Aging Well for the Group Moderator

Welcome to Aging Well! The purpose of this manual is to introduce you to Aging Well and provide suggestions on how to conduct the particular workshops. This is an evolving document and any suggestions for improvement that come from your own experience conducting the workshops are welcome and encouraged.

Evidence based programming is an important component of SASH, but many of the evidence based programs require local area experts. As SASH has grown across the state, it became apparent that there could not be similar programming at all of the sites requiring area experts. Aging Well was created to address this need. It can be run by a SASH coordinator or volunteer and there is no particular educational background that is needed to conduct the workshops. The bulk of the content of the workshops comes directly from the participants. The packets and information for each week serves as a guide for the conversation.

Take the time to enjoy the experience
On a personal note, I enjoyed immensely the time I spent with participants in the three groups I conducted. It was an unbelievably rewarding experience. I felt privileged to be a part of often meaningful and powerful discussions. Many of the conversations were light hearted and I enjoyed these moments equally. This manual’s intention is to help make your experience with Aging Well as meaningful as my own. That being said, you may find that the way in which you successfully conduct Aging Well is quite different than the way I did. Please inject your own personality. I certainly did, and importantly I did not follow exactly what I have in the manual. I created it reflecting my own experience. I included some ideas I wish I had had before I conducted my own workshops and other that I did not use, but thought others may find helpful. Use the manual as a guide to help you along the way. I would encourage you to read through the first twelve pages (until the outlines) prior to the first workshop.

Please also take the time to read the section on research. If you are willing to collect the necessary surveys to assist me in my research project, I will need to communicate with you regarding the research.

Thank you,
Brian Costello

Please do hesitate to e-mail me with any questions at Brian.v.Costello@gmail.com. Use the subject line “Aging Well.” I will try to respond to all e-mails in a timely manner.
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Aging Well is designed to be shared. If you think an institution or organization would benefit from Aging Well, please contact Brian.v.Costello@gmail.com.

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Conducting Aging Well

Recruiting participants for Aging Well
Recruiting for Aging Well does not have to be time intensive, but there are some small things to be done before the workshops to help attendance.

1. At least one week before the workshops, put a notice in the SASH Flash or in other literature to be distributed to residents at the housing site or community.

   Here is a sample text that you can use for your SASH Flash: “Starting DATE AND TIME, the first of an eight-week program titled Aging Well will be held. The title of the first workshop is Aging Well Defined: Reframing the way we think about aging. The workshops will be moderated by WHO AND SOME ACKNOWLEDGMENT. Each week, a topic of importance to aging will be discussed. The topics will include stress management, coping with changes that accompany aging, the aging mind, life transitions, and the benefits of aging. Aging Well is open to all and everyone is encouraged to attend. If you cannot attend the first meeting, the workshops will be held every DAY OF THE WEEK at TIME until the WHICH WEEK week of MONTH.”

2. At least one week prior to the workshop, place flyers in the housing site with the time and date. An example of a possible flyer is included. (Electronic copies of the flyer that can be modified for your workshops are available on request).

3. If there are particular participants that you think may benefit from Aging Well, it can be helpful to mention it to them in person or by phone.

4. If there is a SASH update meeting or other meeting in the few weeks before Aging Well, have an announcement during the meeting in which Aging Well is explained.

Aging Well Binders
You should have a number of binders prepared for each of the participants. Estimate how many participants you think will show up and prepare this number. Have extra handouts for the first session (and subsequent sessions). The number of people who show up may surprise you.

If you need to, you can ask for a small contribution from willing participants to defray the costs of the binders. Though, fortunately materials for Aging Well are relatively inexpensive. It is just the cost of the paper and the binders. If at all possible, distribute the Aging Well materials at no cost to the participants.

Size of the groups
The format of Aging Well is a discussion and it was designed for groups of up to 15 people. The workshops were occasionally conducted with a couple more, but it can dilute the experience. It becomes more difficult to have participation from everyone, if the groups are larger than 15. If there is enough interest, consider
conducting multiple workshops simultaneously or repeating the workshops after the initial group.

**Coffee and Tea**
Consider preparing coffee and tea for the participants. You may find that one participant is willing to take on this role to save you time. If there is not funding for the coffee and tea, consider asking participants for a donation if they are interested. (Of course, only ask for a donation if the participants actually want to have coffee and tea during the workshop, some may not)

**Reminders**
At the first meeting collect everyone’s name and phone number. In the subsequent weeks, it can be helpful to call some or all participants 5-10 minutes before the workshops to remind them. You may be aware that some participants will need to be reminded due to cognitive issues and it is particularly important to call these participants.
Have a flyer (or multiple flyers) up throughout the 8 weeks with the recurring time, day of the week, and place of the Aging Well meetings. I

**Providing information to the group**
The text included in each of the packets includes some helpful information on the various topics and the discussion questions that relate to the text. For some workshops there are suggested readings. Before the workshop familiarize yourself with the text. Using the text as a guide, present the information to the group. **If you would prefer, have group members volunteer to read the text.** If you have access to a whiteboard, consider writing salient points.

**Questions**
There are questions provided for each of the workshop that relate to the topics. Some of the questions have very obvious answers, but many require significant thought. The questions are intended to guide the discussion. Some weeks you may find that you use most of the questions verbatim, but in other weeks you may find that the content generated poignant discussion without necessitating the prescribed questions. The discussion should feel organic, not contrived. You may find that phrasing the questions differently may suit your style better. You may also come up with better questions for your mix of participants.

These questions, however, have been used successfully with multiple groups. You will find a “Moderator Version” for each of the workshops with notes on possible responses to the questions and on how to field the responses. You will also find an outline for each workshop that more generally explains a suggested approach to the workshop.

**Quotes**
For several of the Aging Well workshops, there are quotes related to aging or other topics. Call attention to quotes you like or think the participants may like to hear.
The quotes can be a launching pad for the discussions. If you are using a white board, consider writing quotes on the board.

If you would like to, collect meaningful quotes from the participants. Send them to Brian.v.Costello@gmail.com if you would like to.

**Optional Assignments**
Each workshop has an optional assignment. At the end of the workshop, mention the assignment but reiterate the fact that it is optional. You may find that participants are not doing the optional assignments during the 8-weeks of Aging Well. However, some participants may return to the assignments after the 8-weeks.

**Behavioral Activation and Activity Lists**
The idea behind the activity lists that are introduced throughout Aging Well come from Behavioral Activation. Behavioral activation comes from behavioral psychology. Simply the idea is that by engaging in pleasurable activities, one is more likely to be engaged and less likely to focus on distressing thoughts. This is not to say that the patterns of thoughts of the majority of seniors are distressing. However, the idea is that by engaging in more pleasurable activities, one can improve quality of life and it may also help to alleviate or prevent psychological distress.

**Mindfulness**
Mindfulness is introduced in Week 2. You will find a more detailed description of it in Week 2’s outline, “Stress Management 101” and “moderator version.” Briefly it is nonjudgmentally paying attention to the present moment. It can be cultivated through practice and it is a quality that we all possess. Though few of us are mindful most or even all of the time. Some participants may already be familiar with the concept as it is becoming an increasingly popular way to improve quality of life and regulate stress.

Mindfulness and its relationship to aging was addressed in the three pilot groups informally, and formally in the fourth Aging Well group as a regular part of each workshop. There is an exercise in Week 2 on mindfulness. If the group takes to the idea, you can start subsequent workshops with 1 minute of mindfulness. If your participants do not seem to like the idea, then it is not essential to return to it weekly. Though it is worth trying out, as initially dismissive participants may come to enjoy its practice.

**Conducting Aging Well Workshops**
An important component of Aging Well is the group and the group dynamic. The SASH coordinator or other SASH staff will take on the role of moderator and it is important to understand the basics of how to run a group with special considerations for the older aged population.
How Groups Work
It is important to understand that Aging Well is not group therapy; it is not conducted by anyone trained in therapy nor is it a substitution for work with mental health providers. However, much of the theory behind Aging Well is derived from behavioral psychological theory and it can be helpful to understand how group therapy works in order to have more of an appreciation of what the benefit of the group can be. Yalam outlines eleven factors in his discussion of the theory of group psychotherapy and some of these factors can be applicable to the Aging Well groups. The eleven factors are
1. Instillation of hope
2. Universality
3. Imparting Information
4. Altruism
5. The corrective recapitulation of the primary family group
6. Development of socializing techniques
7. Imitative behavior
8. Interpersonal learning
9. Group cohesiveness
10. Catharsis
11. Existential factors

1. Instillation of hope
The prospect of aging can be daunting for some and a breeze for others. Individuals in Aging Well will be at different points on the continuum of ease with the process of aging, and this can be beneficial. Those succeeding with certain aspects of aging can inspire others and serve as a benchmark for healthy aging. For example, if one individual has chronic pain due to arthritis in the knees, but learned to cope with the pain through relaxation techniques and losing weight with diet and exercise, other group members struggling with similar pain may find hope in this individual’s story. It is important to find stories of hope in the group. In particular, it can serve the group well if there are stories of success and positive change as a result of Aging Well.

2. Universality
Members of Aging Well groups are all aging and will share common ground for positive discussion on this basis alone. In addition, members of the group will likely have faced similar struggles and experienced similar accomplishments. The group moderator can call attention to universal themes as they arise and help others understand that they are not the only ones facing the same difficulties. It may be easier to find common themes relating to the negative aspects of aging, however, it is important to call attention to the positive aspects of aging or to strong coping mechanisms that are universal. This concept arises from positive psychology theories that have helped to shape Aging Well. For example, grieved the loss of a loved one, call attention to the fact that many of the group members were fortunate to have meaningful relationships with loved ones and to have used supports to help in the grieving process.
3. Imparting Information
At the beginning of each Aging Well Workshop, the moderator will give a brief presentation imparting important information on the day’s topic. During this time it can be useful to answer any questions from the previous week that were left unanswered. Also, the handouts that accompany Aging Well will impart valuable information to the participants.

4. Altruism
Altruism, unselfish acts for the benefit of others, offers tremendous benefits to group work. The act of helping others without the expectation of personal gain has been demonstrated to improve mental health. Sharing a personal anecdote to help other participants is altruistic all on its own, and proper attention should be paid to those moments in Aging Well. Thanking a participant for sharing and calling attention to how it helped others can lead to improved group morale and increase the likelihood that other participants will share.

5. Imitative Behavior
In group work people will often unconsciously imitate the moderator and sometimes other members of the group. This benefit can arise when the moderator discusses his or her own experience during some of the exercises. Also, if an outspoken and well-liked group member is adopting skills discussed and enjoying them, other group members may be more apt to follow.

6. Group Cohesiveness
Acceptance and support from fellow participants, key components of group cohesiveness, can lead to a better overall group dynamic. By paying attention to the factors and using this manual as a guide, group cohesiveness can be developed. If the participants are not getting along and participation is low, it can be helpful to reread the manual and choose elements to work on to improve group cohesiveness.

7. Catharsis
Catharsis, a derivative of the Greek word “to clean,” is the unloading of one’s emotions with resulting relief. This may be an important part of Aging Well for some participants. However, it is important to note that catharsis alone is not enough to lead to positive change. If a participant is frequently unburdening themselves, by telling emotionally charged stories, but not participating otherwise, it would be wise to continue to encourage the participant to practice new skills. If the unloading is of an intensity that is disturbing to the group or to the participant him or herself, it may be helpful to consider additional supports for the participant.

Preparation for Workshops
Prior to each workshop it can be helpful to familiarize yourself with the participants who will be attending. If it is known ahead of time, consider reviewing the person centered interviews and healthy aging plans for participants who are less familiar. It is best to start the group with a clear mind and mental preparation can improve your ability to facilitate the group.
1) Attempt to schedule some time prior to the start of the group to review the notes from the previous session and prepare for the current session’s discussion.
2) Make sure you have all of the necessary materials for that day’s session ready with an appropriate number of handouts (Hopefully, most people who join Aging Well will have a binder with all of the handouts for the full 8 weeks). Consider having extra handouts from previous sessions for people who drop in. (*For workshop #2, have navel oranges for each participant!!)
3) Prepare coffee and tea.
4) For participants who may forget the time of the group due to cognitive or mental health difficulties, remind in person or by phone the day of the group.

**Consideration and Rules**

**Don’t Call it a Group**
Although group has been used repeatedly throughout the description, call Aging Well anything but a group to improve acceptance and attendance. In a study by Arean and Robinson (1997), simply changing the name of a psychoeducational group from “group” to “class” resulted in a 50% increase in acceptance of the group. The word class can also carry a stigma, so other words such as “workshop”, “meeting”, “seminar” or “gathering” should be used as alternatives. Decide on the term you prefer, but do not use the word group.

**Rules**
Explain at the beginning of each workshop what the agenda is and what participants can expect to learn that day. Aging Well requires a group dialogue and individuals may want to speak about personal problems even if uncomfortable doing so (no participant is expected to talk about personal problems). Establishing rules or guidelines can help to decrease the discomfort a group member may feel. (Note this was not done during the pilot groups, so only do this if you think your group would benefit.)

Here is a list of example rules:

1. Come on time
2. Participation. Remind group members that it is not required but strongly encouraged and also remind group members that participation does not have to mean sharing personal stories
3. Reserve criticism or judgment. It is not a place to confront others, it is a place to help others
4. No one has to speak unless the individual is willing to do so.
5. Personal information does not have to be shared, but can be shared if the individual would like to.
6. Information shared in the group should be kept within the group (however it is important to remember that individuals may forget this rule).
7. Please be considerate of the time when sharing stories
8. Actively listen to other’s thoughts and stories

**Group Process/How to foster a positive environment**

**The role of the moderator**
Facilitating discussion comes to some more naturally than others, but there are some techniques that all can benefit from learning about to improve upon innate ability.

The primary role of the facilitator is to initiate a discussion, activate individual participation, re-direct the discussion when it goes on a tangent and to close the group. The question guides accompanying each week will help to guide dialogue but there are some other things to keep in mind.

**Positive Reinforcement**
Positive reinforcement is a technique to be utilized to help to improve the quality of the discussion. When a group member makes a particularly insightful or enlightening point or suggestion, interject a statement such as “excellent point,” “I hadn’t thought of it that way.” Also it is important to use poignant statements as launching pads for discussions by restating the point to the group and asking a follow-up question to the group as a whole or a particular individual.

**Redirecting.**
If the group is going of on a tangent or being overtaken by a few individuals, interrupt the dialogue by saying something along the lines of “Uh huh, well that was an interesting aside. One thing that I wanted to make sure that we had the time to discuss was . . .” If you find that the asides are interesting and engaging the group, consider allowing the discussion to continue particularly if the group has not been engaged by the original topic of conversation.

**How to Generate Discussion**
The best manner to generate discussions is to ask questions to the group. If no one is volunteering an answer, start the dialogue yourself or consider directly asking someone. There is a list of questions with an answer guide in the moderator version to help facilitation for each week of Aging Well.

**Tangents and Asides**
You may find that you spend significant time talking about topics that relate to aging that are not in the handout. That is okay, and if the participants are interested you should help to facilitate the discussion. It is important though to move the conversation forward at a reasonable pace because some participants will look forward to and expect certain topics to be covered.

Some tangents are not worth spending significant time on. Many participants will simply want to share stories from their past, not related to aging. This is certainly expected and encouraged, but sometimes one story may lead to another and
significant time can pass with little focus on aging or the topic of the day. Recognize when this happens, and interject if you have to by saying something like, “there is an interesting question here in the packet.” Or say, “I wanted to make sure that we had time to talk about (and then read or present the text that leads to subsequent questions).”

**Making Sure That Everyone Participates**

As the moderator, it is your role to ensure participation from everyone. Some participants may take over the conversation and others will say very little. Make sure that you ask (preferably some of the easier questions) to the quiet group members. If you remember personal information about a group member that is relevant to the discussion, ask the quiet group member something related to what you know about him or her. For example say, “Dawn, I know that you go swimming twice a week. How do you feel after you swim?”

**Problem Members**

*The instigator*

Some participants may say things that upset other participants. This can especially be the case when a participant is telling the participants how to live their lives, or handle situations when the participants are not asking for advice. It can be difficult to avoid these situations, and if you need to it can be worth saying something to the participant tactfully after one of the workshops. Although, if you can simply steer the conversation away from that, or interject statements like, “Joe, now we appreciated your opinion, but Bob may approach the situation differently.” Or you can say something more general like, “We all, of course, have to make these decisions for ourselves. Every person is different.”

*The storyteller*

This person will go in to great detail about stories from their recent or distance past and monopolize the groups time. It is important to redirect this individual as much as possible and politely remind the person that time is limited.

**Special Considerations for working with an older population**

Older people can require more time and need more repetition to learn new information. With age cognitive slowing occurs, but this does not imply an inability of learning new information rather that the speed of processing new information is now slower. For this reason it is important to deliver information slowly and to repeat important elements.

It is advised to take time at the end of each Aging Well session, to recap the important points and remind of any optional assignments to be done for next week. (Though you may find that you rarely have time).

**Accounting for disabilities common in late life**

Visual and hearing impairment are common later in life and therefore it is important to accommodate for this as much as possible. Make sure that you speak loudly and
ask all participants if they can hear at the beginning of each session. Remind quiet group members to speak loudly and clearly during group discussion. All of the handouts are printed in a larger font.

Language skills vary among older people more so than among the young. Immediate word recall difficulties and the inability to discriminate speech occur more often with older individuals. Pay attention to how well people are receiving the information and do not hesitate to reinforce information to ensure that all individuals get the intended message.

**Individuals with Cognitive Impairment**

It is important to recognize that individuals may be suffering from more cognitive issues than is evident. It may be helpful to review the cognitive screens from the assessments after it is apparent who is participating in Aging Well. Most participants will be understanding of supportive of all other participants. However, it may occur that a participant may become frustrated when individuals repeat themselves or take up others times with questions that have already been answered. It is important to do your best to anticipate this and prevent it when possible. If you sense that one individual is becoming very frustrated with cognitive issues of another, consider speaking with the individual after the meeting. If an individual is known to have dementia, it is important to offer more active support, direction, and positive reinforcement.
Research

Aging Well is based on evidence-based programming and the response from the pilot groups was overwhelmingly positive. However, the effectiveness of Aging Well has not yet been demonstrated through research. There is an ongoing research project, “The Effectiveness of Aging Well,” that will be used to evaluate the current program and guide any future changes. The research is survey based and requires willing participants to fill out a survey on the day of the first workshop and after the final workshop. The surveys should take about 5-10 minutes to fill out, and they do not ask for any identifying information. Participation in the research is not a requirement to be a part of Aging Well, and this should be clear to the participants.

I invite and encourage all sites to join in the research effort. It will require minimal work on the part of the moderator and the participants. I have included the handout regarding research that the participants will have this in their binder. You should read it to the participants before they agree to participate in the research and answer any questions. I have also included sample consent forms and sample surveys. However, there may be subtle changes to the final surveys. You may want to plan to have the first session run 15 minutes late to allow time for participants to fill out the surveys before the workshop. If you are going to do this, mention on the flyer and in the SASH Flash that the first workshop may run 15 minutes late. You could also just limit the discussion to 45 minutes. On the day of the last workshop, you will want to allow some time at the end for participants to fill out surveys.

Please e-mail me at Brian.v.Costello@gmail.com, if you would like to be a part of the research. I will give you further instructions and e-mail you the final surveys. I ask that you include and mark* surveys in each of the participant’s binders. You will have to collect the surveys. I will give you instructions on how to do so, and I will send you two stamped and addressed large envelopes so that you can mail them to me (or to Cathedral Square). It will probably be easiest to ask participants to put the surveys directly into the envelope.

Thank you!

*You will notice in the upper right hand corner of the survey that it says Code #____. You will have to put a letter (which I will assign each site) and number on each form. The letter and number should be the same on the surveys in a participant’s binder. Such that the three surveys would each read A1, for example, in the upper right hand corner. This way I will be able to compare the before and after responses of an individual participant without identifying the participant.
Aging Well Research

You are being invited to take part in a research study because you are participating in the Aging Well Program. This study is being conducted by a medical student and the University of Vermont College of Medicine.

The purpose of this study is to determine the effectiveness of the “Aging Well” program.

If you would like to take part in this research, you can do so by completing the before and after surveys that you will find in the binder. Each survey should take 5-10 minutes to complete. Please do not write your name or include any identifying information on your survey.

The only risk associated with participating in the research may be an accidental breach of confidentiality. However, your confidentiality will be protected by not collecting your name. The surveys will be coded using a random number that will not be connected to your name. Participation in this research is voluntary.

To participate, you can put your turn your survey in the envelope that your moderator has. After all surveys are turned in, the moderator will seal the envelope. The moderator will not look at any participants answers. By completing and submitting the survey, you are consenting to having your answers used as part of a research project.

This is not a requirement to participate in the Aging Well Program.

If you have any questions, please contact Brian Costello. You can e-mail him at Brian.Costello@uvm.edu or you can phone him at 802-370-6749. The faculty sponsor from UVM is Dr. William Pendlebury, the director of the UVM Center on Aging. You can contact him at 802-656-0292.

If you have questions about your rights as a research participant in a research project, you should contact Nancy Stalnaker, the Director of the Research Protections Office at the University of Vermont at 802-656-5040.

Thank you!
To be completed BEFORE WORKSHOP# of the Aging Well Program.

Please Complete basic demographic questions:

1) What is your sex?
   Male    Female

2) How old are you?
   50-60    60-70    70-80    80-90    90-100    100+

Circle what best applies to you

1) There are positive aspects of aging
   Strongly Agree    Agree    Neutral    Disagree    Strongly Disagree

2) There are many activities that I can take part in that add pleasure to my day
   Strongly Agree    Agree    Neutral    Disagree    Strongly Disagree

3) In the past 8 weeks, I have tried a new activity (e.g. new hobby, taken an adult education course, new volunteer opportunity, new exercise routine)
   Strongly Agree    Agree    Neutral    Disagree    Strongly Disagree

4) There are negative aspects of aging, but I have skills to manage them
   Strongly Agree    Agree    Neutral    Disagree    Strongly Disagree

5) I am educated in stress management
   Strongly Agree    Agree    Neutral    Disagree    Strongly Disagree

6) If I was under stress, I would engage in a pleasurable activity to help me become less stressed
   Strongly Agree    Agree    Neutral    Disagree    Strongly Disagree

7) Stress can weaken the immune system
   Strongly Agree    Agree    Neutral    Disagree    Strongly Disagree

8) I have skills that help me to manage stress
   Strongly Agree    Agree    Neutral    Disagree    Strongly Disagree

9) There are activities that I do that help my brain health
   Strongly Agree    Agree    Neutral    Disagree    Strongly Disagree

10) Older people can improve certain parts of their memory through intellectually stimulating activities
    Strongly Agree    Agree    Neutral    Disagree    Strongly Disagree

11) There are reversible causes of dementia that my doctor can test for
    Strongly Agree    Agree    Neutral    Disagree    Strongly Disagree

12) The expression "with age comes wisdom" is true for the most part
    Strongly Agree    Agree    Neutral    Disagree    Strongly Disagree
13) In general, older people have better control of their emotions

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<th>Neutral</th>
<th>Disagree</th>
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14) On average 70-80 year olds are happier than 30 year olds

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15) On average 70-80 year olds are less stressed than 30 year olds

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<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
</table>

16) On average 70-80 year olds worry less than 30 year olds

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
</table>

17) On average 70-80 year olds are less angry than 30 year olds

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
</table>

18) It is easier to live “in the moment” now than when I was younger

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
</table>

19) I am familiar with the concept of mindfulness.

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
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</table>

20) I practice mindfulness regularly.

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
</table>

21) I have had life experience that has prepared me for some of the difficult parts of aging

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
</table>

22) Some in-home services help to preserve the independence of older people

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
</table>

23) During a life transition (move, retirement etc.), it is important to maintain a routine

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
</table>

24) If I needed to accept care from family or other people, I would have an easy time doing so

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
</table>

25) I would be willing to add another activity to my schedule (e.g. new hobby, take an adult education course, new volunteer opportunity, new exercise routine)

<table>
<thead>
<tr>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
</table>

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To Be Completed AFTER THE LAST WORKSHOP of Aging Well.
Please Complete basic demographic questions:

3) What is your sex?
   Male    Female

4) How old are you?
   50-60    60-70    70-80    80-90    90-100    100+

Circle what best applies to you

26) There are positive aspects of aging
   Strongly Agree    Agree    Neutral    Disagree    Strongly Disagree

27) There are many activities that I can take part in that add pleasure to my day
   Strongly Agree    Agree    Neutral    Disagree    Strongly Disagree

28) In the past 8 weeks, I have tried a new activity (e.g. new hobby, taken an adult education course, new volunteer opportunity, new exercise routine)
   Strongly Agree    Agree    Neutral    Disagree    Strongly Disagree

29) There are negative aspects of aging, but I have skills to manage them
   Strongly Agree    Agree    Neutral    Disagree    Strongly Disagree

30) I am educated in stress management
   Strongly Agree    Agree    Neutral    Disagree    Strongly Disagree

31) If I was under stress, I would engage in a pleasurable activity to help me become less stressed
   Strongly Agree    Agree    Neutral    Disagree    Strongly Disagree

32) Stress can weaken the immune system
   Strongly Agree    Agree    Neutral    Disagree    Strongly Disagree

33) I have skills that help me to manage stress
   Strongly Agree    Agree    Neutral    Disagree    Strongly Disagree

34) There are activities that I do that help my brain health
   Strongly Agree    Agree    Neutral    Disagree    Strongly Disagree

35) Older people can improve certain parts of their memory through intellectually stimulating activities
   Strongly Agree    Agree    Neutral    Disagree    Strongly Disagree

36) There are reversible causes of dementia that my doctor can test for
   Strongly Agree    Agree    Neutral    Disagree    Strongly Disagree

37) The expression “with age comes wisdom” is true for the most part
   Strongly Agree    Agree    Neutral    Disagree    Strongly Disagree
38) In general, older people have better control of their emotions
Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree

39) On average 70-80 year olds are happier than 30 year olds
Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree

40) On average 70-80 year olds are less stressed than 30 year olds
Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree

41) On average 70-80 year olds worry less than 30 year olds
Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree

42) On average 70-80 year olds are less angry than 30 year olds
Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree

43) It is easier to live “in the moment” now than when I was younger
Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree

44) I am familiar with the concept of mindfulness.
Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree

45) I practice mindfulness regularly.
Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree

46) I have had life experience that has prepared me for some of the difficult parts of aging
Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree

47) Some in-home services help to preserve the independence of older people
Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree

48) During a life transition (move, retirement etc.), it is important to maintain a routine
Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree

49) If I needed to accept care from family or other people, I would have an easy time doing so
Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree

50) I would be willing to add another activity to my schedule (e.g. new hobby, take an adult education course, new volunteer opportunity, new exercise routine)
Strongly Agree  Agree  Neutral  Disagree  Strongly Disagree

If you submit this form (either by placing it into the secure drop box or by using the addressed and stamped envelope), you are consenting to have your answers used for research purposes. Please do not include any identifying information. The two forms are coded using a random number. As such, your answers will be linked but also kept anonymous.
To Be Completed AFTER THE LAST WORKSHOP of Aging Well.

Circle what best applies for you.

1) I would recommend Aging Well workshops to other seniors
   Strongly Agree   Agree   Neutral   Disagree   Strongly Disagree

2) Attending Aging Well workshops has been a positive experience
   Strongly Agree   Agree   Neutral   Disagree   Strongly Disagree

3) The Aging Well workshops helped increase my knowledge of stress management
   Strongly Agree   Agree   Neutral   Disagree   Strongly Disagree

4) Aging Well workshops helped increase my understanding of the importance of being a lifelong learner
   Strongly Agree   Agree   Neutral   Disagree   Strongly Disagree

5) Life transitions can be difficult, but after Aging Well I have some new strategies regarding how to manage them
   Strongly Agree   Agree   Neutral   Disagree   Strongly Disagree

6) After Aging Well, I am more aware of some of the positive aspects of aging
   Strongly Agree   Agree   Neutral   Disagree   Strongly Disagree

7) Aging Well has been worthwhile
   Strongly Agree   Agree   Neutral   Disagree   Strongly Disagree

8) I would attend Aging Well workshops if new topics were included
   Strongly Agree   Agree   Neutral   Disagree   Strongly Disagree

9) I would attend Aging Well again in one year, even if the same topics were covered
   Strongly Agree   Agree   Neutral   Disagree   Strongly Disagree

10) During the 8 weeks of the programming, how many aging well workshops did you attend?
    1   2   3   4   5   6   7   8

11) In general, the readings were helpful and informative
    Strongly Agree   Agree   Neutral   Disagree   Strongly Disagree

12) I completed at least some of the optional assignments
    Strongly Agree   Agree   Neutral   Disagree   Strongly Disagree

13) In the past 8 weeks, I have tried a new activity due in part to Aging Well
    Strongly Agree   Agree   Neutral   Disagree   Strongly Disagree

14) In the past 8 weeks, I have tried a new activity but it was not due to Aging Well
    Strongly Agree   Agree   Neutral   Disagree   Strongly Disagree
15) In the past 8 weeks, I have practiced mindfulness
Strongly Agree  Agree  Neutral Disagree  Strongly Disagree

16) I plan to make mindfulness a part of my regular routine
Strongly Agree  Agree  Neutral Disagree  Strongly Disagree

17) Mindfulness is helpful in the management of my stress
Strongly Agree  Agree  Neutral Disagree  Strongly Disagree

18) Mindfulness improves the quality of my life
Strongly Agree  Agree  Neutral Disagree  Strongly Disagree

19) In the future, I will look back on the handouts and try some of the optional assignments
Strongly Agree  Agree  Neutral Disagree  Strongly Disagree

20) I will keep the handouts as a reference and refer to them periodically
Strongly Agree  Agree  Neutral Disagree  Strongly Disagree

21) If there was a follow-up biweekly meeting where we discussed Aging Well topics WITH a moderator, I would probably attend
Strongly Agree  Agree  Neutral Disagree  Strongly Disagree

22) If there was a follow-up biweekly meeting where we discussed Aging Well topics WITHOUT a moderator, I would probably attend
Strongly Agree  Agree  Neutral Disagree  Strongly Disagree

Write any comments (suggestions for improvement, what you enjoyed about the workshops).

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Workshop #1 - Aging Well Defined: Reframing the way we think about aging

The first workshop serves to introduce Aging Well to the participants and it gives a chance for the moderator and the participants to get to know one another. Start the workshop out with a brief introduction (2-3 minutes) to Aging Well.

What to cover in the introduction
1. The topics that will be covered throughout the 8 weeks
2. Let the group members know that “Aging Well is not a prescription of how to age well, rather that the goal of Aging Well is to generate discussion about topics related to aging and discuss strategies to cope with some of the challenges of aging.”
3. Mention that another goal of Aging Well is to discuss aging in a positive light.

Research
If you are going to be a part of the ongoing research, explain what voluntary participation involves (as instructed on page 12). Ask willing participants to complete surveys and collect them in the envelope. Have pens available for participants!

Participant introduction
After the introduction, ask the group if there are any questions. Then ask each participant to share his or her name, where he or she was born and one activity they do to help them age well. Start off with introducing your name and an activity you do to help you age well (always draw parallels to your own life when appropriate and possible).

Group Activity
Give the participants a few minutes to write down a list of words they associate with aging. After a few minutes, have the participants volunteer what they have written. The idea of the exercise is that most people will write negative words or attributes and that the list will have less positive words. However, you may have a group that comes up with mostly positive words. If this happens, then congratulate the group on already viewing aging in such a positive light. More likely, you will have a few participants who come up with positive words and the rest will come up with negative words. If this happens, draw attention to the positive words and then add more of your own. End the exercise by crossing out or erasing the negative words and circling the positive words. After crossing the negative words out, it can be helpful to say something like, “The goal of Aging Well is not to ignore the negative parts of aging, but rather to draw attention to the positive parts of aging.”

Discussion Questions
The discussion questions from the first week’s workshop are intended to open up the discussion about Aging Well. You may find that a group discussion about a specific topic related to aging results. The questions are meant to be a guide and it is not necessary to cover each question. If you find that one question resonates with
the participants and results in a good discussion, let the discussion continue. However, to move the conversation along it can be helpful to periodically wrap up discussion on one topic and move to the next question.

Towards the end of the discussion, ask the questions that are towards the end of the packet regarding how to define aging well. Come to group consensus about what it means to age well. **One part that should be in the definition is that to age well is to be active, in whatever way you can.** You may find that group members touch upon this, or that you have to add this yourself. Touching upon this transitions nicely to the optional assignment.

**Optional Assignment**

Spend a few minutes at the end of the discussion, touching on the optional assignment. The list of activities introduced in the first week are returned to throughout Aging Well. Let the participants know that the assignments are entirely optional and to only complete them if they think they will find them helpful or enjoyable. It can also be helpful to let the participants know that you will be doing the assignments yourself if you plan to. Let the participants know that the list of activities likely includes many things they are already doing. Instead or in addition to adding a new activity, suggest that the participants read over the list and make note of the activities they are already doing.
Aging Well Workshop #2-Stress and Aging

Optional Reading: “Stress management 101”

Remember to phone the participants about 5 minutes before the workshop starts, most likely many will already have arrived, or will be on their way.

Starting the workshop

Start the workshop by asking if anyone completed the optional assignment from week 1. If anyone did, have the participants share their experience. It may be the case that no one did, if no one did then share your experience with whatever new activity you tried in the last week. Have each participant (those who haven’t already) share an activity from the past week that he or she enjoyed.

Introducing the topic

Start by saying something along the lines of, “This week and next week we are going to talk about stress. This week we will be focusing on some of the stress that can accompany aging. I want to start the topic today, by talking about how we respond to stress.” Use the handout and present this information to the participants (you may want to have the handout in front of you to look over it).

If you have a white board or large paper, draw a stick figure (or if you are an artist, draw a person). As you explain how stress impacts a person, draw a representation on the stick figure (for example, draw an eye with a dilated pupil, draw hairs sticking up on the individuals arm etc.) If you prefer, you can simply list the different responses. If you do not have anything to draw on, simply present the information to the participants. After you present the information, consider volunteering how stress manifests physically in you before asking the participants their physical symptoms.

The point of this introduction is to highlight how our response to stress that arises from our thoughts is not useful and can be a source of discomfort.

Discussion Questions
If you have a white board, generate a list of sources of stress that accompany aging. As participants volunteer stress that they have in their life, ask the participants how they manage the particular stress. As the participants volunteer their strategies, point out if the strategy ‘challenges the thought’ that was the source of the stress, or is a ‘change in behavior.’

Present the text from the handout to segue from one from set of questions to the next. You can either rephrase the text in your own words, or read the text to the participants.
Using Common Sources of Stress To Generate Discussion

There will likely be commonalities amongst the participants' sources of stress. Common sources of stress are health, family, loss of a loved one, and finances. You may find that one particular topic, or multiple topics resonate with the participants. Facilitate these discussions by highlighting salient points that participants make.

The Nursing Home Example

The example at the end of the handout regarding fear of going into nursing home is purposely in the handout to generate a discussion regarding this concern. After you present this information, ask the participants if they are surprised by these facts. There will hopefully be a discussion about perceptions of nursing home care. You can facilitate it by adding personal examples. For example, when you present the example from the text consider saying that your grandparent, parent, friend etc. has this fear. By doing this, participants may be more likely to discuss their own concerns. Also, you may find that participants will tell you how to respond to your friend, grandparent etc.

Make sure that you do not just focus on the negatives and stress of nursing home care. Say something like, “Nursing homes can provide wonderful and necessary care for people at their time of need.” Ask participants, if they have had any positive experiences visiting friends or relative who were receiving care in a nursing home.

Mindfulness exercise

Mindfulness is introduced in this workshop and returned to in later workshops. “Stress Management 101,” included as a supplemental reading for this and the subsequent workshop, details some of the benefits of mindfulness. Some participants may be familiar with the concept. Most participants, however, will be able to relate to the idea of being present. For some, the idea of exerting some level of control on conscious thought to potentially improve wellbeing will be a novel concept.

In the moderator version of the packet, you will find explicit instructions on how to conduct the exercise. Bring in oranges* (the exercise is eating an orange mindfully) for each participant.

*preferably navel oranges—they peel easily

Mindfulness and Aging Well

Mindfulness can be a valuable tool for many. Some may enjoy the idea of formal practice, whereas others may simply enjoy talking about the many times in their lives when they are more present. Some may not embrace the idea. This is to be expected, and Aging Well is a chance for people to discuss and share their
experience with aging. It is not a course in mindfulness. However, if the majority of the participants take to the concept, consider starting subsequent workshops with 1 minute of mindfulness. In this exercise, participants can focus on their breath and on sensations in silence for 1 minute. If you are serving coffee or tea, mindfully enjoying the coffee or tea for a minute can be a way to practice mindfulness. Participants may introduce their own ideas for how to practice 1 minute of mindfulness.

Wrapping up
Mention the optional assignment and let the participants know that next week, you will be continuing the discussion on stress and discuss general stress management strategies.
Aging Well Workshop #3-Stress Management

Starting the Workshop
Ask the participants if anyone completed the optional assignment, and if so if they found it helpful. Volunteer your own experience with the assignment. After participants reflect on their own experience with mindfulness, have one minute of mindfulness (as explained in the previous outline). Ask the participants if they like the concept of mindfulness, and if they would like to start future workshops with one minute of mindfulness. If there is ambivalence, inquire further. Do not let focusing on mindfulness deter participants from coming. If some participants are not interested in the concept, ask them if they mind if one minute is spent each week on mindfulness. Make it clear that the focus of the workshops will still be on the topics related to aging.

Introduction
Last week’s introduction included information on how stress impacts our physiology in the moment of stress. This week’s introduction outlines how stress can impact our physical and mental health. The purpose of this is to highlight why it is important to have stress management techniques.

Stress Management Techniques

Exercise
Spend some time discussing what the participants do for exercise. Ask the participants what happens to their stress during and after exercise. If there is exercise equipment at the housing site, ask how many participants use the equipment.

Meditation
After last week’s mindfulness exercise, a meditation in the third week may turn some participants off to Aging Well. It is important to have a sense of what the participants are interested in. Another option is to have the meditation at the end, as an option only for those interested. This may work very well for some groups. You can also skip the meditation all together, if you think that the participants in your workshop would be turned off by the concept. It is worth asking though, you may be surprised by the answer.

If you are comfortable doing so, lead the participants in a meditation. If you do not have experience leading meditation, then there are some available for download here.
http://www.uvm.edu/~CHWB/psych/?Page=exercises.html&SM=mindfulnessmenu.html
You can download them for free and play them on a laptop for the participants. To download, right click on the links and save them to your laptop. They should play
with most media players (iTunes, Windows Media Player etc). The body scan mediation is a good one for a group, and for an introduction. Play the first 7-10 minutes, or the whole thing (18 minutes). If you have access to the internet at your site, YouTube is also a good source and has many 10 minute body scan meditations. Screen the meditations on YouTube for quality. Spend some time reflecting on the experience. The three groups that piloted Aging Well all responded very positively to the meditation exercise.

After the meditation, discuss how meditation does not have to be practiced formally. Paraphrase or read from this text in the handout: “Focusing attention on a beautiful photograph, painting, tree, piece of music or the sky can be a form of meditation. Taking in a deep breath to relax is a form of meditation, too. Or you can slow down and notice your surroundings. Meditation is effective because it moves attention away from thoughts that cause stress.”

Other Techniques

Likely by the end of the discussion, the participants will have already volunteered other techniques. Recall some of these techniques and have the participants explain in more detail how it helps them with stress management. For example, someone may have said that painting or another artistic endeavor helped him or her with stress management. Ask the participant to explain what happens to his or her stress, while painting.

If you cannot recall the examples (or have not yet discussed what activities the participants find helpful with stress management), ask the participants.

Reference the paragraph at the end of the handout: “Any activity that moves your focus away from the distressing thoughts can be a form of stress management. Having a cup of tea, listening to music, talking to a family member or friend on the phone or in person, and taking a walk are all forms of stress management. When there is increased stress in your life, it’s important to allow yourself time to do the activities in your regular routine that provide stress management.”
Aging Well Workshop#4 - The Aging Mind: You are Never Too Old to Learn

If the participants enjoy mindfulness, start this workshop with one minute of mindfulness.

Frequently Asked Questions About Memory and Aging

Along with the handout for this workshop, you will find an additional handout titled, “Frequently Asked Questions About Memory and Aging.” The purpose of this handout is to answer some of the more medical questions about memory and aging. Answers to these questions were taken from a presentation by Dr. Pendlebury, the director of the memory center, and from a manual on memory and the older adult produced by Community of Vermont Elders (COVE). Dr. Pendlebury reviewed the questions and responses and approved the material.

Aging Well participants may have general questions about memory loss. In particular, participants may have questions about whether or not certain symptoms are indicative of something more serious than normal age-related memory loss, like Alzheimer’s disease. If this comes up, it is important to direct participants to their physicians and to remind them of the frequently asked questions packet.

A participant may answer the question or concerns of another participant with medical advice. If this occurs, it is important to politely remind everyone that every individual's case varies and questions are best left to be answered by medical professionals.

Goal of this workshop

The goal of this workshop is to discuss the importance of brain health. It is not to discuss dementia or Alzheimer’s. Of note, on the first page of this packet you will find the following statement, “All of the advice and information that you'll learn about keeping your mind healthy can be good for individuals of any age or health status (even if you already have a diagnosis of Alzheimer’s or other dementia).” Prior to the discussion, it is important to mention this.

Supplemental Discussion and Group Activity

If you finish this discussion early, spend some time reviewing sections of the Frequently Asked Questions. Read aloud the “reversible causes of dementia” or other sections participants find interesting.

Have the participants work in smaller groups on the optional assignment for ten minutes. Another approach to this optional assignment is to brainstorm as a group, possible brain health plans.

Stress management and memory loss

In the previous workshop, stress and in particular cortisol’s negative affect on memory was discussed. Remind participants of this and mention that stress and anxiety can compound any existing memory problems. In fact, they can mimic more serious memory problems. The stress management techniques, including mindfulness, may improve memory and cognition even in those with dementias.
Aging Well Workshop#5 and 6: Life Transitions

This workshop should have enough material and generate enough discussion to last for two weeks. Successful life transitions are crucial to the health and wellbeing of seniors. Unsuccessful life transitions can lead to declines in physical and psychological health. This is particularly true for seniors with memory loss. However, fortunately there are ways to approach life transitions that can ease the process and help to maximize the likelihood of maintaining good health. This workshop is intended to introduce participants to the elements of a successful life transition. Like all of the workshops, the content is simply meant to guide discussion. The experts on life transitions are in attendance and are the best resources.

Finding Commonalities
If you are conducting the workshop at a congregate housing site, then all of the participants will have been through the life transition of moving to the housing site. This can be a great place to start the conversation. It is likely that some participants have made the transition more smoothly than others. Many of the participants will also have retired. For many it may have been some time ago but it can still provide a common experience for discussion. Most also live on a fixed income, and this can be an ongoing source of stress.

Handling conversations about loss, death, and dying
Although this may have come up in previous workshops, the topic of life transitions lends itself to discussion about loved-ones who have past. Many of the participants will be still be grieving the loss of a spouse, no matter how much time has passed. Participants may express strong emotions and be prepared to have some difficult discussions. It is important to have a tissue box for this workshop. Reflecting on the loss and the life of the loved-one can be a cathartic experience for many. Despite the strong emotions present, some participants may feel better after expressing themselves. One perhaps obvious, but worth mentioning, strategy is to spend time reflecting on the positive aspects of the loved-one’s life. There are two techniques that can be helpful to keep the discussion focused on the positive: Reflecting on pleasant memories and reflecting on how the participants were positively shaped by (and continue to be shaped by) their loved-one.

Discussing SASH
Some participants may still have questions about the function of SASH. Many may not understand the benefit or the role. It is well worth reminding individuals of how SASH can be incredibly helpful during life transitions. Some may be concerned that they will be conceeding decision-making power by seeking help from SASH or its community partners. It is important to remind participants that SASH can help to guide a participant during life transitions and to navigate the sometimes-confusing world of services available. SASH can be a wonderful resource for participants and their families. Importantly, by using SASH and/or its community partners, in no way does a participant or his or her family cede any decision making power. SASH will
always be respectful of an individual’s decision and continue to work with the participant, no matter what type of services he or she chooses to help during and after a life transition. A SASH coordinators role is often to discuss available options with experts from area agencies and present them to the participant. It is the participant who makes any decision regarding care. Furthermore, SASH’s intention is to help a participant remain as independent as possible.

Take advantage of this time to address any questions the participants have about SASH. It is possible that you will have a participant who volunteers his or her own positive experience working with SASH or its community partners. Also, without explicitly mentioning names or details that would identify the SASH participant, give an example of how SASH can help an individual. A great example is that after a hospitalization, acute rehabilitation (nursing home) level of care is sometimes necessary. SASH’s presence can help a participant return to his or her home sooner. More importantly, by laying out the best options for services available (VNA, Area Agency on Aging, wellness nursing, or other appropriate options), a participant will be more likely to maximize the possibility of return to previous function following a change in health. In addition, a participant may be less likely to have a subsequent decline in health that often happens following a hospitalization. If a decline should occur, SASH and its community partners will be there to help during the transition and afterwards to maximize wellbeing, independence, and function.

**Discussing Mindfulness**

Introduced during earlier workshops, the concept of mindfulness may have been embraced by many or some participants. This workshop lends itself to a discussion about the role of mindfulness during and after life transitions. Certainly, there are some difficult changes that occur with aging. In particular, loss of a loved-one and decline in health can be sources of on-going stress. It may appear that, stress related to these events is inevitable. It is not to say that mindfulness can eliminate the stress related to these life-events. But, attending to the present moment, regardless of life circumstance, can help to add immeasurable quality to one’s life. In addition, mindfulness can help to minimize the toll that stress will take on one’s wellbeing.

**The Importance of Accepting Care**

Participants will likely recognize both the importance of this topic and of the difficulty of accepting care. It will likely occur that some participants will share their own experience with accepting care. This is an incredibly brave thing to share. Some of the participants will have had a positive experience, but some may have had a negative experience. Reflect on how the positive experiences contrast with the negative experiences. How do they differ? What could have made the negative experience more like the positive one?

**Discussions about end-of-life care**

Some participants will volunteer their own opinions regarding end-of-life care. It is important to respect all viewpoints. Some participants may try to persuade or
counsel other participants on what decisions to make regarding end-of-life care. Understandably, participants will have strong opinions on this matter. It is an important and worthwhile discussion to have. However, it can cross the line from respectful discussion to sometimes strongly worded life advice. If this occurs, it is worth mentioning that it is certainly important and worthwhile to discuss these matters with family and healthcare providers, and important to have the appropriate legal documents to ensure that end-of-life wishes are met. However, it each person's right to choose for him or herself what type and level of care he or she wishes to receive at the end-of-life.
Aging Well Workshops #7 and 8: With Age Comes Wisdom and Other Benefits of Aging

Reading: “Age and happiness: The U-bend of life. Why, beyond middle age, people get happier as they get older.”

This article helped to guide the formation of this workshop and is well worth reading. Consider making copies of the article for the participants. It is available at, http://www.economist.com/node/17722567. You can also find it by searching for “Age and happiness, the U-bend of life.” The article is available in its entirety.

Goal of the workshop

Like the “Life Transitions” workshop, this workshop should generate enough discussion to cover two weeks. This is intentionally placed at the end of Aging Well and after the “Life Transitions” workshop. Although, hopefully significant time was spent discussing how to cope with some difficult parts of aging, the tone of the “Life Transitions” workshop can be more negative. “With Age Comes Wisdom” can change the tone of the conversation. It is an opportunity to celebrate and discuss the benefits of aging. To some, the notion of any benefits of aging can seem Pollyannaish. Research and many individual’s personal experience, however, would suggest otherwise. This goal of this workshop is to discuss some of the, sometimes not-so-obvious, benefits of aging.

Using the points from Andre Weil

On the first page of the handout for this workshop, there are five benefits of aging that Andrew Weil discusses in his book Healthy Aging. Take the time to go over each of these points. Each one can be the launching point for a discussion about some of the positive changes that can occur with aging. After you state each one, allow the participants to reflect on how it relates to their personal experience. Another option is to read all five and then have participants reflect on which resonate (or do not resonate) with them.

Discussing Wisdom

You will likely encounter a range of opinions about wisdom and aging. Some participants will agree that wisdom does increase with age, whereas others will be more dismissive of the notion. The goal is not to convince everyone of the truth that wisdom does increase with age, but rather to have a frank discussion. Consider reflecting on your own experience working with seniors.

Break down the definition given in the handout (“wisdom can be seen in exercising good judgment, offering sound advice, having insight, emotional regulation, and having empathy for other people. An element of wisdom often cited is the ability to process and approach a new challenge in light of previous life experience”) into its parts. You can discuss emotional regulation, insight, empathy etc. separately. You may find, for example, that some participants agree that they have better regulation of emotions and improved empathy but do not find that they have better insight.
Happiness and Aging

The article that accompanies this workshop is well worth reading and can give you some understanding of what is behind the happiness graph presented in the workshop. Some participants will readily agree with the findings of the report, others will be in disagreement. Some may understand that this may be true for the population, but it does not speak to their personal experiences. All of the viewpoints are certainly understandable. In discussing happiness and aging, try not to only focus on agreement or disagreement with the graph. Reflect on some of the benefits of aging Andrew Weil suggested and how this may contribute to increased happiness for some.

Other emotional experiences and aging

The graph that was created for this section of the workshop is meant to represent the changes in different emotions many people experience across the lifespan. It can be very helpful to draw this graph if you have a whiteboard or something to draw on that the group can see. When you are discussing the different emotions, here are a few pointers.

• Mention that it is not surprising that younger people have more anger (less mature, less emotional control).
• Consider mentioning that this graph would indicate the stereotype of the angry-old man is not supported by research. The angry old man was most likely even angrier in his youth.
• Mention that it is not surprising that the 20s are more stressful because you are finding your way in the world, becoming independent, choosing a career, starting a family etc.
• Mention that worry and sadness increase into middle age. Some people then have a “mid-life crisis” and the trend shifts with worry and sadness decreasing into old age.
• Also it is worth mentioning that when people are forming opinions (often negative) about aging in their 30s, 40s, and 50s, they could be influenced by higher levels of stress, worry, and sadness. They may associate with some of the difficult emotions with the aging process, blind to the benefits of aging until they experience them first hand.

Mindfulness

Spend some time discussing whether or not it is easier to be present, to be mindful when you are older. Spend some time reflecting on the experience with mindfulness over the past eight weeks. Encourage participants to continue to practice mindfulness after Aging Well for improved wellbeing and perhaps increased happiness.

Story-telling

A potential follow-up to Aging Well is a story-telling group. Willing participants can gather to share stories of from their past. Each week, one or two participants can present a story with time for questions. Likely, most participants
have shared some anecdotes about their past during Aging Well. Some may enjoy continuing to do so.

**Celebration**

Spend some time in the last week celebrating. You have hopefully enjoyed the time you have spent together and had valuable discussion. Discussing these topics is not easy and should be recognized as an accomplishment. Bring food or willing participants may volunteer to bring something for the last week.

**Research (Surveys)**

For participants who are willing to participate in the research project, remind them to complete the second two surveys now that Aging Well is completed. Remind participants of where they can return the surveys. You will want to have a box or envelope in the office. Remind participants that they should not put their name or any identifying information on the survey. Information from the survey is going to be used to evaluate the effectiveness of Aging Well and guide any future changes to the programming.
**Stress Management 101***

*This was written to educate people with ongoing health issues who could benefit from stress management. However, it may provide you some background for Workshops #2 and #3.

“‘Stress is an important dragon to slay- or at least tame-in your life’
-Marilu Henner

Stress is part of life –some of us are more predisposed to react to stressors than others and as animals, our bodies respond to stress in certain ways. **Stress can lead to illness, but it does not have to.** We have the ability to alter our stress response and minimize the impact of stress on our health. **We can do this by adopting stress management techniques that can lead to wellness.** This reading introduces you to the physiology of stress and outlines how certain stress management techniques can positively change your stress response.

Fundamentally, stress is a response to external or internal events. An example of an external event is a car accident, whereas an internal cause of stress might be a thought or a feeling. When thinking about the impact of stress on our life, it’s helpful to start by thinking about the different kinds of stress responses that we experience and where the stress is coming from. Individual responses to stress can vary. Our genetic predisposition and childhood development impact our stress response. These factors dictate the intensity of our response and the likelihood that stress will cause illness.

Everybody responds differently to stress, but given enough stress, there are certain things everyone tends to experience. If you were walking along the street and a lion jumped out at you, you would experience a stress response. Your immediate stress response is driven by activation of the sympathetic nervous system. Adrenaline or norepinephrine races through your body inducing what is commonly known as the ‘flight or fight’ response. In moments of stress your pupils dilate to allow more light in. The hair on your body stands more erect to make you more sensitive to vibrations. Your mind is more attentive and alert. Your heart rate increases, and your heart pumps harder to allow more blood flow to the large muscles of the arms and legs. The increased blood flow allows you to run if needed. The blood flow to the digestive system shuts down, to allow more blood flow to other areas of the body. It is the decreased blood flow to the stomach that causes “butterflies.” This physiologic stress response is unavoidable in the face of activation of the sympathetic nervous system.

“Pressure and stress is the common cold of the psyche.”
-Andrew Denton

There is a secondary stress response mediated by the hypothalamic pituitary axis (HPA). The HPA axis is only active under extreme stress and individuals more prone to stress and anxiety often have increased activation of the HPA axis. When the HPA axis is activated, cortisol is released by the adrenal glands. Cortisol is a steroid hormone that has widespread effects. It depletes energy reserves and
elevates blood sugar. Cortisol also binds to an area in the brain known as the hippocampus, where memories are formed. For anyone who has ever had performance anxiety, taken a test, spoken in public, or become flustered trying to complete a familiar task, they have seen the impact stress can have on one’s memory. The stress response also impacts our ability to use our working memory. Working memory holds information in the mind necessary for verbal and nonverbal tasks, like reasoning and comprehension—the part of your memory that lets you recall information. Stress can cause us to stumble over our words when we are nervous and make it difficult to remember what we were thinking about in the first place. Cortisol is also important in regulating our sleep cycle. Part of why we wake in the morning is due to high levels of cortisol. Cortisol also weakens our immune response, making it more difficult to fight off infection, disease, and heal wounds. In a study of university students, those that were under the stress of a final exam had longer wound healing time. The HPA axis, which regulates cortisol release can be overactive in individuals under chronic stress or suffering from anxiety disorders (Jones and Bright 2001). This can explain in part the difficulties with sleep, cognition, and energy seen in some individuals with anxiety.

The “flight or flight” and subsequent activation of the HPA axis served our ancestors well. Threats from predators—like the lion—required these types of responses. Stressors were infrequent and required immediate attention. This stress response does not serve us well as we encounter day-to-day stress in the modern age. Most of the stress in our everyday lives results from our perceptions or how we think about what’s happening around us. Most of our stressors today are also chronic. Fortunately, stress can be managed in a number of ways. With stress management strategies you can turn off an overactive HPA axis decreasing cortisol, and decrease the frequency and intensity of the flight or fight response. In other words, you can gain control of the level of anxiety you experience and how stress impacts you.

**Meditation/Mindfulness**

Meditation training is an integral part of Dialectical Behavioral Therapy (DBT) and it is often incorporated into Cognitive Behavioral Therapy (CBT). Mindfulness has modern roots in Buddhist meditation, but its origin predates the advent of Buddhism. The cultivation of mindfulness involves paying attention to the present moment, non-judgmentally and intentionally. Think of it as a universal human quality that through formal and informal practice you can improve upon. Formal practice often involves meditation, time set aside to focus on the breath, the present moment, a particular feeling, or an area of the body. Less formal mindfulness practice includes focusing your attention on a beautiful photograph, painting, tree, piece of fruit, music on the radio, or simply taking a deep breath.

The most well-studied effects of mindfulness on stress reduction and anxiety symptoms come from a program of mindfulness-based stress reduction (MBSR) developed by John Kabat Zinn. It is an 8-week program in which participants practice meditation or yoga formally for 45 minutes per day and practice mindfulness throughout their day. This program has proved to be effective for the treatment of anxiety disorders. It also reduces anxiety or stress in individuals who
do not meet diagnostic criteria for an anxiety disorder. Importantly, studies have shown that patients continue to practice mindfulness effectively for years after intense treatment ends. Another study demonstrated decreased healing time for psoriatic lesions (psoriasis is a chronic skin condition known to worsen at times of stress). Cancer patients who undergo MBSR have improved quality of life, improved mood, reduced symptoms of stress, and better immune system function.

As mentioned previously, cortisol weakens the immune system. Mindfulness practice can effectively change stress responses and reverse the negative effects of excess cortisol. Fundamentally, reductions in anxiety and stress levels amount to an alteration in one’s baseline stress response. For many people, mindfulness practice can decrease baseline anxiety and make you less prone to health consequences from life’s stressors. With mindfulness practice, you can gain a certain amount of control of your own stress response.

“Sometimes the most important thing in a whole day is the rest we take between two deep breaths.” - Etty Hillesum

If you are interested in meditation practice, here are some suggestions of where to start:

“For fast-acting relief, try slowing down.” Lily Tomlin

1) UVM Center for Health and Wellbeing has a few free, guided meditations. You can find it by searching “mindfulness audio exercises uvm” on any search engine.

2) A UVM medical student and a UVM psychologist collaborated to create some free meditations available online. There will be a free app for smart phones coming soon. The tracks are available at: http://soundcloud.com/mindfulhealth/tracks

3) Youtube is also a good free resource, but of course, the quality is variable.

4) Jon Kabat Zinn has audio CDs that accompany his book Full Catastrophe Living called “Guided Mindfulness Meditation” that you can find on Amazon or at other booksellers. You can also find many other guided meditation CDs at many booksellers.

5) My Yoga Online (www.myyogaonline.com) is a $10-per-month subscription service with many high quality meditation and yoga videos. One advantage with this service is that in addition to variety, you can find videos ranging in length from 5 minutes to 120 minutes. New videos are frequently added.
“Stress is an ignorant state. It believes that everything is an emergency.” – Natalie Goldberg, *Wild Mind*

**Exercise as Stress Management**

There is a body of literature that supports exercise as an effective way to reduce your anxiety, change your physiological stress response, and to improve your mood. Cross-sectional studies consistently demonstrate that habitual physical activity improves mood. It is important to note the word ‘habitual.’ Studies demonstrate improved transient mood state with a single episode of strenuous exercise in most people. However, if the exercise is not regular, then the long-term benefits of protection from depression and improved anxiety are not seen. Continued regular exercise, even if you are already physically fit, is also important. Physically fit individuals who do not exercise see the greatest negative impact on their mood and anxiety if they abstain from exercise.

Exercise also helps to improve anxiety. Patients with phobias (fears that induce a response similar to panic attacks) have been successfully treated by exposure to their phobias after intense aerobic exercise. The initial thought was that being exhausted was incompatible with anxiety, but a more plausible explanation may exist. Undergraduates injected with adrenaline while in an exercise program had less of an anxiety response than their counterparts not in the exercise program. Because during both exercise and high anxiety states adrenaline is released, it’s possible that the psyche of exercisers no longer associates increased adrenaline solely with anxiety (Salmon 2001). Thus, those who exercise have a decreased stress response to anxiety provoking stimuli.

Studies that involve injecting adrenaline into college students do not exactly replicate real life stressors. However, many studies have consistently demonstrated that as with depression, regular exercise decreases symptoms of anxiety in people with anxiety disorders and in people with an average amount of anxiety. One study looking at individuals enrolled in a six-week walking program reported decreased “daily hassles” in comparison to similar subjects not enrolled even when controlling for physical health, baseline anxiety, and major life change. It is unlikely that the individuals who walked actually had a significant decrease in situations that could be perceived as “daily hassles.” It is more likely that their physiological stress response had been altered such that they perceived fewer situations as stressful. Like mindfulness and meditation, regular exercise can decrease your baseline anxiety. If your baseline anxiety is lower, then you are less likely to have a flight or fight response and you are better able to mindfully handle stress. If you are having less of a physiological stress response, you will be in a better frame of mind to practice DBT and CBT skills.

**Starting a regular exercise program**

A regular exercise program does not necessarily mean training for a marathon. In fact, it can actually harm you to take on an exercise program beyond your current capacity. Studies have shown that people who exercise beyond their capacity do not receive the same improvement in depressive and anxiety symptoms. In other words, more strenuous exercise does not mean more benefit. In addition,
people who adopt exercise programs beyond their current capacity are more likely to stop exercising. If you have any health conditions that would impact your ability to exercise, it is important to speak with your physician or health care professional before adopting a new exercise program. When starting any exercise program, the most important thing is that it is regular (at least 3 days per week for 30-45 minutes) and that you adopt a program you will stick with. Consider joining a gym, if you are not already a member, and meeting with staff there. Regular fitness classes that do not push you beyond your ability are also fun social activities. Perhaps the easiest way to start exercising is to look at your schedule for the week each weekend and set aside at least three days when you will walk briskly for 30-45 minutes. Although you may see some improvement in your mood or anxiety level immediately after exercise, the long-term improvement in overall anxiety and depression will probably not be evident for four to six weeks.

If you are interested in learning more about the positive effect exercise can have on anxiety, depression, and other psychopathology, Spark: The Revolutionary New Neuroscience of Exercise and the Brain by John J. Ratey is an approachable and informative book.

Other Stress Management Strategies

“Tension is who you think you should be. Relaxation is who you are.” –Chinese Proverb

Exercise and meditation practice may not work for everyone. They are the best researched. However, you should use stress management strategies that work effectively for you. Any activity that engages your attention and decreases any physiological arousal you should use to your advantage. You can certainly incorporate mindfulness practice into any activity you enjoy. You will find a list of activities at the back of this packet. If you would like, go through the list and star activities that you may find helpful with stress management.

Remembering the principals of mindfulness

If you choose to adopt any new strategies for stress management, remember the mindfulness principals of non-striving and non-judgment. If you fall out of routine or fail to see immediate benefit do not judge yourself, but rather, view it as an opportunity to mindfully start again or adopt another strategy. In addition, do not strive for reduced anxiety, but mindfully engage in whatever stress management strategy you choose and notice how you feel.
References


Frequently Asked Questions About Memory and Aging

The answers to the frequently asked questions were from a presentation by Dr. William Pendlebury titled “Normal v. Abnormal Age Related Memory Loss”, given in September 2010 at Heineberg Senior Housing in Burlington, VT and from the coordinator's manual for Memory Matters: A community education program on memory and the older adult produced by COVE (Community of Vermont Elders).

I am forgetting where I put my keys, and it is taking me longer to think of words. Does that mean I have the beginning of Alzheimer’s or dementia?

No. Working memory or short-term memory is required to recall information and quickly remember new information. It declines as a part of the normal aging process. Just as the function of your heart declines and your muscles are not as strong as they were when you were younger, your brain does not work at its peak function after about age 30 or 40. Forgetting where you put your keys and difficulty coming up with a word do not indicate that you have Alzheimer’s or dementia.

I have other concerns about my memory what should I do?

If you are concerned about your memory, it is best to speak with your primary care physician.

Why would I speak to my doctor? If I find out I have Alzheimer’s there is nothing I can do.

Not all memory problems are due to Alzheimer’s or irreversible types of dementia. Many are reversible (see below).

If it is Alzheimer’s, medications work best when started early in the course of the disease. Also, an early diagnosis can allow for planning around family decisions.

Why would I want to take a medicine? I don’t want to live any longer if I do have Alzheimer’s disease.

Medications for Alzheimer's disease only treat the symptoms and many people who take them are able to maintain independence longer and live outside of a nursing home longer. The medications do not prolong life.

I already spoke with my primary care physician, and he or she told me it was just a normal part of getting older. What should I do now?

Some doctors are dismissive of memory problems. You should tell your doctor, “I am concerned about my memory and I would appreciate an evaluation to help
determine if the cause is normal aging or from something else.” Your doctor should evaluate you for

1. Stress level
2. Depression
3. Medication side effects or interaction (including over the counter medications)
4. There may be some blood tests for more rare reversible causes of dementia.
5. Your physician should perform a cognitive screen that consists of a series of questions and usually a drawing of a clock. This can evaluate for current memory, but is not a definitive test for progressive dementia such as Alzheimer’s disease.
6. Your doctor may order imaging studies, likely a CT scan, to evaluate for presence of tumors, blood clots etc.

Your doctor may not do all of this evaluation him or herself and refer you to the Memory Center.

Is there anything I should bring with me to this doctor’s appointment?

You should bring a list with any questions or concerns that you have. Also, it is best if someone (preferably a family member, but a close friend could work) accompany you to the appointment.

What is dementia? Is that the same as Alzheimer’s disease?

Alzheimer’s is a type of dementia, but there are other types and some are reversible. Dementia is a group of symptoms that includes memory problems, disorientation—not knowing where you are, what time it is, etc.—difficulty with planning, difficulty doing math. There may also be some changes in personality or behavior. There are irreversible causes of dementia such as Alzheimer’s disease, but there are also reversible causes of dementia.

Reversible causes? What are the reversible causes of dementia?

Here is a list of some of the reversible causes of dementia.

1. Stress
   If you have ever stumbled over your words when nervous or drawn a blank taking a test has experienced the impact of stress on memory. Stress produces a hormone cortisol that can bind to the hippocampus (too much can cause shrinkage), an area of the brain important in the formation of memory and recall.
2. Sleep
Anyone who has experienced a sleepless night can attest to the impact of sleep on memory. Sleep disturbances, even those that may not be recognized by the individual, can lead to memory problems that are reversible.

3. **Alcohol abuse**
   Alcohol abuse is common amongst older individuals and can lead to reversible problems with memory. It is important to discuss your alcohol consumption openly with your healthcare provider.

4. **Depression**
   Depression, although common in the older population, is not a normal part of aging. Left untreated depression can lead to significant impairment of memory. If you speak with your physician regarding memory concerns, he or she should screen for depression.

5. **Metabolic Disorders**
   Metabolic disorders such as thyroid problems can also cause memory problems. Deficiency of certain vitamins, such as vitamin B12 can cause reversible memory deficits. Thyroid problems and B12 deficiency can be found with a blood test at your primary care physician’s office.

6. **Medication Errors or Side Effects**
   If medications are taken incorrectly, this can have many dangerous consequences including memory loss. Even if medications are taken correctly, sometimes there can be interactions with other medications or side effects that can cause memory impairment. It is important to review all of the medications with your doctor (including over the counter medications and herbal supplements!)

7. **Nutrition**
   Poor nutrition can lead to vitamin deficiencies, such as B12 previously mentioned, and can contribute to memory difficulties. Review your diet with your physician.

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I already know that I have Alzheimer's disease or another irreversible type of dementia. Is it too late for me to work on the health of my mind?

No. Not at all. Addressing issues with medications, stress, nutrition and depression are perhaps more important for individuals who already have a diagnosis. Also, all of the strategies for developing a healthy brain discussed in Aging Well workshop 4 work for individuals with dementia.

What were the strategies for maintain a healthy mind again?

1. Address any health problems
   Poorly managed health problems can worsen cognition by impacting your level of stress.
2. Reduce stress
   Stress can worsen cognition. Aging Well workshops 2 and 3 discussed strategies to reduce stress. Aging Well workshop 5 will do more of the same.

3. Eat well
   Eating a diet with plenty of fruits and vegetables and staying hydrated (6 glasses of water per day) is important for brain health.

4. Mental exercises
   Anything that engages your attention, is intellectually stimulating and requires you using your memory or creating new memories is a boost to your brain.

5. Physical exercise
   Physical exercise is important for health of the body and the brain.

6. Staying in contact with people
   Staying connected socially by visiting family, neighbors, friends, volunteering and participating in community events helps the brain stay healthy. You don’t have to be the life of a party, calling a friend a few extra times a month can be helpful.

What are warning signs that I (or a loved one) should seek medical attention for memory problems?

You will find a list of 10 warning signs from the Alzheimer’s Association included in your Aging Well binder. This has been included with permission from the Alzheimer’s Association.

I took a test online, and I failed. I am worried that I have Alzheimer’s disease, but I don’t want to speak with my physician. What should I do?

This could have been due to stress or anxiety associated with the test itself, which is why it is important to have a thorough evaluation for any memory concerns with a health care provider, or other reversible causes of memory impairment. Any test not administered by a health care professional is not valid in any way. In addition, failing the screening test administered by a professional does not diagnose one with Alzheimer’s. It simply indicates that there was a problem with the individual’s memory during that test that needs further evaluation.

Can you continue to build up your brain as you age?
Yes! It does not have to be rocket science, puzzles, reading for pleasure etc. You can make new connections between brain cells at any age!

**Does intellectual stimulation help if you already have the diagnosis of Alzheimer’s disease?**

There is good evidence that shows that intellectual stimulation post diagnosis of Alzheimer’s can slow the progression of symptoms.

**Does everyone who has dementia end up with Alzheimer’s disease?**

No, everyone who has dementia does not end up with Alzheimer’s disease. Over the age of 65 65-80% of individuals who have a diagnosis of dementia have Alzheimer’s. However, there are many other causes of dementia. Many of which are reversible. This is part of why it is extremely important to discuss memory concerns with your physician and have an appropriate evaluation.

**Does taking certain medication cause Alzheimer’s disease?**

No, there is no evidence to suggest that any medication or combination of medication causes Alzheimer's. However, medications can cause problems with memory and it is important to review your medications with your physician.

**What medications should I avoid?**

Benadryl (found in Tylenol PM and other over the counter sleep aids!!) and amitryptaline (Elavil) should not be used as sleep aids in anyone over the age of 65. Both of these medications can cause significant, but reversible, problems with memory. If you are taking these medications as a sleeping aid, speak with your physician about stopping these medications.

**Does aluminum cause Alzheimer’s?**

No, the research demonstrated that there is no link between aluminum and Alzheimer’s?

**Is there a supplement I can take to prevent Alzheimer’s or help my memory?**

Currently there are no supplements that help to prevent Alzheimer’s. Some people find substances like Ginko helpful, but this is likely due to placebo effect (the same effect one would have if one was taking a sugar pill thought to be Ginko).

Fish oil has been shown to help with memory for some individuals, but this may be due to its proven cardiovascular effects. However, taking 1 g of fish oil daily (but not higher doses) will help the heart and may help the brain.
Have you noticed any of these warning signs?
Please list any concerns you have and take this sheet with you to the doctor.
Note: This list is for information only and not a substitute for a consultation with a qualified professional.

___1. Memory loss that disrupts daily life. One of the most common signs of Alzheimer’s, especially in the early stages, is forgetting recently learned information. Others include forgetting important dates or events; asking for the same information over and over; relying on memory aides (e.g., reminder notes or electronic devices) or family members for things they used to handle on their own. **What's typical?** Sometimes forgetting names or appointments, but remembering them later.

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___2. Challenges in planning or solving problems. Some people may experience changes in their ability to develop and follow a plan or work with numbers. They may have trouble following a familiar recipe or keeping track of monthly bills. They may have difficulty concentrating and take much longer to do things than they did before. **What's typical?** Making occasional errors when balancing a checkbook.

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___3. Difficulty completing familiar tasks at home, at work or at leisure. People with Alzheimer’s often find it hard to complete daily tasks. Sometimes, people may have trouble driving to a familiar location, managing a budget at work or remembering the rules of a favorite game. **What's typical?** Occasionally needing help to use the settings on a microwave or to record a television show.

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___4. Confusion with time or place. People with Alzheimer’s can lose track of dates, seasons and the passage of time. They may have trouble understanding something if it is not happening immediately. Sometimes they may forget where they are or how they got there. **What's typical?** Getting confused about the day of the week but figuring it out later.

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___5. Trouble understanding visual images and spatial relationships. For some people, having vision problems is a sign of Alzheimer’s. They may have difficulty reading, judging distance and determining color or contrast. In terms of perception, they may pass a mirror and think someone else is in the room. They may not recognize their own reflection. **What's typical?** Vision changes related to cataracts.
6. **New problems with words in speaking or writing.** People with Alzheimer’s may have trouble following or joining a conversation. They may stop in the middle of a conversation and have no idea how to continue or they may repeat themselves. They may struggle with vocabulary, have problems finding the right word or call things by the wrong name (e.g., calling a watch a “hand clock”). **What’s typical?** Sometimes having trouble finding the right word.

7. **Misplacing things and losing the ability to retrace steps.** A person with Alzheimer’s disease may put things in unusual places. They may lose things and be unable to go back over their steps to find them again. Sometimes, they may accuse others of stealing. This may occur more frequently over time. **What’s typical?** Misplacing things from time to time, such as a pair of glasses or the remote control.

8. **Decreased or poor judgment.** People with Alzheimer’s may experience changes in judgment or decision making. For example, they may use poor judgment when dealing with money, giving large amounts to telemarketers. They may pay less attention to grooming or keeping themselves clean. **What’s typical?** Making a bad decision once in a while.

9. **Withdrawal from work or social activities.** A person with Alzheimer’s may start to remove themselves from hobbies, social activities, work projects or sports. They may have trouble keeping up with a favorite sports team or remembering how to complete a favorite hobby. They may also avoid being social because of the changes they have experienced. **What’s typical?** Sometimes feeling weary of work, family and social obligations.

10. **Changes in mood and personality.** The mood and personalities of people with Alzheimer’s can change. They can become confused, suspicious, depressed, fearful or anxious. They may be easily upset at home, at work, with friends or in places where they are out of their comfort zone. **What’s typical?** Developing very specific ways of doing things and becoming irritable when a routine is disrupted.

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If you have questions about any of these warning signs, the Alzheimer’s Association recommends consulting a physician. Early diagnosis provides the best opportunities for treatment, support and future planning.

For more information, go to [alz.org/10signs](http://alz.org/10signs) or call 800.272.3900.

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Aging Well Workshops

Mondays at 1:00 PM

In the living area at Heineberg join us as we discuss stress management, the hidden benefits of aging, and how everyone can age well!

BRING A COFFEE MUG!!
Welcome to Aging Well! Aging Well is a new program to SASH and its intention is to open discussion about Aging Well and maybe change the way you feel about aging. Aging Well is designed for the elderly population and we hope that the topics are of interest to you. Each week there will be a short presentation (10-15 minutes) on that day’s topic followed by a discussion. You will have some of the questions for that week’s topic handed to you before each session, but we will not always have time to get to all of the questions. The questions serve as a guide for the conversation, but Aging Well is an open discussion and if you have any questions relating to aging feel free to raise them during the workshops.

Each week there will be optional assignments. The assignments are OPTIONAL and in no way is it the expectation that everyone will want to do them. They are intended to be fun exercises that some people may enjoy.

On the next page you will find a schedule for the 8 weeks. Thank you for your interest!

“Aging is not lost youth, but a new stage of opportunity and strength.”
-Betty Friedan
Weekly Schedule

Monday, January 9th-Aging Well Workshop #1-Aging Well Defined: Reframing the way we think about aging

Monday, January 16th-Aging Well Workshop#2-Aging Well with Stress: Stress management and coping strategies I

Monday, January 23rd-Aging Well Workshop #3-Aging Well with Stress: Stress management and coping strategies II

Monday, January 30th-Aging Well Workshop #4-You are never too old too learn.

Monday, February 6th-Aging Well Workshop#5-Giving and receiving help

Monday, February 13th-Aging Well Workshop #6-Life Transitions: Stress management and coping strategies III

Monday February 20th-Aging Well Workshop #7-With age comes wisdom (and other benefits of aging)

Monday February 27th-Aging Well Workshop #8-Strategies and support for Aging Well

Post the schedule in your home or mark the dates in your calendar. We would love it if you attended all of the Aging Well Workshops, but if you have scheduling conflicts or are only interested in certain topics then feel free to pick and choose the workshops that work for you.
Aging Well Defined: Reframing the way we think about aging

What is Aging Well? First off, the intention of Aging Well is not to offer a prescription of how to age. The bulk of the content comes from you, the participant. The goal of Aging Well is to generate discussion on topics related to aging, and discuss strategies regarding how to cope with some of the challenges of aging. Also, significant time will be spent discussing the benefits of aging. The handouts that accompany the workshops are meant to help to guide discussion. You will find discussion questions in the handouts, some of which you will spend time on during the workshops. The content of the handouts is meant to provide some background information relating to the topics.

Today’s topic is broad in scope. Future topics will be more focused. The first week is going to serve as an introduction to Aging Well and the goal of the group discussion is going to be to try to come up with a group definition of Aging Well. Reframing the way we think about aging is going to be one of the recurring themes throughout all 8 weeks of Aging Well. Today we are going to discuss some of the positive aspects of aging. The optional assignment that you will find at the end of the packet is meant to introduce you to new activities or and to remind you of old favorites that you may enjoy reintroducing to your routine. As with anything new, you will find that you get the most out of Aging Well if you approach it with an open mind.

“Age is how we determine how valuable we are.”
-Jane Elliot
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To start the discussion today, consider the following question.

What words do you associate with aging, elderly or senior citizen? What are the common stereotypes? How many of these words would you consider to be positive and how many negative?

Most participants will come up with words that have a negative tone to them more easily. However, you may find that the opposite is the case for your group. If you have something to write on, make a list for the group. If you don’t, just jot down on a piece of paper what the group brainstorms. You will find some suggestions on how to do this exercise in the outline. If the group is having a difficult time coming up with positive words, here are a few suggestions: timeless, beautiful, impressive, magnificent, strong, enduring, lasting, mature, seasoned, venerable, veteran, vintage, and wise.

Was it easier to think of “positive” words or more “negative” words?

Hopefully, you will have some participants who found it easier to come up with easier ones, but this may not be the case. Reflect on why this may be the case. Stereotypes and misperceptions could impact the societal view of aging.

One idea about how to age well is termed positive aging. One book used to develop this workshop was Positive Aging by Robert D. Hill. Positive aging comes from the field of positive psychology, which at an individual level is about positive traits: the capacity for love and vocation, courage, the appreciation of beauty, strength, forgiveness, originality, mindfulness and wisdom. At the heart of positive psychology is the idea that human beings possess the strength and resources to help them cope with challenges across the life span. Positive aging requires that an individual makes choices and engages in coping, even when confronting changes in health and physical well being that can accompany aging. It is important to understand that positive aging (and Aging Well) is not about avoiding the pitfalls of aging and being lucky. Instead it encourages you to embrace the changes that come with aging and recognize that some decline and
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significant changes are a natural part of life, and importantly it is possible to change how these affect your wellbeing.

What are the difficult parts of aging? In future workshops we will discuss coping strategies, but think about how you have overcome some of these difficulties.

If you have previewed the weeks ahead, mention when the topics will be covered. For example, if someone mentions memory loss, remind the group that this will be covered in Workshop #4. Most of what the group brainstorms here will be covered more generally in the Stress Management and Life Transition workshops.

Have some of the difficult parts involved significant change for you?

How have you coped with the change? Have you found yourself “embracing the changes that come with aging,” or fighting them?

The first question in this set has an obvious answer. The question regarding coping, however, will hopefully generate a variety of responses. If there is not much in a way of response to the question regarding coping strategies, mention that you will discuss in more detail specific coping strategies in future workshops.

The following example highlights what is meant by “Positive Aging”. The hypothetical scenario and proposed positive aging approach may seem intuitive or simplistic, but it is meant to demonstrate positive aging. Positive Aging is not meant to be difficult in theory, although practicing may require a change of perspective. Consider the following.

It is common that as an individual ages, he or she may experience vision changes that can make reading difficult. If the individual enjoys reading the news daily he or she would purchase eye-glasses. If the vision loss progresses further, an individual may purchase a magnifying glass. If the loss progresses to the point where an individual can no longer read, he or she then could then listen to the news daily on the
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radio and explore other interests like listening to music that do not require vision. These adjustments and choices enable the individual to preserve quality of life in the face of adversity. By choosing to adapt to the challenge, instead of dwelling on it, one can cope with the difficulties of life and age positively. You may approach this problem in a similar fashion, indicating that you are already embracing the notion of positive aging.

Think about one of the difficulties of aging. With Positive Aging in mind how might you approach this differently?

**An alternative question to ask is: Would you consider yourself a positive ager?**

There are certainly difficult parts of aging, but there are benefits too. During the last two weeks of Aging Well, we will discuss these benefits. British playwright Tom Stoppard said, “Age is a very high price to pay for maturity.” In addition to maturity, what are the other benefits of aging? Are the benefits harder to think of than the difficulties of aging?

Andrew Weil writes that aging can, “add richness to life”, “replace the shallowness and greenness of youth with depth and maturity”, “develop and enhance desirable qualities of personality while lessening undesirable ones”, “smooth out roughness of character”, “enhance the mental, emotional, and spiritual aspects of life by the same processes that cause decline of the physical body”, “confer the advantages and power of survivorship”, and “develop one’s voice and authority as a living link to the past”. Share some of these with participants if you need to generate discussion. You will discuss these in more detail in the final workshop on the benefits of aging.
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Are the benefits harder to think of than the difficulties of aging?

A study of 184 individuals ages 18-94 revealed that older people were less likely than their younger counterparts to have persistent negative emotional states. Older people were also found to have better regulation of their emotions and experience a greater complexity of emotions.

What insight have you gained as you have aged?

What are you better at now than when you were younger? Think about how you handle situations in life.

This question may reveal the more thoughtful participants in the group. If you find a response particularly meaningful, have the participant elaborate on it or allow other participants reflect on it. You may find that a participant (or multiple participants) is dismissive of answers that are more thoughtful and positive. If this happens, tactfully defend the positive answer while being respectful of differing opinions. However, try not to let those with a more pessimistic view sway the intended positive tone of the workshops.

What would be your ideal way to age? Is it realistic? Have you met this ideal or do you think you can?

A possible response from the moderator is, “I used to want to live to one-hundred and still be running every day (or whatever physical activity you like to do). However, even at my younger age I realize that although it is okay to want that there are many other wonderful ways to age.” Consider mentioning how working with the elderly has changed your view of the ideal way to age.
How would you define aging well? What is necessary for you to feel as though you are aging well? Do you currently think you are aging well? Try to think about aging well given your current circumstances. Your definition of aging well can differ from your ‘ideal way to age’ and should be something you can live up to.

This question is key and hopefully the participants will lead you to the intended response. The definition should include the idea that Aging Well is doing, continuing to be active and live life in whatever way you can. Even in the face of changes in health, finances, loss, to continue to do things that bring you joy.

Hopefully, a couple of participants will mention something similar to the above definition, so you can reframe their words into the idea that Aging Well is doing. This question segues well into the optional assignment and activity list. Call attention to the list, if you have not already done so.

Another thing to add to the definition is that aging well involves being able to live in the moment. If you bring this up, mention that next week you are going to focus on a strategy that can improve one’s ability to live in the moment.

Is there anything in your routine to help you age well? Think about activities such as taking medications, exercise, diet, social activities and pleasurable activities.

What do you do every day to help you age? Every week? Every month? Every year? Is there something you would like to add to your routine?

These last two questions are really only in here for individual participants reading this. They do not work as well with larger numbers.
Optional Assignment

Before next Monday, consider adding one or more activities to your routine from the list on the following pages. Choose an activity you have never tried or reintroduce an old favorite. If you don’t see the activity you had in mind, then add it to the list. Set a goal for yourself for doing it a certain number of times. It can be just once over the next week or every day. Next week part of the discussion will be about the experience of adding the new activity.

“Growing old is no more than a bad habit which a busy person has no time to form.”
- Andre Maurois

List the activity(ies) you are going to add to your routine:

1.  
2.  
3.  
4.  

What is your goal for your activity?

1.  
2.  
3.  
4.  

“Growing old is no more than a bad habit which a busy person has no time to form.”
- Andre Maurois
**Activity Ideas**

1. Soaking in the bathtub
2. Collecting things (coins, shells, etc.)
3. Going on vacation
4. Relaxing
5. Using your finer tableware once a week
6. Going to a movie in the middle of the week
7. Walking
8. Listening to music
9. Buying household gadgets
10. Lying in the sun
11. Laughing
12. Thinking about past travels
13. Listening to others
14. Reading magazines or newspapers
15. Hobbies (stamp collecting, model building, etc.)
16. Spending an evening with good friends
17. Planning a day’s activities
18. Meeting new people
19. Remembering beautiful scenery
20. Eating favorite foods
21. Practicing yoga or tai chi
22. Repairing things around the house
23. Working on the car or bicycle
24. Remembering the words and deeds of loving people
25. Spending time with children or young people
26. Doing volunteer work
27. Having a quiet evening
28. Going antique shopping
29. Caring for houseplants
30. Going swimming
31. Doodling
32. Wearing nice clothes
33. Going to a party
34. Playing golf
35. Having discussions with friends
36. Having family get-togethers
37. Spending time outdoors
38. Going for a drive
39. Singing
40. Arranging flowers
41. Practicing religion or spirituality
42. Losing weight
43. Going to the beach
44. Acknowledging my good points
45. Going to a class reunion
46. Going for a boat ride
47. Traveling
48. Painting
49. Doing something spontaneously
50. Working on textiles (embroidery, needlepoint, weaving, knitting, etc.)
51. Sleeping well
52. Driving a friend someplace
53. Entertaining
54. Going to clubs (garden, bridge, etc.)
55. Singing with a group
56. Flirting
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57. Playing a musical instrument
58. Doing arts and crafts
59. Making a gift for someone
60. Doing arts and crafts
61. Buying records/CDs
62. Watching sports (live or on TV)
63. Planning a party
64. Cooking
65. Hiking
66. Writing poetry, stories, articles
67. Sewing
68. Buying clothes
69. Going out to dinner
70. Working on a project
71. Discussing a book
72. Sightseeing
73. Gardening
74. Going to the beauty parlor
75. Drinking coffee/tea and reading the newspaper
76. Playing tennis
77. Kissing
78. Being with my children
79. Watching my grandchildren
80. Going to plays and concerts
81. Daydreaming
82. Listening to music
83. Refinishing furniture
84. Watching TV
85. Making lists of tasks
86. Riding a bike
87. Walks in the woods or waterfront
88. Buying gifts
89. Going to a national/state/local park
90. Completing a task
91. Going to spectator sports (auto racing, horse racing)
92. Teaching
93. Taking photos
94. Fishing
95. Playing with pets
96. Traveling in a plane
97. Reading fiction
98. Acting
99. Enjoying time alone
100. Writing in a diary or journal
101. Cleaning
102. Reading nonfiction
103. Taking children places
104. Writing letters
105. Surfing the internet
106. Writing email
107. Dancing
108. Going on a picnic
109. Meditating
110. Having lunch with a friend
111. Going to the mountains
112. Thinking about happy moments in my youth
113. Splurging on something
114. Playing cards
115. Solving riddles
116. Having a political discussion
117. Viewing or showing photos to someone else
118. Playing guitar
119. Doing crossword puzzles
120. Shooting pool
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121. Dressing up and looking nice
122. Reflecting on how I've improved
123. Buying something for myself
124. Talking on the phone
125. Going to a museum
126. Thinking spiritual or religious thoughts
127. Lighting candles
128. Listening to the radio
129. Getting a massage
130. Saying “I love you”
131. Thinking about my good qualities
132. Buying books
133. Taking a sauna or steam bath
134. Going to the library
135. Bowling
136. Woodworking
137. Sitting in a sidewalk café
138. Caring for an aquarium
139. Going horseback riding
140. Becoming active in the community
141. Doing something new
142. Putting together a jigsaw puzzle
143. Cuddling
144. Telling jokes
145. Going out to the country
146. Making a contribution to a charitable cause
147. Meeting someone new
148. Going out for fresh air
149. Going camping
150. Thinking about something good in the future
151. Completing a difficult task
152. Taking a shower
153. Having a frank and open conversation
154. Wearing comfortable clothes
155. Combing or brushing my hair
156. Taking a nap
157. Solving personal problems
158. Watching wild animals
159. Having an original idea
160. Landscaping or doing yard work
161. Wearing new clothes
162. Listening to the sounds of nature
163. Opening my mail
164. Watching a storm
165. Enjoying a sunrise or sunset
166. Helping someone
167. Talking about my children or grandchildren
168. Eating a delicious meal
169. Doing a job well
170. Complimenting or praising someone
171. Thinking about people I like
172. Feeling the presence of God or a Higher Power in my life
173. Doing a project my own way
174. Doing “odd jobs” around the house
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175. Going to a family reunion or get together
176. Going to a restaurant
177. Admiring or smelling a flower or plant
178. Using cologne, perfume or aftershave
179. Reminiscing & talking about old times
180. Getting up early in the morning
181. Enjoying peace and quiet
182. Visiting friends
183. Saying prayers
184. Doing favors for people
185. Shopping
186. Having house guests
187. Watching people
188. Completing a project or task
189. Being with happy people
190. Smiling at people
191. Enjoying the company of my partner/spouse
192. Having a drink with friends
193. Beach-combing
194. Feeling proud of my family or friends
195. Receiving a gift
196. Seeing old friends
197. Looking at the stars or moon
198. Caring for houseplants
199. Getting a manicure or pedicure
200. Trying a new recipe
201. Getting involved in a social/political cause
202. Going for a ferry ride
203. Baking a favorite treat
204. Giving away something you no longer use to someone who can use it
205. Sharing a favorite recipe
206. Finding a bargain for something you were going to buy anyway

Adapted from: Lewinsohn, P. M., Munoz, R. F., Youngren, M. A., & Zeiss, A. M. Control your depression. New Yorkimon & Schuster. 1986
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Stress and Aging

““Stress is an important dragon to slay- or at least tame-in your life”
-Marilu Henner

In the 1950s Dr. Hans Seyle first popularized the term “stress.” He researched the responses of animals and people to stress. Stress is a response to stressors, which can be caused by external events such as environmental changes or by internal events. An internal cause of stress might be a thought or a feeling. When thinking about the impact of stress on our lives, it can be helpful to start by thinking about how different kinds of stress responses. Every person responds differently to stress, but given enough stress, there are certain things that happen to everyone.

If you were walking along the street and a lion jumped out at you, you would experience a stress response. The stress response is both psychological (your mind’s response) and physiological (your body’s response). If you looked closely into the eyes of someone under extreme stress, you would notice their pupils have dilated to allow more light in. The hair on the person’s body stands more erect to make the person more sensitive to vibrations. The person’s mind is more attentive and alert. The person’s heart rate increases, and the heart pumps harder to allow more blood flow to the large muscles of the arms and legs. The increased blood flow allows the person to run if needed. The blood flow to the digestive system shuts down, to allow more blood flow to other areas of the body. It is the decreased blood flow to the stomach that causes the “butterflies” that people experience when they are under stress.
Do you ever experience physical symptoms from stress? If so, what physical symptoms do you experience?

**Volunteer how you physically experience stress.** The idea of this question is to get the participants accepting the idea that everyone experiences stress. However, do not spend too much time discussing physical symptoms. The intention of this workshop is to discuss how to cope with stress.

This type of stress response from the body is called “fight or flight,” and it served humans very well when they spent their days gathering food. Threats from predators—like the lion—require these types of response. This stress response does not serve us well as we encounter day-to-day stress in the modern age. Most of the stress in our everyday lives results from our perceptions or how we think about what’s happening around us. The most effective way to eliminate day-to-day stress is to change the way we think, to change what we are thinking about, or to change our behavior, so that in essence, we are thinking about our behavior instead of our stress.

What are the sources of stress in your life?

**If you have something to write on, like a white board, write down the participants’ responses.** Star the ones that are age related.

Are the sources of stress you face now the same as the sources of stress that you faced when you were younger?
This question does not have to be asked explicitly, but try to steer the conversation towards stress that comes with aging.

Is any of the stress in your life due to your age or the changes that come with aging?

With whatever stressors the participants mention, make the point of saying, “the stress management techniques we will discuss in Aging Well can work for ANY type of stress.”

The mind also responds to stress, and this is called the “psychological” response. Psychological stress results from thinking about circumstances surrounding a past event, a future event, or relationship in a way that exceeds your resources. For example if there is bad weather outside and ice on the sidewalks, you might worry that you will fall if you walk outside because the stress (falling) exceeds your perception of your resource (your balance). If you see that the sidewalks are salted, this can change your perception and decrease your stress. If you have taken a balance class, you may not be as worried because you have greater resources. You could also choose not to walk outside, by changing your behavior (although this may not be the preferred choice). A circumstance like responding to ice on the sidewalks is short-lived or “acute” stress.

“The greatest weapon against stress is our ability to choose one thought over another.“
-William James
What types of short-lived, or acute stress, do you have in your day-to-day life?

How do you handle acute stress? Do you ignore it (change your behavior or thoughts)? Is it sometimes hard to ignore?

The questions regarding acute stress can be skipped and you can simply identify for the participants which of the stressors mentioned would qualify as acute stressors.

Do you ever challenge your thoughts to think about stress differently?

This is to introduce the group to the idea that we can change the way we think to change how we experience stress. You will hopefully be pleasantly surprised by how many participants do this in their own lives, and how others embrace the idea.

Do you ever change your behavior just to get your mind off of stress?

The idea of mentioning behaviors is for the group to appreciate how engaging in certain activities can take your mind of stress. If the participants are not volunteering many activities, refer to the list from the first week. Allow
participants to elaborate on the experience of becoming engrossed in an activity when stressed and how much better they feel afterwards.

Other sources of stress in your life might always be there, or be present for a long time. This type of stress is called “chronic” stress. Chronic stress can be the result of fear (fear of disease or disability) or of circumstances in your life (state of health, relationships).

You can use the same strategies that you might use for acute stress to address chronic stress. For example, a source of chronic stress for some is fear of living in a nursing home. There are many ways to alter this stress. Information can change your perception. Only 7% or 1/14 seniors over age 75 lives in a nursing home, and only 13% or 1/8 seniors over age 85 lives in a nursing home. These numbers decrease every year. It could be helpful to speak with a physician regarding this fear to change your perception about whether you are likely to need nursing home care. Visiting a nursing home might change your perceptions about what it might be like. Stress about living in a nursing home is internal stress because it comes from thoughts. Getting information or having conversations can change your thoughts, but so can your behaviors. If you find that you are thinking about a fear that causes stress, you can challenge the fear with a different thought. You can also do something else (change your behavior) and take your mind away from stressful thoughts. Any number of behaviors that require focus, attention, and presence can be helpful in stressful situations. The list from the previous week has a number of activities that can be pleasurable and also helpful in times of stress.

What are the sources of chronic stress (circumstances or thoughts that have been present for a long time) in your life?
Participants will likely volunteer many health problems here. You may also have participants reflect on the death of a loved one or on a loved one who is dying.

You will probably also spend some time discussing nursing home care, given the previous example. You will likely have many participants who relate to the example. Hopefully, a participant will volunteer that they have visited or spent time living in a nursing home, and that it was better than he or she expected. You may have someone state the opposite.

How do you cope with the chronic stress? Do you try to ignore it (change your thoughts)?

Do you ever engage in activities to distract yourself from chronic stress? Have you ever tried doing something you enjoy because you are stressed?

This question is similar to the question from before. If you feel like the participants already spent enough time reflecting on activities helpful for stress management, then skip it.

Do you ever challenge the thoughts that result from chronic stress? Have you ever challenged them in your head? Have you ever tried challenging them on paper?

Challenging thoughts relating to chronic stress can be more difficult that challenging thoughts relating to acute stress. You will likely find that some participants cannot challenge
thoughts related to chronic stress. Hopefully the participants will help each other. In addition, engaging in activities and mindfulness (see below) can be especially helpful for thoughts that are difficult to challenge.

**Mindfulness and Aging**

Mindfulness is a practice that is being readily adopted by Western society as a way to manage stress. Mindfulness is paying attention to the present moment, non-judgmentally and intentionally. Think of it as a universal human quality that through formal and informal practice you can improve upon. It is important to define mindfulness as a *universal* trait. Though we may not all be mindful all of the time, we all have the capacity to live in the present moment. Cultivation of mindfulness takes practice. Formal practice often involves meditation, time set aside to focus on the breath, the present moment, a particular feeling, or an area of the body. Less formal mindfulness practice includes focusing your attention on a beautiful photograph, painting, tree, piece of fruit, music on the radio, or simply taking a deep breath.

Regardless of current health status, including any issues with memory impairment, older individuals can benefit from mindfulness practice. Mindfulness practice can effectively change stress responses and reverse some of the negative effects of chronic stress. Studies have demonstrated lower stress and anxiety levels, improved immune function (ability to fight off disease and illness, both acute and chronic), improved memory, improved mood, improved sleep, and improved overall wellbeing. Older individuals may be particularly adept at mindfulness, as many cite an improved ability to live in the present moment in older age. In a later workshop, this improved ability that some note is discussed.

Do you find that it is easier to live in the moment now than when you were younger?
Some participants will reflect on a liberty from some responsibilities that comes with aging and how it is easier to live in the moment. Likely, some participants will not have had this experience. As you transition to the mindfulness exercise, mention that the ability to live in the present moment can be improved at any age.

Take some time now to experiment with the concept of mindfulness with other participants. After the mindfulness exercise, reflect on the experience.

The Sensuous Orange: A mindfulness exercise

Set aside about 15-20 minutes for this exercise. Make sure you start this exercise with 25 minutes left in the workshop. (You can do this at the beginning, if you choose.) If you need to, skip some of the sections and save them for next week’s workshop.

You are going to guide the participants through a mindfulness exercise. Have an orange for each of the participants. Naval oranges work best because they are easiest to peel. Have paper towels available to absorb any oils and juice.

Read the following instructions to the participants.

1. In this exercise, you are going to focus your attention on the sight, feel, smell, taste, and even sound of the orange. During the exercise other thoughts, not related to the orange will enter your mind. That is okay. When this happens simply watch the thoughts go by and refocus your attention on the
orange. You may also choose to focus your attention on your
breath simultaneously.

2. Take your orange and examine it visually. Without judgment,
note its color, its texture, its shape, and its size. *(Allow some
time in silence to pass 30-60 seconds, whatever feels
appropriate)*

3. Now close your eyes and pay attention to how the orange
feels. Is it smooth, rough, or dimpled? What temperature is
it? Roll it around in your hands. *(Allow some time in silence to
pass)*

4. Now you can open your eyes. Slowly peel the orange. What
does the inside feel like? What do the individual pieces of the
peel look like? What do you hear as you peel the orange?
*(have the participants, peel the orange in silence)*

5. Now pay attention to the smell of the orange. Bring the
orange towards your nostrils and deeply inhale.

6. Take a piece of the peel and twist it until the oils are released.
Notice how that smell differs from the smell of the fruit.
*(allow some time to pass in silence as the participants complete
this task)*

7. Carefully separate the orange into sections.

8. Take a bite of the section of the orange. Chew it slowly at
least 10-15 times. What sound does the chewing make?
*(allow some time to pass in silence as the participant each take
their first bite of the orange)*
9. Now close your eyes. Continue to slowly to eat the orange. Focus your attention on the taste and smell of the orange. Pay attention to how it feels in your hand and your mouth. You may become distracted by unrelated thoughts. If this happens, refocus your attention on the orange and tell yourself, “My orange tastes and smells like __________.” Return your focus to your sensations and self-talk about the orange.

*Spend the remainder of the exercise (5 minutes or so) having the participants eat the orange in silence.*

10. You may open your eyes. We are now going to discuss what the experience was like.

Was this experience like other experiences you have had eating an orange?

How was it different than other experiences you have had eating an orange?

Was it easy to focus on your sensations?

What happened when you were distracted by thoughts?
Did you find that you were more focused on the present moment? You can practice mindfulness with any activity. If you enjoyed this exercise, set some time aside over the next week to practice mindfulness. You may find that there are already many activities that you already do mindfully. When you take a walk outside, you may notice your surroundings and have a clear mind. This is certainly an example of mindfulness. One great way to practice mindfulness is to take time to focus on the breath and sensations when you are enjoying a meal or a snack when you alone. Try it without other distractions like the television, the radio, a book, magazine, or newspaper.

Optional Assignment

Take time over the next week to practice mindfulness. Try to introduce mindfulness into your daily routine, in multiple activities if you would like. If you are having a particularly stressful day, see what happens to your level of stress if you take five minutes to mindfully enjoy a meal, a walk, or anything you so choose.
Stress Management

“Pressure and stress is the common cold of the psyche.”
-Andrew Denton

Start by talking about the mindfulness exercise from last week, and consider starting this workshop with 1 minute of mindfulness (and subsequent workshops as well).

Stress is not all bad—we need it to wake up in the morning! It is unchecked stress and uncontrolled stress responses that can lead to health consequences. Our health is affected by all sorts of factors, including genetics and lifestyle. Too much stress can negatively impact our mental and physical health.

It is worth mentioning a few examples of how stress can impact our health to help put in perspective the importance of stress management. Studies show that stress can increase the number of colds we have and the severity of our cold symptoms. Scientists think this is due to cortisol, a hormone released by the stress response that can weaken the immune system. Stress has also been found to decrease wound healing time by 40%. Stress can increase blood pressure and worsen heart disease. Perhaps most obvious, but worth mentioning, is that stress can worsen symptoms of anxiety and depression. Stress negatively affects psychological well-being, recovery from cancer, periodontal disease, alcohol consumption, and cardiovascular disease. Although the evidence is not definitive in all of these examples, the conclusion that stress causes negative health consequences is generally accepted.

Has there ever been a time in your life when your stress level negatively impacted your well-being?
If you need to, generate discussion by reflecting on a time when stress negatively impacted your health.

Did a specific life event cause the stress? Or did the cumulative effect of many stressors cause the stress?

Stress can also impact cognition and performance. For anyone who has ever had performance anxiety, taken a test, spoken in public, or become flustered trying to complete a familiar task, they have seen the impact stress can have on one’s memory. Cortisol released in response to stress binds to an area in the brain known as the hippocampus, where long-term memories are formed. Stress also impacts the working memory. Working memory holds information in the mind necessary for verbal and nonverbal tasks, like reasoning and comprehension—the part of your memory that lets you recall information. Stress can cause us to stumble over our words when we are nervous and make it difficult to remember what we were thinking about in the first place.

Has stress or anxiety ever impacted your memory?

These two questions do not have to be explicitly asked. The idea is to like in the previous workshop, have the participants thinking about the impact of stress on quality of life.

Has it ever impacted your performance?
Fortunately, stress can be managed in a number of ways, and almost everyone already has many stress management skills even though they might not be aware of them. Stress management skills can be cultivated and developed through practice.

We should all become well-versed in stress management. In one study, people who regularly practiced at least one of several stress management skills, including exercise and meditation, experienced a decrease in systolic blood pressure, regardless of which skill they practiced. Stress management has been demonstrated to prolong the quality of life and increase the lifespan of women with breast cancer. Relaxation techniques and stress management also improve mood and anxiety levels in individuals recovering from heart attacks.

What stress management techniques do you currently have?

**Ask participants why they find particular techniques or activities helpful. Is it distracting, enjoyable, relaxing? Why?**

Are your stress management techniques part of your normal routine?

**In this workshop and the previous, the negative effects of stress have been detailed. Discuss the importance of regular and routine stress management for optimum health.**

Do you ever use your stress management techniques with the explicit goal of decreasing your stress?

**See above.**
Stress management techniques

Exercise has been shown to change the body’s response to stress. This does not have to be strenuous exercise, any type of movement changes the body’s response to stress. Individuals who exercise regularly benefit from improved mood and emotions, as well as reduced tension, fatigue, and anger. Some scientists think exercise improves mood by releasing endorphins. Exercise can serve as a time when we focus more on the present and less on the thoughts that may cause our stress responses. If you think exercise might help you manage stress, you should speak with your physician about what kind of activities you might be able to do.

What do you do to remain physically active?

Have you ever done a physical activity such as walking or stretching to quiet your mind or de-stress? Was it helpful?

Mention to the group that physical activity done for general health is equally important for stress management.

Meditation involves focusing attention away from immediate worries or concerns. It is achieved through focusing on the breath or an area of the body instead of your thoughts. You can also meditate by focusing attention on something relaxing, such as music or by imagining a relaxing place or experience that you’ve had in the past. Traditional meditation practice involves sitting or lying with eyes closed, but you can practice meditation in any number of ways. Focusing attention on a beautiful photograph, painting, tree, piece of music or the sky can be a form of meditation.
Taking in a deep breath to relax is a form of meditation, too. Or you can slow down and notice your surroundings. Meditation is effective because it moves attention away from thoughts that cause stress.

In the outline for this workshop, you will find a link for some free meditations. If possible, have an audio recording of a 5-10 meditation to do with the group.

Is there anything that you do on a regular basis that would fit into the broader definition of meditation? Is there an activity you do that requires intense focus or that results in relaxation?

Reflect again on mindfulness here and how any activity can be done mindfully, which can help with stress management.

Any activity that moves your focus away from the distressing thoughts can be a form of stress management. Having a cup of tea, listening to music, talking to a family member or friend on the phone or in person, and taking a walk are all forms of stress management. When there is increased stress in your life, it’s important to allow yourself time to do the activities in your regular routine that provide stress management.
Optional Assignment

Look at the list of activities from workshop #1 and read the list again this time starring activities that you find particularly helpful when you have increased stress in your life. If you find yourself occupied by a thought or having increased stress, consider engaging your focus by doing one of the activities starred on your list. Choose an activity that you think you would enjoy and that would require some focus or attention. See what happens to your stress or worry when you do the activity. Was the worry more or less present?
The Aging Mind: You are Never Too Old to Learn

“Every man’s memory is his private literature.”
-Aldous Huxley

Today we are going to discuss the aging mind and what to do to keep your mind healthy. Some might worry that their memory problems may indicate something more serious than normal age-related memory loss, like Alzheimer’s disease. I have included a Frequently Asked Questions section that will hopefully address many of these questions. If you have a question not answered, I am happy to help you find the answer for you by consulting a quality source or expert in the field.

All of the advice and information that you’ll learn about keeping your mind healthy can be good for individuals of any age or health status (even if you already have a diagnosis of Alzheimer’s or other dementia).
Like any other organ, our brains change with age. Just as our knees don't keep bending the way they used to, our brain does not create and store memory in the same computer-like way. The first signs of normal age-related memory loss usually appear after one's fortieth birthday, like forgetting a character's name from a movie or forgetting where to find the car keys. We might call these 'senior moments'—such deficiencies in memory are easily brushed off. Humor helps to cope with changes in memory. That phrase, however, can reinforce the idea that memory decline should be accepted as part of aging and nothing can be done to address it.

“I’ve a grand memory for forgetting.”
-Robert Louis Stevenson

Have you experienced changes in your memory with age? If so, what changes have you experienced?

**Many will tend to make jokes. If appropriate, humor can be helpful for some people to cope with anxiety around memory loss. Others may share very tragic stories of dementia. You will likely be impressed with the participant’s response to one another around this difficult topic. Volunteer your own experience with memory loss.**

If you have experienced changes, has the change been a source of frustration?

**The answer to this question is very obvious. However, this is in here so that some participants can hopefully volunteer something positive, “When I first started having difficulty with my memory, it was very difficult. But now I find that I am not as easily frustrated.”**

It can be helpful to add that mindfulness and living in the present moment, can be a great way to deal with frustrations or anxiety about memory loss.
Working memory or short-term memory is the memory that holds information for a minute or two before our brain decides whether to store it or to forget it. Working memory lets you recall information and holds the information necessary for verbal and nonverbal tasks, like reasoning and comprehension. Last week we discussed how stress impacts working memory. Normal age-related memory loss also affects working memory. Fortunately, short-term memory can be improved, and its decline can be slowed with intellectual stimulation.

Intellectual stimulation doesn’t have to be rigorous or serious—it can be accomplished through playing board games, such as scrabble or chess. You can do cross-word puzzles or Soduku. Reading for pleasure and discussing what you have read with a friend or family member is also intellectually stimulating. If you do not have anyone with whom to discuss what you read, consider writing down your thoughts about it. Watching an educational program on television is also intellectually stimulating, however mindlessly watching television unfortunately doesn’t count. Taking an adult education course, learning a new skill, taking up a new hobby or reintroducing yourself to an old hobby are all excellent forms of intellectual stimulation. Having a stimulating conversation, like we do in Aging Well is also a form of intellectual stimulation.

What are the sources of intellectual stimulation in your life?

A great way to answer this question is to have each participant share, one or multiple sources of intellectual stimulation in their life.

Are you engaged in intellectual activities on a daily basis?

Many of the activities from the activity list of 200+ activities referenced in the first three weeks of Aging Well include intellectually stimulating...
activities. Many of these activities that require attention and focus are also intellectual stimulating.

Below are some of the intellectually stimulating activities from the list and some others I have added. If you would like, circle the activities you already perform and star the ones you would consider trying. Please volunteer activities not on the list so the list can be expanded.

“I’m always trying to think of fun things to do to create a memory.”

-Josh Hartnett

Participants will likely be reading the list; some will make comments. Volunteer to the participants that you plan to try 1+ of the activities this week. Be specific.

*Next week, start the discussion by asking the participants if anyone tried a new intellectually stimulating activity.

1. Reading magazines and newspapers
2. Hobbies (stamp collecting, model building etc.)
3. Discussing current events with friends
4. Learning new quotations from famous people.
5. Learning about gardening
6. Reading a book on golf and practicing your swing with advice from the book
7. Researching places you would like to travel
8. Painting
9. Drawing
10. Cross word puzzles
11. Jumble
12. Word search
13. Soduku
14. Researching places you would like to travel to
15. Learning about nutrition (and implementing what you have learned into your lifestyle can have added benefits)
16. Singing (memorizing the lyrics to a new song)
17. Practicing a musical instrument
18. Writing poetry, stories or articles
19. Taking on a new home improvement project or craft project
20. Reading a novel
21. Talking to your grandchildren about what they are studying in school
22. Teaching a friend something you know well
23. Teaching a family member something you know well
24. Learning how to play a new sport
25. Learning a new exercise routine
26. Learning a new dance
27. Practicing an old dance
28. Watching a stimulating and educational television program like a documentary
29. Turning off the TV and writing down your thoughts about the program you watched
30. Learning about your local community
31. Researching your ancestry
32. Acting in a play
33. Memorizing lines from your favorite television show or movie
34. Writing letters
35. Learning how to cook a new dish
36. Learning about digital photography
37. Learning how to tie a new fly for fly fishing
38. Doing research on a topic of interest on the internet and taking notes
39. Talking to a friend about what you researched on the internet
40. Learning a new card game
41. Solving riddles
42. Studying a religious text for education or for spirituality
43. Reading the fine print
44. Educating yourself on medications you are taking and the diseases you are taking them for
45. Learning how to meditate and about meditation
46. Writing an email about what happen to you that day to your children or relatives
47. Having a political discussion
48. Writing in a diary or journal
49. Learning about local vegetation and walking in nature recalling what you have learned  
50. Teaching a class  
51. Going to a museum  
52. Listening to the news on the radio and talking about it with a friend  
53. Visiting your local library and taking out a new book  
54. Learning a new joke and telling it to a friend  
55. Learning about community based programs and becoming involved  
56. Learning about spring flowers and going for a walk to enjoy them  
57. Learning about weather patterns  
58. Learning how to care for a new houseplant  
59. Anything that engages your mind and holds your interest  
60. Play memory games  
61. Memorize a poem, a jingle or a bus schedule

Above are many activities that qualify anyone as being a lifelong learner. They can help with stress management and prevent depression, and lifelong learners enjoy the added benefit of being less likely to experience symptoms of abnormal memory loss related to aging or dementia.

What goes into being a lifelong learner? Does it take a lot of effort?

This question’s answer is obvious. However, it is simply meant to make the point that being a life long learner does not entail getting a PHD in your 80s.

Say something along the lines of, “Sometimes I find a few weeks will go by when I haven’t taken the time to engross myself in an intellectually stimulating activity. I’ve been too busy and spent my little free time passively watching TV or mindlessly reading. When I finally find the time to do something intellectually stimulating,
even if it is just for fifteen or thirty minutes, I'll forget about how busy I have been and often feel incredible satisfaction afterwards. Has anyone else had this experience?

Keeping your mind healthy can be as important as keeping your body healthy. Being a lifelong learner is the first step to ensuring a healthy mind, however, additional factors contribute too. Exercise and nutrition are fundamental. Having a balanced diet with 5-6 servings of fruits and vegetables every day can help to ensure that you will get the vitamins and nutrients necessary to have a healthy mind. Over-the-counter supplements may promise improved memory, but the evidence does not support a majority of the promises made about them. Omega 3 fatty acids found in fish oil may prevent or delay the onset of dementia. You can find them in over-the-counter fish oil supplements or most fish. Fish oil is also good for cholesterol and triglycerides and can decrease the risk of stroke. If you are considering starting fish oil, it is best to speak with your physician first.

What do you do for physical exercise?

How many servings of fruit and vegetables do you have in your diet?

Do you take fish oil?

Some participants may volunteer a laundry list of vitamins and other supplements. If a participant is preaching about different supplements, it can be worth mentioning that fish oil is really the only one that is supported by the medical community (Even the evidence in support of fish oil prevention or delaying dementia is scant).
Stress management, discussed in Aging Well workshops 2 and 3, also goes a long way to improve memory. The stress management techniques discussed in the previous workshops may improve memory and cognition even in those with dementia. Stress and anxiety can worsen any existing difficulties with memory. Stress and anxiety can also mimic more serious memory problems. For these reasons, and many others, it is important to manage stress.

One particular skill of stress management, mindfulness, can be particularly helpful for memory problems. By focusing on an activity, sensations, or the present moment, your mind can be clear. With a clear mind, it is easier to access working memory. Recall from the stress management workshops that cortisol, a stress hormone, can prevent the formations of memories and our ability to recall. Mindfulness can be an effective tool to decrease stress, and potentially minimize the damage of cortisol.

Have you ever had the experience of stress impacting memory?

A similar question was asked in week 3, but it can be worth returning to. The question is intended to highlight the role of stress management in brain health.

Have you ever had the experience of being able to access your memory better when you are in a relaxed state?

Take the time here to have the participants reflect on mindfulness and living in the present moment. Volunteer your own experience from the past week where you found yourself more present and how it impacted your memory (make something up if you did not have the experience). Some participants will be more open than other to reflecting on any formal practice with mindfulness. However, most will be willing to talk about a time when they were more relaxed or had a clear mind.
Good sleep improves memory by consolidating them. Poor sleep can make it difficult to concentrate during the day and can inhibit your ability to recall or learn new information. Quitting smoking is also a boost to the health of not only your body, but your mind too. Lastly, being social with friends, family, neighbors, and community members can help with memory. Being social helps to ward off stress and depression. It also can increase activity, which challenges your mind. Coming to Aging Well is an example of a social activity that is intellectually stimulating.

What social activities are you engaged in currently?

If you would like to, track your social activities over the next week and see if there is room in your schedule for more.
Optional Assignment #4

Create your own program to keep your brain healthy. Three areas discussed in this workshop that can help with mental fitness are intellectual stimulation, physical exercise, and social activities.

**What I do to keep my brain healthy**

1. To stimulate my mind I will do the following activities (choose new ones from the list or write down what you already do):
   
   **Name of Activity** | **Frequency (daily, weekly)**
   --- | ---
   a. | 
   b. | 
   c. | 
   d. | 
   e. | 
   f. | 
   g. | 
   h. | 
   i. | 
   j. | 

2. My physical activities are (pick a fifteen-minute walk every day etc.):

   **Name of activity** | **Frequency**
   --- | ---
   a. | 
   b. | 
   c. | 
   d. | 

3. My social activities are (consider enhancing your social activity by writing the names of two people you agree to visit with or call by the end of the week.):

   **Name of activity** | **Frequency**
   --- | ---
   a. Aging Well | Weekly
   b. | 
   c. |
Life Transitions

This workshop is intended to last two weeks. Pace the discussion accordingly.

As we get older, we face some significant changes. Our ability to cope with the changes can have a significant impact on our health. A transition can be thought of as a passage between two relatively stable periods of time. A significant marker or event often precipitates a transition. It is the return to stability that is key to having a successful transition. Stability does not mean a return to the way life was prior to the transition, but rather reaching a place where there is a flow to your life and balance in your life.

The transitions that older people face include, but are not limited to:

- Retirement
- Relocation to a new living situation
- Loss of a spouse or friends
- Chronic illness or frailty
- Disability or a change in function
- Hospital to home

What transitions have you experienced in your life?

The list above mentions the common transitions seniors face, but the participants will likely have many more.

Have you transitioned successfully or are you still in the transition process?

Hopefully, most of the participants will recognize that despite having successfully transitioned in one area of their life, that many of them are still likely in one or multiple ongoing transition processes. However, many may not initially embrace this idea. The discussion can help to elaborate on the importance of management of life transitions to maintaining well-being.
If you have transitioned successfully, what allowed you to do so? **(It is possible to have transitioned successfully for one thing, but still be in the transition process for another. For example you may have adjusted to life after retirement, but still be in the process of adjusting to a new living situation.)

In healthy transitions, an individual moves toward health whereas in an unhealthy transition an individual moves towards vulnerability and risk. In *Life Transitions in the Older Adult*, six transition processes are identified as markers of successful transitions. Healthy transitions involve modifying expectations, restructuring life routines, developing new knowledge and skills, maintaining continuity, redefining meaning, and finding opportunities for growth.

1. **Modifying expectations**
   During a healthy transition, initial expectations may have to be modified. Healthy transitions are marked by gradual modification of previous expectations. If you had knee surgery, you may initially expect to return to your previous function and walk without any limitations. A more realistic expectation may be that you will be able to walk certain distances without too much discomfort. Unhealthy transitions are marked by no or inappropriate modification of expectations. In the previous example an inappropriate expectation may be for the individual to expect to run one year after a knee replacement surgery.

Think back to some of the transitions you have had in your lifetime. Was there ever a time that you had to modify your expectations?

Ask about specific life transitions if there is not much of a response. (This strategy can work for many of the questions in this workshop). If you ask about specific life-transitions (coming home from the hospital), you may find that the participants respond with more specific examples, which can generate discussion.
2. Restructuring life routines
Routines can provide flow and help to establish balance in one's life. During a transition routine is often disrupted. Reestablishing a routine after a transition can add order, predictability, manageability and pleasure to one's life. Sometimes previous routines need to be restructured in order for a routine to be successful. Routines can be comprised of self-care (taking medications, getting ready for the day, preparing meals etc.), exercise and social activities. In preparation for a future life transition, it can be important to consider how you will have to restructure your routine to make the transition as healthy as possible.

What self-care activities are parts of your daily or weekly routine?

What activities (including exercise) are parts of your daily or weekly routine?

What social activities are parts of your routine (this can include phone calls to friends and family)?

These three questions are best for the participants to do on their own. However, spend time discussing how maintaining routines can ensure successful transitions.
Has there been a time when you fell out of your normal routine after a life change? How did this impact you?

Asking specifically about transitions related to health can help to foster discussion relating to the importance of maintaining routine.

3. Developing new knowledge and skills
A healthy life transition often involves the development of new knowledge and skills. Depending on the new knowledge and skills, this may take considerable effort. However, if viewed as a challenge with a positive outcome, it can be a rewarding experience. Thinking back to the individual who underwent knee replacement surgery, a part of rehabilitation would likely be working with a physical therapist. The more work the individual puts into therapy and time spent practicing new exercises, the healthier the transition to life after the knee replacement will be. It may also be necessary to learn how to walk with a cane or walker for a period of time. If the individual does not adopt these skills, then he or she may not have a healthy transition.

Thinking back to a life transition that you underwent, what new knowledge and skills did you have to acquire? (This can be learning a new neighborhood after a move or learning how to manage a chronic illness? If you have recently undergone a new transition, what knowledge and skills are you in the process of developing?

This is an opportunity to reflect on mindfulness (if the participants respond positively to this topic). Mention how the skill of mindfulness can be important for enjoying life during and after a more difficult and stressful transition. Living in the present moment, though sometimes difficult during and after life transitions, can make life easier.
4. Maintaining Continuity
Life transitions can be characterized by disruption and significant change. However, maintaining continuity in certain areas of your life can be extremely helpful to ensure a healthy transition. This can be remembering to call friends and family regularly during a move or during a recovery from an illness, or taking the time to do an activity you enjoy even when you are very busy due to the life transition. For the individual who had a knee transplant, if he or she regularly met with friends for coffee it could be helpful if he or she telephoned the friends regularly or invited them to his or her place. When the individual has rehabbed appropriately, it could be important for the individual to have coffee with his or her friends.

How have you maintained continuity after your most recent life transition?

This is similar to the idea of maintaining a routine, but with regards to pleasurable activities. It can be a great time to reflect on community activities that people enjoy. Being social after life transitions is especially important.

Is there something that you would like to get back to doing? Something that you did before your most recent move or change in health status?

This is another time to refer to the activity list. Consider having participants pledging to try something in the next week that they used to enjoy, but have not done in a long while. *You will know by this point, whether or not the participants will be receptive to this. Each group is different. Even if only some of the participants would enjoy something like this, it can be worth mentioning.
5. **Finding new meaning and (6)finding opportunities for growth**

These two processes can be some of the more difficult and complicated associated with healthy transitions. However, they are two of the more important processes. Some life transitions, such as loss of a spouse, can be marked by loss of significant meaning in an individual’s life. After the transition, an individual may have to find new meaning. A recent widow may spend more times with family and friends or become more involved with the community to find new meaning. This is not to replace the meaning of the spouse, but rather to allow the individual to grow after the loss. Part of this growth may be previously untapped independence and stronger relationships with friends and family.

Thinking back to a life transition you underwent, how did you grow during and after the transition?

Was there ever a time that you had to find new meaning after a life transition? What helped you to find new meaning?

**A discussion about losing loved-ones, especially a spouse or close family will likely result from this question. If this does occur, the participants will likely be the best resources on strategies of how to manage grief for one another.**

**Resources**

Mobilizing personal, family, and community resources can help you during and after a transition.

**Personal resources**

You are your own best resource during and after a transition. It is important to remember to take care of your self during and after a transition. Remember to eat well, sleep plenty, exercise and engage in other self-care activities. Also, taking the time to enjoy pleasurable activities can help with the stress of transition. Lastly, transitions can lead to changes in health and it is important to try to avoid missing any
appointments. Taking time to take care of yourself can help to assure that your personal resources are maximized.

**Family resources**
Reaching out to family can help during a transition. It can be a good idea to discuss with your family what you expect your life after the transition to look like.

**Community resources**
The Area Agency on Aging is a resource that can offer assistance during a variety of life transitions. You can contact the local agency directly or you can speak with the SASH coordinator who can direct you to the agency. The SASH coordinator can also be a resource to help with a life transition.

What resources would you use to help you during a transition? What resources have you used to help you during past transitions?

This is a great time to talk about the benefit of SASH being able to guide participants to appropriate services. Mention your community partners to the participants. Participants may volunteer a personal anecdote of help from SASH. You may also get a lot of questions about what can SASH do for me? It is important to remind participants of the role of SASH, especially in the time of life transitions. It is also important to remind SASH participants that even though SASH can be immensely helpful around life transitions, that decisions regarding care and services are still made by the participant and his or her family. There are more details about this in the outline.
Are you familiar with the community resources?

The Importance of Accepting Care

Sometimes accepting care is part of a life transition. This is easier for some people, and more difficult for others. According to a survey by Home Instead Senior Care, only 25% of seniors ask for help when they need it. A family member may approach you to offer help when you are in need and there are some things to keep in mind when choosing to accept care.

1. If you are able, you should be involved in any care decisions. Let your family and loved ones know of any of your concerns about receiving care.

2. Many services help to preserve independence, not hinder it.

3. Consider a trial run. If you are uncertain about receiving certain type of help, try it out for a period of time. You can always change your mind.

4. Consider involving outside resources when making the decisions. Sometimes it can be difficult to know the best way to receive additional help. Consider contacting your local Area Agency on Aging or your SASH coordinator if you have any questions about services available. There are people who can help you navigate the system. You and your family do not need to navigate it alone.

5. It can be useful to talk about your feelings about receiving care with your family when you are well. Anticipate that you may have to accept care in the future and a discussion when you are well can be helpful if you are in a time of need in the future.

When you go through the list, you may want to stop after each number to allow discussion to take place.
Have you had to accept care from others during your lifetime? What made this easier? What made this more difficult?

More discussion questions
What transitions do you expect to face in the coming years?

Anticipate a discussion regarding nursing home care, if you choose to ask this question. Refer back to workshop #2.

How prepared are you for future transitions?

Is there anything you could do in advance to prepare for future transitions?

These last two questions are lead-ins to the optional assignment.
Optional Assignment

A Healthy Life Transition Plan

Imagine that you had to go to the hospital for one week. For the first month after your return, you have limited mobility and it is difficult to leave the apartment. Focus on three areas highlighted above in developing a life transition plan. The three areas are restructuring life routines, maintaining continuity and resources.

Restructuring Life Routines
Highlighting your self-care activities, pleasurable activities and social activities, write down what your current routine is. How would your routine change if you had limited mobility and could not leave the apartment?

Maintaining Continuity
What areas of your life could continue if you had more limited mobility? It may be helpful to look at the list of activities used in the previous weeks and think about those that you could do if you had difficulty leaving your apartment. Write down at least three activities that you do now, that you could continue to do.
Mobilizing Resources
You are always your biggest resource in a life transition. However, it can be helpful sometimes to turn to others for support. Thinking about family, friends, and local organizations (including SASH and the local Area Agency on Aging), what resources would you use to help you if you had limited mobility for a period of 1 month?
Aging Well Workshop #5 and #6
Stress Management #3-Life Transitions
With Age Comes Wisdom and Other Benefits of Aging

“Youth is the gift of nature, but age is a work of art.”
- Stanislaw Lec

This workshop is intended to last for two week; all of the 7th week and part of the final week. (You should plan to spend about half of the last week celebrating and reflecting).

In workshops 2-6, the focus was on some of the drawbacks of aging and how to cope with them. In this workshop, the focus will be on the benefits of aging. Some people may scratch their head and think the benefits of aging is an oxymoron, but like a fine wine or aged cheese, people too get better with age.

Fine wines, whiskeys, and certain cheeses are known to get better with age. The aging process diminishes the undesirable or less flattering characteristics and improves the desirable characteristics. One’s character undergoes a similar refinement with age. Many older people are viewed to have depth of character stemming from life experience.

Trees also improve with age. In Healthy Aging by Andrew Weil, he writes, “Very old trees have a presence about them, a gravity, that draws you in, makes you quiet and fills you with awe and respect.” He also draws the parallel between older trees and older people. Older trees have survived storms, many long winters, droughts, and floods. We do not view the scars on older trees as markers of ugliness, but rather we revere them for being survivors. Similarly older people are survivors, having lived through societal changes, illness, and personal loss. These experiences contribute to the development of one’s character. Like older trees, older people should be revered and respected.

Weil argues that aging does the following:

• Richens life
• Allows one to move past the immaturity and shallowness of youth to the maturity and depth of old age
• Improves desirable personality traits and decreases undesirable ones
• Smooth out roughness of character
• Leads to a richer and greater emotional experience

In this workshop we will look at how age contributes to wisdom, the emotional experience (especially happiness), emotional regulation, and improved ability to be present. We will also discuss older people's role as links to the past.

Take time to reflect on the different points that Weil makes (bullets above). Allow participants to reflect on the statements with which they agree and disagree.

Perhaps, the most often noted benefit of aging is wisdom. Elder people are often regarded to be wise by society. What exactly is wisdom? In the literature, wisdom is often associated with the ability to learn from past experience, emotional resiliency, having a clear and open view of human nature, being open to other possibilities, forgiveness, and humility. The Berlin Project (Established in 1984 in Germany, it is a group of psychologists that study the many aspects of wisdom) found that wisdom can be seen in exercising good judgment, offering sound advice, having insight, emotional regulation, and having empathy for other people. An element of wisdom often cited is the ability to process and approach a new challenge in light of previous life experience. And the only way to get life experience is to age.

“Aging it seems is the only available way to live a long life.”
-Kitty O'Neill Collins

What does wisdom mean to you? Have you become wiser with age?

It can be helpful here to reflect on your own experience encountering wisdom in working with older people. Perhaps recall an anecdote about one of the participants or call to attention a particularly wise comment someone makes or has made in the past.
Some may remark that not everyone becomes wise with age. This is undoubtedly true. However, an apt response is that even those who do not become wise with age are still likely wiser than when they were younger.

Has your previous life experience helped you handle some of the challenges of aging?

The answer to this question is somewhat obvious. Ask participants to elaborate on examples. How specifically have they learned from past experience?

What insight do you have now that you did not have when you were younger?

This is very similar to the previous question and can be skipped if the specific examples gave examples of insight.

Are you more empathetic (understanding of another's feelings) now than when you were younger?

This question can require more thought than the previous questions. It can be harder to appreciate changes in empathy. However, studies have demonstrated greater empathy in older individuals. For those who recognize themselves as having greater empathy, inquire how this plays out in their relationships with their children and peers.

The relationship between wisdom and age is often cited in philosophical discussions of wisdom. However, does it hold true in
psychological studies? Recent studies indicate that there is truth behind the old adage, with age comes wisdom. A study that looked at peoples’ ability to make decisions at different ages found that older people were better at making decisions that took into account future scenarios. Younger people were more likely to make decisions with immediate benefits. Older people were better at analyzing a decision and considering how it would affect future choices. Another study that looked at the brain scans of 3,000 older individuals demonstrated that the cognitive slowing of older people may not be entirely negative. It found that because older people's brains have slowed down, they are less impulsive and are less likely to respond thoughtlessly to emotions than their younger counterparts.

“Age does not diminish the extreme disappointment of having a scoop of ice cream fall from the cone.”
-Jim Fiebig

Do you find that you are more measured in your decision making than when you were younger?

Are your decisions less impacted by strong short-lived emotions than when you were younger?

These two questions have to do with the ability to not have a transient emotional experience negatively affect decision-making. Some participants may reference how emotions influence their adult-children’s decision-making more so than their own. If this is not volunteered, ask this explicitly. Some ease of temperament with age may mitigate some of the influence of negative emotional states on decision-making.

If you took a group of 30-year-olds and group of 70-year-olds, which group do you think on average would be happier? Most people,
regardless of one’s age, would pick the 30 year olds. However, recent studies show that most people would be wrong. There is often the misconception that happiness peaks in our youth, declines through adulthood and into old age. In reality, on average people’s happiness does decline from youth to middle age, but it then trends upward after about the age of 50 such that on average 80 year olds are happier than 18 year olds!

The graph above and the one below are scaled so that you can see the changes in emotions across the lifespan. The low and high points are not emotional extremes. The low is not incredibly unhappy, nor is the high representative of incredible happiness. On average people are somewhat, 10-20% happier in their 80s than in their 40s and 50s. Your own experience may differ.

The article with this graph is included in your “Aging Well For the Group Moderator” manual. You should read it if you have time before this workshop.

Some people would be quick to point out that it is possible that national events and trends impact the overall happiness of certain generations. Yet, when countries without similar social and political histories are compared, such as Zimbabwe and the United States, the
same trend holds true. The trend also holds true, when wealth, employment status and children are controlled for. This indicates that it is something about the aging process that leads to happiness.

“To keep the heart unwrinkled, to be hopeful, kindly, cheerful, reverent that is to triumph over old age.”
-Amos Bronson Alcott

Are you surprised by these results? In your own life are you happier now than when you were younger?

You will likely get a range of responses. Some people will adamantly disagree with this. Hopefully, many if no the majority will agree with this. It is important to remind people that this is not meant to mean that everyone will have this experience. However, when the whole population is examined, happiness increases with age. This is counterintuitive for many, given the frailty and declining health that accompany age. It may be in part because older people are more naturally mindful. Due to wisdom, circumstance, and neurocognitive changes, older people may have an easier time living in the moment (this is stated in a subsequent section. However, if participants are having a hard time with the idea that happiness can increase with age than ask if participants have an easier time living in the moment now than when they were younger? If participants agree to this, then it is worth pointing out that living in the moment is key to happiness.

Thinking about your group of peers now compared to your group of peers when you were younger, would you say that overall your group of peers is happier than when you were younger?

This will also lead to a range of responses. However, ask participants if their peers in general spend less time moving from
one activity to the next like younger generations? With a full busy schedule, it is harder to take the time to enjoy the small things in life. Ask participants if their peers appreciate the small things in life more than when they were younger? Though you will likely not have everyone boasting that they are happier now than when they were younger, thoughtful discussion can allow many to appreciate some of the benefits of aging.

Other emotions have similar trends. In a paper out of Stony Brook University, published in 2010, well-being was broken down into positive and negative emotions and these emotions were studied across the lifespan. Like the study mentioned previously, enjoyment and happiness were shown to decrease until middle age and increase afterwards. Worry rises until the middle age and then decreases sharply. Anger declines throughout the lifespan. Stress peaks in the early 20s and then declines rapidly. Sadness increases until the middle age and then decreases steadily afterwards.
If you are using a white board it can be helpful to draw the graph and add the above emotions to the graph. See the outline for a full explanation.

What changes in your emotion have you experienced over your lifespan? Are you aware of any changes?

**For those who do not appreciate a decrease in stress, it is well worth encouraging these participants to continue with stress management strategies. Though, stress may seem inevitable for some, remind participants that stress can be effectively managed and decreases with age for many.**
There are a number of possibilities as to why this is the case, but for anyone who is aging (that would be everyone), this is good news. In a study that asked people to rate a variety of emotions throughout the day, older people were found to have better regulation of their emotions and better insight into the emotions that they experience at a given moment. Older people accept misfortune better than younger people. Older people are better at brushing off the negative thoughts of other people than younger people. In a study, in which people listened to recordings of negative personal remarks, older people were less likely to be angry or upset. They had an easier time accepting that you cannot please everyone.

Do you find yourself less concerned about what other people think of you now than when you were younger?

**Hopefully, with this question, there will be widespread agreement amongst the participants.** Likely, a few will not have had this experience. Many, though, will reflect on how much less concerned they are now about what other people think. This experience can be very liberating. If the participants agree with this, but not with the idea that stress and happiness can positively change with age, tactfully point out that an ability to let go of negative thoughts would likely lead to increased happiness and decreased stress.

“How pleasant is the day, when we give up striving to be young—or slender.”
-William James

Younger people are more apt to view aging negatively whereas older people (by virtue of circumstance) are more apt to accept age. Acceptance of aging itself may be a source of relief for some. One thought into why older people are happier than younger people stems from this idea of acceptance. Older people accept aging and their life
circumstances as a result it is more easier for them to be present, to live in the moment. Wisdom and the ability to put life events in perspective may also contribute to an older person’s ability to live in the moment. It may be that older people have an easier time with mindfulness.

Do you think about the aging process less negatively now than when you were younger?

This is a chance to return to again reflect on societal views on aging, something you may have discussed in the first week. It can be helpful to point out how your own experience working with seniors has changed your view on aging.

How has your acceptance of aging changed over time?

Many will probably admit that they still struggle to accept the aging process. The goal of Aging Well is not to radically change everyone’s view on aging, but to give participants a chance to honestly reflect on their own experience. Moreover, participants have a chance to learn from each other how to cope with the difficulties of aging and hopefully to appreciate some of its benefits. (include in manual)

Do you find it easier now to live in the moment (to be present)?

Refer back to the question on happiness on aging that you likely discussed the week before.

Have you found the mindfulness exercises helpful in improving your ability to live in the moment?

If the concept of mindfulness has been embraced by many or some of the participants, spend some time reflecting on the experience of mindfulness.
Antiques are valuable both because they are rare and they are a connection to the past. Likewise, older people are also valuable in part because they are a connection to the past. Each has lived through and been witness to significant change in society, technology and the world. Older people’s collective stories are our link to the past. Many have played a role in the shaping of local, state, national and world history. All have a story to tell and much to teach the younger generations. Many in the younger generation recall fondly hearing firsthand the stories of their grandparents. Stories from the past can help shape decisions for the future. The older generation has many lessons to teach the younger generation.

What lessons do you have lessons to teach the younger generation?

Some participants may state that the younger generations have to learn life lessons through their own experience in order for them to have meaning. If no one volunteers something similar, consider offering this thought to the participants.

Do you ever take the time to tell your story to your family or friends?

If there is positive response to this idea, a potential follow-up to Aging Well is to have “Story-tellers” in which participants meet weekly or bi-weekly and take turn sharing stories of their past.
Optional Assignment

Everyone has a story to share and advice to impart to the younger generation. Over the next week consider sharing your story with someone younger than you such as a family member or write down some of your story. What advice do you wish you had been given in your youth? Do you have any advice to pass on to the younger generation? Consider writing down this advice as an exercise or sharing it with a younger person.
Strategies and Support for Aging Well

Over the past 8 weeks we have discussed various topics related to aging and what goes into aging well. The bulk of the content came from you, the participant, and this speaks to how you have the tools in place to age well. The topics discussed were not easy and there were many insightful and meaningful contributions. Below is recap of the various topics we discussed.

**Aging Well Workshop #1-Introduction** - In this workshop, Aging Well was introduced and as a group we discussed broadly what goes into aging well and some of the difficulties of aging. Also, the list of activities was introduced and we discussed the role of pleasurable activities in Aging Well.

**Aging Well Workshops #2 and 3-Stress Management** - In these workshops, we discussed the origins of stress as it relates to aging and life in general. We also discussed stress management strategies, such as challenging thoughts and using pleasurable activities to help with stress management. Mindfulness was also introduced.

**Aging Well Workshops #4-The Aging Mind** - In this workshop, we discussed the importance of being a life long learner and engaging in intellectually stimulating activities for brain health. Also, we discussed how remaining socially connected and physically active are important for brain health.

**Aging Well Workshops #5&6-Life Transitions** - In these workshops, we discussed various life transitions and how to best cope with the changes. Also, we discussed the importance and difficulty of accepting care at certain times.

**Aging Well Workshops #7&8-The Benefits of Aging** - In these workshops, we discussed the many benefits of aging. We spent some time discussing the meaning of wisdom and how wisdom increases with age. We also spent some time discussing the improved emotional experience and refinement of personal character that many experience with age.
Suggestions on how to use the materials from Aging Well

1) **Return to the readings** periodically, especially ones that you enjoyed or resonated with you.

2) Consider **returning to the optional assignments** and completing them. Most of the assignments can be repeated many times.

3) **Use the activity lists.** There are two activity lists included, one is a longer list of pleasurable activities and the other is a shorter list of intellectually stimulating activities. There are many ideas included in these lists of simple activities that can improve quality of life, help with stress management, and engage the mind. Periodically choose an activity to try out, just once or if you enjoy it, make it a part of your routine. Looking at the list of activities can also serve as a reminder of all you already do that helps you to age well.

4) **Meet regularly.** If you enjoyed these meetings, set up a meeting with other Aging Well participants or new people who would enjoy the meetings. Return to the topics discussed and share successes and struggles.

5) **Discuss** aging well topics and your success and struggles with family, friends, and peers.

6) **If you are going through a life transition or stressful time, it can be helpful to review the material.** (reviewing it with a friend, family member, or peer can be particularly helpful at these times)

7) **Using the SASH coordinator.** The SASH coordinator can be an excellent resource. The SASH coordinator can help you set up a meeting with other participants. Also, if you are struggling with a certain area of aging well, share this with the SASH coordinator and the SASH coordinator can help you directly or find someone who can. **During life transitions** (change in health, personal loss, after a hospital visit, or change in personal finances), **it can be particularly helpful to meet with a SASH coordinator.**
Bibliography


