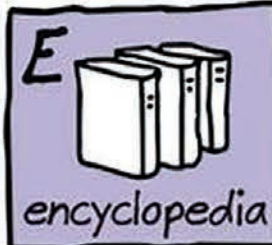
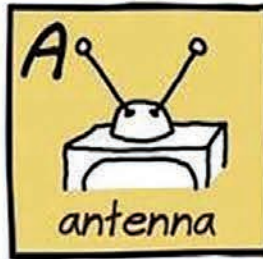
After dinner, I (lied) and told him I had to go see my mother and walked him out.

That was that!

My conclusion: I could bring a great deal into his life; unfortunately, he could bring nothing into mine. Undaunted, I forge ahead to a single's dinner, which brings out 100 women and 12 men, and JDate (a Jewish dating site). Oh, to be 25 again!

This one paid off. I met Irv . . . and that is another story . . .

alphabet of the obsolete



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www.nssc.org

Ethics at End of Life

Presented by Kerry R. Peck, Managing Partner, Peck Ritchey, LLC

Tuesday, November 19

9 - 10:30 a.m.

Glenview Village Hall, 2500 E. Lake Ave., Glenview



Participants will learn how practitioners can protect themselves in the decision-making chain of command for issues surrounding death. Kerry will review who has the right to make decisions on behalf of an incapacitated person and discuss how to protect that person's wishes and avoid a legal dispute.

1.5 CEUs available to social services professionals for \$10.

Event is free to the community.

Register at www.nssc.org or call 847.242.6243.

Year-End Tax Planning Strategies

Presented by Laurie Kaplan, CPA, Partner, &
Josh Prince, CPA, MST, Manager, MichaelSilver

Wednesday, November 20

11:30 a.m. - 1 p.m.

North Shore Senior Center, Northfield



Join the experts from MichaelSilver for a program on year-end tax planning strategies to implement before 2019 closes. This will include a discussion of some of the practicalities of aging and how it interacts with tax planning. Learn how to balance control of your assets while implementing gifting and charitable strategies. Please come prepared for an interactive presentation.

\$12/members; \$17/non-members

Lunch is included.

Register at: www.nssc.org or call 847.784.6037.

These events are open to North Shore Senior Center members, volunteers, and staff, as well as professionals and the community.