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Finding A Forever Home For Aging in Place

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A “forever home” is a concept that describes a home where your family will live and grow for the rest of your life. For 81% of people who are moving, finding their perfect forever home is the most important factor.

But if you’re approaching your senior years, your housing needs are subject to change — and if your home isn’t accessible or comfortable, you might find yourself moving right back out of that “forever home” only a couple of short years after you moved in.

Building or buying a new home? Here are a few ways to anticipate your future needs and ensure your forever home will be just that.

What Makes A Forever Home?

There are multiple factors that differen-

tiate a forever home from a starter home. When you bought your first home, you likely had to compromise on some of your wants or needs. A forever home has it all — a large backyard, beautiful kitchen, and enough space for the grandkids to visit.

One of the most important elements, however, is that a forever home can adapt with you. Your family’s needs will change pretty widely over the years. And a forever home should be flexible and customizable enough that it can keep up — meeting those needs as you continue to live in comfort.

What Does It Mean to Age in Place?

If you’re hoping to age in place, a good forever home becomes even more important. According to the National Institute

on Aging, aging in place simply means staying in your own home as you get older (rather than moving to an assisted living facility or nursing home). 88% of adults ages 50-80 say it's important to them to stay in their homes for as long as possible.

People may want to age in place because it's much more comfortable and familiar. You can retain feelings of independence and continue engaging in your usual social activities. Aging in place is usually more cost-effective, too.

If you want to be successful with aging in place, planning ahead is a crucial component. And that's where your home comes into play.

5 Tips to Build The Perfect Forever Home For Aging in Place

Only one in three adults (34% of those age 50-80) say their home has the features they'd need to age in place. Here are a few tips to follow as you plan your forever home with safe aging in mind.

#1. Choose The Right Location

The first thing you'll need to do before building your forever home is to choose a location. Keep in mind that some locations make aging in place more feasible than others. For example, you might want to:

- Be close to a major hospital or other good healthcare systems
- Feel safe and secure in your neighborhood
- Have easy access to public transportation
- Be nearby family, friends, or other community members who can help you as needed

It's easier to age in place when you're in close proximity to any help or assistance you might need.

#2. Consider Accessibility

A forever home needs to be accessible for a variety of needs. In a poll that asked participants about aging in place, a third of participants said they would need to modify their current residence (in many cases, both inside and outside) so they could continue living there if they had physical limitations.

- Can a wheelchair or walker fit through the doorways? Is there space

in the bathroom to add a grab bar? Is your bedroom upstairs or downstairs? Will you need a ramp going up to the front door rather than steps? These are important considerations to keep in mind as you build — there's nothing worse than being unable to safely navigate your own home.

Accessibility considerations are especially important if you already live with a chronic illness or health condition. Someone with rheumatoid arthritis, for example, is more likely to have mobility issues as they age.

#3. Integrate Technology

The wide range of technology that's available to use today can serve as a helpful tool allowing you to safely age in place. Smart technology lets you control a device from your smartphone.

Research has shown that older adults use smart home technologies such as:

- Voice-controlled assistive devices (like Echo or iHome)
- Smart thermostats
- Doorbell cameras
- Door locks
- Smart stove alarms
- Appliances
- Smoke/carbon monoxide detectors
- Smart medication pillboxes
- Emergency response systems
- Home security systems

Smart technology helps keep you safe — especially helpful if you are aging in place while living alone.

#4. Create Social Spaces

Aging in place isn't just about physical health. It's a huge way to improve your mental and emotional health, too.

Older adults who are lonely or socially isolated have a 50% increased risk of dementia and other serious health conditions.

As you think about your future home where you'd like to age in place, consider adding a patio, a guest bedroom, extra room outside for parking, or something else that will help create a space that's not only inviting to you, but also makes it easy to welcome guests. Social connections help our mental health. And when you live in a beautiful space that you feel proud of, it will be easier to invite people

over to share life with you.

#5. Consult Experts

If getting your home design right feels too overwhelming, you don't have to do it on your own. Look for an architect, contractor, or other consultant who is well-versed on the best kind of homes for older adults. They can help you figure out the best forever home for you.

There are also financial assistance programs available if you're trying to modify an existing home to meet your needs. Medicare, Medicaid, and private health

insurance plans cover certain modifications. Your state Housing Finance Agency can offer guidance on your situation.

Ready to Age in Place?

Aging in place is a great way to retain your independence, freedom, and the habits you're used to. But your safety and health is the most important consideration. Set yourself up for success by building a forever home that will meet your needs both now, and far into the future.



Vaccinations and Older Adults

As you get older, a health care provider may recommend vaccinations, also known as shots or immunizations, to help prevent certain illnesses.

Talk with a doctor or pharmacist about which of the following vaccines you need. Make sure to protect yourself as much as possible by keeping your vaccinations up to date.

COVID-19 vaccines

COVID-19 is a respiratory disease that causes symptoms such as fever, cough, and shortness of breath. Older adults are more likely than younger people to get very sick from COVID-19. The disease can lead to serious illness and death.

Studies show that COVID-19 vaccines reduce the risk of getting this disease.

The vaccine will also help keep you from getting seriously ill or having to go to the hospital if you do get COVID-19. We are still learning how effective COVID-19 vaccines are against new variants of the virus.

The Centers for Disease Control and Prevention (CDC) recommends that older adults stay up to date with COVID-19 vaccines, including booster shots.

The COVID-19 vaccine is available at no cost in the United States. Contact your local health department or visit [Vaccines.gov](https://www.vaccines.gov) to find out where you can get vaccinated.

Flu vaccine for older adults

Flu — short for influenza — is a virus that can cause fever, chills, sore throat,

stuffy nose, headache, and muscle aches. Flu is very serious when it gets in your lungs. Older adults are at a higher risk for developing serious complications from the flu, such as pneumonia.

The flu is easy to pass from person to person. The virus also changes over time, which means you can get it again. To ensure flu vaccines remain effective, the vaccine is updated every year.

Everyone age 6 months and older should get an annual flu vaccine, but the protection from a flu vaccine can lessen with time, especially in older adults. Still, you are less likely to become seriously ill or hospitalized with the flu if you get the vaccine. A flu vaccine is especially important if you have a chronic health condition such as heart disease or diabetes.

Ideally, you should get your vaccine by the end of October each year so you are protected when the flu season starts. It takes at least two weeks for the vaccine to be effective. However, if you have not received your flu vaccine by the end of October, it's not too late — flu season typically peaks in December or January. As long as the flu virus is spreading, getting vaccinated will help protect you.

There are flu vaccines designed specifically for older adults. The CDC recommends that people age 65 and older receive a higher-dose flu vaccine or an adjuvanted flu vaccine (one with an additional ingredient called an adjuvant that helps create a stronger immune response). These vaccines are potentially more effective than the standard flu vaccine for people in this age group. Talk with a health care provider or pharmacist about which vaccine is best for you.

Medicare will pay for the flu vaccine, and so will private health insurance plans.

RSV vaccine for older adults

Respiratory syncytial virus (RSV) is a common virus that usually causes mild, cold-like symptoms. However, older adults have a higher risk of developing severe symptoms if they are infected with RSV. The illness can be particularly dangerous for people who have chronic diseases or a weakened immune system. Older adults who get very sick from an RSV infection

may need to be hospitalized, and the illness can even be life-threatening.

RSV vaccines are available to protect older adults from the serious health problems that can occur with RSV infection. The CDC recommends that adults 60 years and older talk with their health care provider about whether they should receive the RSV vaccine. Like the flu, RSV infections are most common in the fall and winter months, so consider getting vaccinated before RSV season starts. However, you can benefit from the RSV vaccine at any time of year.

Vaccines to help prevent pneumonia

Pneumococcal disease is a serious infection that spreads from person to person by air. It often causes pneumonia in the lungs and it can affect other parts of the body. Older adults are at higher risk than younger people of getting very sick or dying from pneumococcal disease.

The CDC recommends that all adults age 65 and older get pneumococcal vaccination. This vaccine helps protect you from getting a serious infection, including pneumonia. There are multiple forms of the pneumococcal vaccine: Talk to a health care provider to find out which is best for you. You can also visit the CDC's Pneumococcal Vaccination webpage to learn more about the types of vaccines that are available.

Medicare will pay for the pneumococcal vaccine, as will many private insurance plans. Pneumococcal vaccines may also be available at other community locations, such as schools, religious centers, and workplaces.

Tetanus, diphtheria, and pertussis (whooping cough) vaccines

Tetanus, diphtheria, and pertussis are diseases caused by bacteria that can lead to serious illness and death.

- **Tetanus** (sometimes called lockjaw) is caused by bacteria found in soil, dust, and manure. It can enter the body through a deep cut or burn.
- **Diphtheria** is a serious illness that can affect the tonsils, throat, nose, or skin. It can spread from person to person.

- **Pertussis**, also known as whooping cough, causes uncontrollable, violent coughing fits that make it hard to breathe. It can spread from person to person.

Getting vaccinated is the best way to prevent tetanus, diphtheria, and pertussis. Most people get vaccinated as children, but you also need booster shots as you get older to stay protected against these diseases. The CDC recommends that adults get a Tdap (tetanus, diphtheria, and pertussis) or Td (tetanus, diphtheria) booster shot every 10 years. Ask a health care provider when you need your booster shot.

Shingles vaccine for older adults

Shingles is caused by the same virus as chickenpox. If you had chickenpox, the virus is still in your body. As you get older, the virus could become active again and cause shingles.

Shingles affects the nerves. Common symptoms include burning, shooting pain, tingling, and/or itching, as well as a rash with fluid-filled blisters. Even when the rash disappears, the pain can remain. This is called post-herpetic

neuralgia, or PHN.

The shingles vaccine is safe, and it may keep you from getting shingles and PHN. Healthy adults age 50 and older should get vaccinated with the shingles vaccine, Shingrix, which is given in two doses. (Zostavax, an earlier shingles vaccine, is no longer available in the United States.)

You should get a shingles vaccine even if you've already had chickenpox or the chickenpox vaccine, or if you don't remember whether you had chickenpox. You should also get the shingles vaccine if you've already had shingles or received Zostavax. However, you should not get a vaccine if you currently have shingles, are sick or have a fever, have a weakened immune system, or have had an allergic reaction to Shingrix. Check with a health care provider if you are not sure what to do.

You can get the shingles and these other vaccines at a doctor's office, your local health department, and many pharmacies. Medicare Part D and private health insurance plans may pay some or all of the cost.



The Psychological Challenges of Retirement

Seth D Kramer

Retirement is a big step. Regardless of the circumstances that got you to this point, it is a major life event. Careful and deliberate planning for retirement is certainly the wise thing to do. However, the specifics of planning for retirement often miss the full picture

of what retirement entails.

Retirement involves both changes and transitions. As consultant and corporate trainer Paul Pexioto points out on his YouTube channel, changes deal with external things such as finances and living arrangements while transitions

deal with internal things such as emotional and psychological concerns. “Our tendency,” Pexioto says, “is to plan for the changes and not plan for the transitions.” As a result, most people will think they have fully planned for retirement when they have saved sufficient funds to support their desired lifestyle for the rest of their non-working life. However, after retirement, psychological issues quickly become front and center.

The initial phase of retirement can be very exciting and invigorating. Plans and trips that have been put off are all of a sudden a go. The literature refers to this as “the honeymoon period.” This was very much true with my retirement. As a longtime fan of Mordecai Richler and Leonard Cohen, I had always wanted to visit Montreal, but work and other more “substantial” vacations kept superseding those plans. But within 30 days of retiring, I took a weeklong trip to the City of Saints. It was as fun and interesting a trip as I always hoped it would be—well worth the wait.

After the Honeymoon

However, the period after the “honeymoon phase” can be very deflating. This is when the full reality of the transition becomes very clear. “This stage of retirement is when the initial excitement wears off,” according to healthpartners.com, “and you may experience feelings of boredom or disappointment. This can sometimes lead to depression.”

Depression is a very common byproduct of retiring. “Almost 1 in 3 retirees,” according to webmd.com, “say they feel depressed.” The cause of this depression can be attributable to this new transition. “The truth is that no matter how much you’ve been looking forward to it,” write Lawrence Robinson and Melinda Smith, M.A., in helpguide.org. “retiring from work is a major life change that can bring stress and depression.”

And this depression can manifest itself in many different forms. For example, casual drinking can develop into problem drinking. And the newly available and unoccupied time can lead to negative self-reflection regarding regrets and unre-

solved life issues.

In addition, a lack of mental stimulation can emerge as a new problem after retirement. Also, the absence of regular interaction with work colleagues can lead to feelings of social isolation.

Beating the Blues

However, the most common manifestations of depression in retirement are the absence of a routine and the loss of identity.

For many people, work has been the organizing factor in their life. What time they got up in the morning; had their meals; the length and timing of vacations; and when to sleep at night were all dictated by the structure of their work. The disappearance of this organizing life concept can leave a lot of people feeling untethered and lost.

In addition, this loss of habits can cause myriad problems. In the absence of the structure of a daily routine, you may have the time to obsessively ruminate about financial concerns, and possible health and cognitive decline. All of which can lead to depression.

Your work may also have been a big part of your identity. For several decades, your professional life may have been your self-definition. In addition, your social life may have been an outgrowth from your professional/working life. Often, all of that changes with retirement.

“If your previous role was your entire identity, you’re in trouble,” says Arthur C. Brooks in an interview in Atlantic magazine. “There has been research on the tendency for people with a lot of prestige and power to become depressed when they retire.”

And retirement can last many years. As Forbes.com points out, a retiree at age 65 can expect to live another 17 to 20 years. So, an effective strategy to deal with these mental health challenges is an important thing to develop.

Do Better by Doing Good

One method is to seek help from a qualified mental health professional. But there are other DIY methods you may want to explore.

In reviewing websites and other resources, I found that a common method for countering post-retirement depression is engagement. For example, volunteering is a type of engagement that can address a lot of concerns that arise.

“Studies show that seniors who incorporate a low to medium level of volunteering in their life,” according to verywellmind.com,” report more satisfaction with life and fewer symptoms of depression than those who didn’t volunteer.” And of the great things about volunteering is there is no set way to do it. It

truly is customized to the individual who is doing the volunteering. Volunteering can help you redefine your identity while providing mental stimulation and new routines. It can also aid in countering social isolation by creating new opportunities for socialization.

So, it is important to view retirement not as a final static destination but rather as a series of opportunities to engage in life. And there are as many ways to engage in life as there are retirees.

Seth D Kramer

EMPLOYEES OF THE MONTH

At Independent You, we believe that caregivers are the heart of our community. Each month, we take a moment to recognize those individuals whose exceptional dedication, compassion, and hard work have made a significant impact on the lives of those they serve.

Caregivers play a pivotal role in fostering a supportive and nurturing environment. Their work often extends beyond physical assistance; they provide emotional support, companionship, and a listening ear. This quarter, we honor **Margaret N.**, **Naa Q.**, **Karim W.** and **Monica D.** for their tireless efforts and the positive influence they have on our community.

We invite you to join us in celebrating our caregivers of the month. We appreciate all they do!



Margaret



Karim



Naa

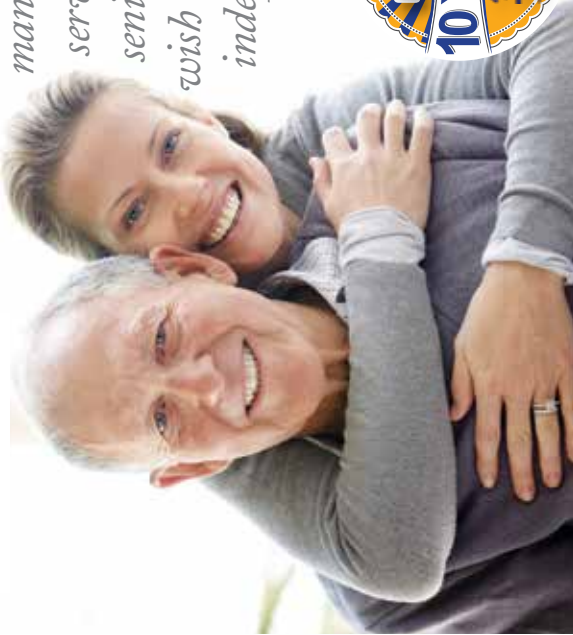


Monica



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