

Aging Matters

REGION I

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Announcing the 2017 Profile of Older Americans

Profile of Older Americans: 2017, an annual summary of the latest statistics on the older population compiled primarily from U.S. Census data, is now available as a <u>web-based publication</u> in a user friendly format along with <u>data tables and</u> charts in Microsoft Excel spreadsheets.

The *Profile* has proven to be a very useful statistical summary and serves as a resource for all professionals with an interest in the changing demographics of the population age 65 and over, including 15 topical areas (such as population, income and poverty, living arrangements, education, health, and caregiving).

Here are some highlights from the 2017 Profile of Older Americans:

- Over the past 10 years, the population age 65 and over increased from 37.2 million in 2006 to 49.2 million in 2016 (a 33% increase) and is projected to almost double to 98 million in 2060.
- The age 85 and over population is projected to more than double from 6.4 million in 2016 to 14.6 million in 2040 (a 129% increase).
- Racial and ethnic minority populations have increased from 6.9 million in 2006 (19% of the older adult population) to 11.1 million in 2016 (23% of older adults) and are projected to increase to 21.1 million in 2030 (28% of older adults).

July 2018 Michele Pultz, Editor

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Senior Center Month Materials Now Available

Innovative programs hosted at senior centers can change the perception of aging, and create important community resources for aging expertise. This September, the National Institute of Senior Centers (NISC) encourages you to show your community is building momentum towards the future of aging. We are celebrating this by highlighting the theme Senior Centers: Building Momentum. Promotional and support materials are now available for you to review, download, and use to make a splash when September arrives.



2018 Senior Center Month materials are now available! Materials iclude:

2018 Program and Publicity Guides: Download and explore our tips on how to create and promote a memorable Senior Center Month experience.

Posters: Make the national theme your own by customizing the 2018 Senior Center Month poster (pictured above), or download our version to hang in your center.

These materials are now available to download on NISC Crossroads as a NISC member benefit.

Our national celebration of senior centers began in 1979, with Senior Center Week celebrated in May. The concept gained support of other aging organizations, as well as the full Senate and the House Select Committee on Aging.

Not a NISC member?

Join NISC to receive all of the Senior Center Month materials as part of your membership.

Join the nation, celebrate, and have fun with National Senior Center Month!

If you have any questions or concerns, please contact membership@ncoa.org.

House and Senate Largely Level-Fund Aging Programs



July 10, 2018—The House and Senate Appropriations Committees are nearly finished considering their respective FY 2019 federal funding bills, including the measures that fund Older Americans Act and other key aging programs. Following the usual pattern, lawmakers in both chambers considered the \$167+ billion Departments of Labor, Advocacy. Action. Answers on Aging. Health and Human Services, Education and Related Agencies (Labor-HHS) measure last among the 12 discretionary appropriations bills moving through committees.

On the heels of the significant increases for many OAA and other key aging programs that were secured in FY 2018, House and Senate Labor-HHS appropriators—working from mostly level overall funding—protected and maintained those increases and kept most programs' funding the same in FY 2019. Both House and Senate committees also rejected the stringent cuts included in the Administration's FY 2019 budget.

House lawmakers were first out of the gate with their Labor-HHS bill, which was considered by the subcommittee with jurisdiction over these programs in mid-June. The full House Appropriations Committee is expected to consider the bill later this week. In the Senate, both the Appropriations Labor-HHS Subcommittee

'You can't sit at our table!' What to do when the bully is a senior citizen

ELENA ROSEPittsburgh Post-Gazette
JUN 26, 2018

Fistfights over love interests, exclusion from lunch tables, name-calling and keyed cars — senior citizens are capable of more than one might think.

Kim Hicks, manager of the Mars Senior Center, said the way some seniors treat one another makes her feel like she's watching a high school drama unfold. Some are more private about it, whispering behind each other's backs, but one senior in particular picks on any person for any reason — Ms. Hicks and other staff included. She said the senior's actions have upset some to tears.

When she started managing senior centers last year, Ms. Hicks never expected to deal with bullying between seniors on a daily basis.

"When I first saw [seniors bullying each other] I was amazed," Ms. Hicks said. "I just thought people at that age should know better, but sometimes they're worse than high school kids."

A 2013 study conducted through Arizona State University's School of Social Work found 10 percent to 20 percent of individuals in senior centers and living facilities experience bullying.

According to Pamela Countouris, a Mt. Lebanon-based bullying prevention trainer and specialist, senior bullying is a commonly overlooked problem — especially in Pittsburgh, which has a large senior population. For the past five years, she has worked to break the silence and find solutions, officially naming her bullying prevention training company Take Care of Bullying in 2014.

Averaging about 20 training sessions per year, Mrs. Countouris has used Take Care of Bullying — commonly referred to as TCB — to coach seniors and staff at senior facilities how to de-escalate bullying behavior.

Mrs. Countouris, who also serves as a bullying prevention specialist and trainer for schools and the workplace, was first exposed to senior bullying in 2012, when she offered a workplace bullying prevention class to employees at a senior residential facility. The center instead suggested their seniors might benefit more from the seminar.

After being exposed to this phenomenon, Mrs. Countouris made the decision to regularly instruct prevention strategies in senior centers.

"[Demand for TCB counseling] has grown because people are more aware of senior bullying," she said. "People think senior citizens being curmudgeons is a right of passage, but it's not. This behavior is psychological violence, plain and simple."

Name-calling at bingo to rumor-spreading, ripping decorations off each other's doors and more, Mrs. Countouris has seen myriad instances of senior bullying since she started TCB.

To Krista Geer, executive director of Crawford County's Active Aging centers, it's not surprising some seniors display bullying behavior. When seniors bully, they often gain a sense of power and control they might feel they're losing with age, she said.

"For many seniors, their worlds are shrinking. Their families are moving away, their friends, relatives and spouses are passing away," Ms. Geer said. "Every single day, to some degree, [they] feel like [they]'re losing something."

Mrs. Countouris acknowledged that some seniors who bully have acted this way for many years, but she also emphasized many seniors who bully aren't aware they're engaging in bullying behaviors until she brings it to their attention. She said she tries to help them socially engage without pushing their frustrations on others.

Her classes incorporate lessons on how to identify and address bullying early and in a "prosocial manner." For example, if a senior is excluded from a lunch table, someone at a different lunch table should invite the excluded person to sit at his or her table without engaging the bully.

Throughout her classes, she also makes an effort to listen and talk through personal concerns among seniors and in return provide them with strategies specific to their situations.

Mrs. Countouris noted there are some seniors who are not willing to change their bullying habits, as well as seniors who are not capable of remembering she trained them in bullying prevention. Regardless of how well-received her training may be, she finds it equally important to make a supportive, antibullying presence known even if some bullies don't plan on stopping.

"[Senior bullies] don't usually have a 'come to Jesus' moment," Mrs. Countouris said. "What people need to realize is that you may never change the personality of a person [exhibiting] bullying behavior, so what you're doing is changing the culture."

Mrs. Countouris conducted a training session at the Mars Senior Center this spring, and Ms. Hicks said she saw positive results in the center's residents and guests almost right away.

After the training, some seniors even felt confident enough to stand up to the one senior who bullies everyone.

"Since ... May 11, I've had maybe one instance [of bullying] I've actually had to intervene in, which is a big decrease," Ms. Hicks said. "I used to [need to intervene] at least four or five times a month."

In previous years, according to Mrs. Countouris, multiple Pittsburgh senior centers expressed hesitation about receiving TCB training in the fear that seniors would leave if they believed bullying was prevalent in their center. Within the past two years, though, they've become more open to this training.

While she acknowledged it's easier to "give seniors a pass" to display bullying behavior, she challenges caregivers, loved ones and other residents to hold seniors accountable for how they treat others.

"If a 100-year-old wants to do the right thing, do any of us have the right not to?"

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and full Committee approved the bipartisan proposal in late June, which is now slated for full Senate consideration in the coming weeks. Both chambers are, as of right now, on track to pass their respective appropriations bills this summer, a feat not seen in years. However, Congress will need to work out differences between the two sets of 12 bills before the October 1 start of the fiscal year—or pass a short-term continuing resolution (CR) until it does so. Given that tight timing and the distraction of the mid-term

elections, we predict at least one CR come October.

The following analysis and accompanying <u>appropriations chart</u> of the House and Senate Labor-HHS bills focus on key programs that serve older Americans and their caregivers.

Level Funding for Most Core OAA Programs

Administration for Community Living (ACL), HHS

Programs serving older Americans under OAA were primarily level-funded at FY 2018 amounts in both the House and Senate bills. Overall, House appropriators allocated \$2.18 billion to aging and disability programs within ACL, which is \$37 million more than last year and a significant \$363 million more than the President's budget request. At \$2.177 billion, Senate ACL allocations are slightly lower than the House. However, other than another boost for OAA Title VI Native American aging programs, most of the House increases are due to shifting funding sources from mandatory to discretionary, resulting in no actual funding increase, or they are allotted to disability programs. Both House and Senate bills reject the Administration's proposals to eliminate the State Health Insurance Assistance Program (SHIP) and OAA Title V senior workforce programs.

Older Americans Act Title III Programs

In what can be considered a win for advocates in this incredibly difficult political environment, the following programs received level funding: OAA Title III B Home and Community-Based Supportive Services (\$385 million), III C Nutrition Services (\$490 million for C1 Congregate Meals and \$246 million for Home-Delivered Meals), and III E National Family Caregiver Support Program (\$180 million). The Senate lawmakers boosted Title III E by \$300,000 to provide funding to ACL to implement the Recognize, Assist, Include, Support, and Engage (RAISE) Family Caregivers Act, which was signed into law earlier this year.

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Announcing the 2017 Profile of Older Americans



• About one in every seven, or 15.2%, of the population is an older American.

AMERICANS ACT

- Persons reaching age 65 have an average life expectancy of an additional 19.4 years (20.6 years for females and 18 years for males).
- Older women outnumber older men at 27.5 million older women to 21.8 million older men.
- About 28% (13.8 million) of noninstitutionalized older persons lived alone (9.3 million women, 4.5 million men).
- Almost half of older women (45%) age 75 and over lived alone.

The need for caregiving increases with age. In January-June 2017, the percentage of older adults age 85 and over needing help with personal care (22%) was more than twice the percentage for adults ages 75–84 (9%) and more than six times the percentage for adults ages 65–74 (3%).

Please share the *2017 Profile* with other interested parties. <u>Previous years' publication and data are also available</u> on the website.

BELOMAR REGIONAL COUNCIL

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