

Senior Sense



Vol. 17, No. 2

Your Resources

Think Again Before You Decide On This Type of Insurance

Are you wasting resources on insurance you may not need? Sure, some insurance like homeowner's, health and automobile insurance are necessary to help us deal with uncertainties and are often even required. But there are some types of insurance that are not as useful as you are led to believe.

Identity theft has become a big problem. Whether by way of gaining access to bank accounts using fraudulent emails or using private information to open credit accounts, thieves will use any way possible to steal identities. The Federal Trade Commission states that tens of millions have been affected by identity theft.

This being said, Identification Theft Insurance might sound like a great idea. However, the reality is, should you fall victim to identity theft, you will probably spend more time than you will money

fixing the mess. Oftentimes, insurance of this nature is included in your homeowner's insurance policies.

If you do decide that Identification Theft Insurance is necessary, make sure you read the fine print and understand your coverage. Make sure the policy provides compensation for forgone wages during the time you are trying to persuade creditors that you are a victim of ID theft. Check to see how long you are covered once you are able to collect as well as the payment per day. Also, be aware of any deductibles.

Credit insurance is another optional product that is a potential waste of time and money. More than likely it is offered to you by your credit card company, but other types of creditors such as clothing stores and car dealerships might offer it as well.

Offers of credit insurance might seem helpful should hard times come. This insurance is intended to pay your credit card bills if you become disabled, if you are laid off, or if you die. However, this insurance typically pays the minimum payment while interest continues to pile

up. It may be useful if you became unemployed and owed large sums of money on your credit card because you would avoid late payment and higher interest penalties.

There are other ways of taking care of your financial obligations, other than credit insurance, if you become disabled or die. If you have concern about paying your debt obligations if you become disabled, it is better to purchase disability income insurance through your employer, if available, or from a private insurance company. You will probably get better coverage that will allow you to pay other household expenses in addition to your debt. Likewise, you can purchase life insurance to cover your financial obligations if you die. When calculating the amount of life insurance you need for your dependents in the event of your death, you can include credit and other financial obligations into the calculation. If you die with credit accounts in your name only, the balance owed becomes a liability of your estate.

Credit insurance is expensive and the policies are restrictive. Oftentimes, the insurance will only cover your payment for a short time, making it ineffective if you are out of work or ill for more than a few months. Also, the coverage usually does not include those who are self-employed as well as others. Many are unaware that their circumstances are not included until they need to utilize the insurance they have paid for.

Source: Susswein, R. (Fall 2008). Insurance you may not need. Consumer Action News, p. 6.

Your Health

More Strength Training Exercises

In this issue we add more strength training exercises. These look simple, but they can have big effects if you do them 2-3 times a week. Wait at least 48 hours before doing the same exercise again.

Toe Stands

This exercise will make your calves and ankles stronger. You will feel more stable and have better balance.

1. Stand with feet shoulder-width apart. Use a chair or counter for balance.
2. Slowly push up as far as you can on the balls of your feet as you count to 4. Hold for 2-4 seconds.
3. Then slowly lower your heels back down as you count to 4.
4. Repeat 10 times. Rest 1 minute. Repeat 10 times more.

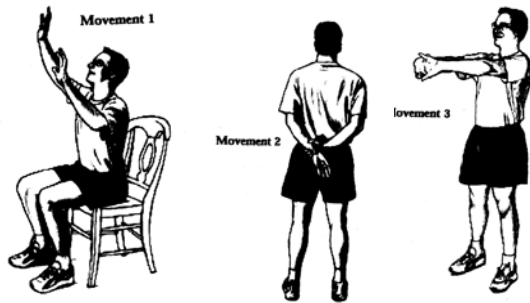


Tips: Only use the chair for balance. Don't lean on it. Breathe regularly as you do the exercise.

Finger Marching

This exercise will strengthen your upper body and grip. Your arms, back and shoulders will also get more flexible.

1. Stand or sit forward in a chair with your feet on the floor. Feet are shoulder-width apart.
2. **Movement 1:** Pretend there is a wall in front of you. Slowly walk your fingers up the wall until your arms are above your head. HOLD and wiggle your fingers for 10 seconds. Then slowly walk them back down.
3. **Movement 2:** Try to touch your hands behind your back. If you can, reach for the opposite elbow with each hand – or get as close as you can. HOLD for about 10 seconds. Feel the stretch in your back, arms, and chest. Release your arms.
4. **Movement 3:** Interlace your fingers in front of your body. Rotate your hands so your palms face an imaginary wall. Stand up straight, but curl your shoulders forward. Feel the stretch in your wrists and upper back. HOLD 10 seconds. Release and repeat finger marching 3 times.



From Fruit to Nuts Waffles

- 2 multigrain or whole wheat frozen waffles
- 1 teaspoon cornstarch
- 1 teaspoon cold water
- ½ cup frozen, unsweetened peach slices
- ½ cup frozen, unsweetened blueberries
- 2 teaspoons chopped pecans

- 2 teaspoons sugar (or 1 packet artificial sweetener)
- 2 teaspoons plain non-fat yogurt
 - 1) Toast waffles according to package directions.
 - 2) In a small cup, blend the cornstarch and water until smooth.
 - 3) Combine the cornstarch mixture with the peaches, blueberries, pecans, and sugar in a microwavable cereal bowl. Cover with plastic wrap.
 - 4) Heat fruit mixture on medium in the microwave for 2 minutes. Stir. Continue to microwave for 2 minutes more until fruit is soft and thickened. (May need longer time to cook since microwaves vary in power. Stir more often during final minutes to be sure it does not boil over.)
 - 5) Top each waffle with half the fruit and a teaspoon of yogurt. If desired, microwave 20-30 seconds more to heat the yogurt. Serve immediately. Makes one serving.

Nutrition analysis with sugar:

Calories:	324
Carbohydrates:	55 grams
Fat:	10 grams
Protein:	6 grams
Sodium:	429 milligrams
Cholesterol:	0 grams
Fiber:	7 grams

Nutrition analysis without sugar:

Calories:	305
Carbohydrates:	50
Fat:	10 grams
Protein:	6 grams
Sodium:	429 milligrams

Cholesterol:	0 grams
Fiber:	7 grams

Your Relationships

Coping with Hospitalization

Sooner or later, you or your loved one will probably need to visit a hospital. These visits may be brief visits for outpatient testing, or an emergency room visit for a fall, or a planned admission to the hospital for longer care. Hospitals are vital resources in the health care system, but they can also pose big challenges for caregivers and loved ones.

Here are some tips for coping when your loved one is facing hospitalization:

- **Prepare a medication list.** Prepare for the possibility of hospitalization now in case you have to go in a hurry. Keep a list of your loved one's medications handy at all times, including the name of the medication, the dosage, the number of doses taken daily and the times at which they are taken. Be sure to keep it updated and with you at all times, and keep a spare copy at home.
- **Assemble your support.** It often works best to have a friend or family member go with you when you take your loved one to the hospital. This way, your friend can remain with your loved one in the waiting room while you handle the paperwork with the hospital staff. Talk to a friend about this beforehand so everyone will be prepared.

- **Pack an emergency bag now.** What if you needed to leave for the hospital in a hurry? You wouldn't want to be worried about what to pack. Before an emergency arises, find an old satchel or small suitcase and pack items such as contact information for family, doctors, and friends, that medication list, copies of important papers such as insurance cards, supplies such as spare eyeglasses and hearing aids, a change of clothes, pajamas, toiletries, and a pad of notepaper. Stick a note on the outside of the bag to remember your cell phone and house keys.

Whether your hospital visit is to the emergency room or for a planned stay, these tips will help everything go more smoothly:

- **Get to know the hospital staff working with you.** They may not have much time to sit and chat, but they do need to know about your caregiving and your loved one's needs. Through your experience, you have become the expert on the care of your loved one. This is especially true if your loved one has memory loss or dementia. From the doctors and nurses, you may expect respect for your knowledge of your loved one's medical history. However, recognize that some things in the hospital will be done differently than you do them at home. You have cared for your loved one and know all about what works best for him, whereas the doctors and nurses usually have many patients to care for. They have to set priorities to meet the complex needs of all the patients. If

you want to provide some care for your loved one at the hospital by yourself, seek advice from and negotiate with the nurses. If they decline your assistance, don't be offended. Try to find a place for yourself as part of the caregiving team, but respect the practices that the staff must follow.

- **Try to be patient.** When your loved one is admitted to the hospital or transferred to a new unit, the doctors and nurses need time to assess her and to get to know her. They can benefit from information you can provide about your loved one, but try to do it when they are ready. They may not be able to give you lots of information about your loved one's condition until they have completed their assessments and examinations. They may ask you questions that you have already answered with someone else, but remain patient. Losing your temper will not result in better care for your loved one.
- **Try to use this time as a respite from your caregiving duties.** Many caregivers don't have the resources or opportunities to take good care of their own needs day to day. If your loved one's condition is not critical, perhaps this is a chance to do something for yourself. Let the hospital caregivers take over for awhile. Some intensive care units provide a pager to families who leave the hospital for reaching them if a problem arises. Ask about it. You could also give the nurses your cell phone number for emergencies when you don't stay at the hospital.

- **Create a plan for sharing news.** Your family and friends will want updates on your loved one's condition, but you may not want to be interrupted by lots of phone calls and visits. Consider setting up a telephone or email tree, in which you keep one person up-to-date and that person notifies others on your behalf.
- **Talk with the hospital social worker.** This person is trained to help you understand your caregiving options after your loved one is discharged. Your loved one may be discharged to a rehabilitation facility, a hospice, assisted living, or back home. In any case, the social worker can help you plan how to find resources to help provide continuing care.

Hospitalization can be a stressful change to your usual caregiving routine. Some caregivers consider hospitalization to be a failure on their part – if only they had done a better job, hospitalization would not be necessary. Instead of blaming yourself, try reframing the situation to recognize that you are one part of a caregiving team. You are the “first string,” but professional healthcare providers are the “reserves” who can back you up when necessary. You cannot know and do everything, but you can do your best to work with the team to ensure quality care for your loved one.

References: National Institute on Aging, caregiver.com, and other sources.



THE UNIVERSITY OF GEORGIA
COOPERATIVE EXTENSION
Colleges of Agricultural and Environmental Sciences & Family and Consumer Sciences

Dear Friend:

SENIOR SENSE is a quarterly publication provided by your local county Cooperative Extension office. It is prepared by Extension Family & Consumer Sciences specialists at The University of Georgia specifically for the educational needs of older Georgians.

Please contact your local Cooperative Extension office for more information on these and related topics.

Learning *for* **Life**

Contributors to this issue:

Joan Koonce, Ph.D., Extension Financial Management Specialist
Connie Crawley, MS, RD, Extension Nutrition and Health Specialist
Wonjee Cho, CFD doctoral student, and Don Bower, Ph.D., CFCS, Extension Human Development Specialist

Past editions of Senior Sense are available at <http://www.fcs.uga.edu/ext/pubs/>

COOPERATIVE EXTENSION

U.S. DEPARTMENT OF AGRICULTURE
THE UNIVERSITY OF GEORGIA
COLLEGES OF AGRICULTURAL AND ENVIRONMENTAL SCIENCES &
FAMILY & CONSUMER SCIENCES
ATHENS, GEORGIA 30602

OFFICIAL BUSINESS

The University of Georgia and Ft. Valley State University, the U.S. Department of Agriculture and counties of the state cooperating. The Cooperative Extension Service offers educational programs, assistance and materials to all people without regard to race, color, national origin, age, sex, or disability. For large print, taped or braille editions of this publication, contact the author.

An Equal Opportunity/Affirmative Action Organization Committed to a Diverse Work Force

CHFD-E 93

Senior Sense 2-7

April, 2009

Issued in furtherance of Cooperative Extension work, Acts of May 8 and June 30, 1914, The University of Georgia College of Agricultural and Environmental Sciences and the U.S. Department of Agriculture cooperating.
J. Scott Angle, Dean and Director