

Senior Perspectives

KENT COUNTY EDITION

A FREE PUBLICATION

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A R E A
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NOVEMBER | DECEMBER 2019

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Mission:

Area Agency on Aging of Western Michigan's mission is to provide older persons and persons with a disability an array of services designed to promote independence and dignity in their homes and their communities.

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The caramel apple was found on page 20 in the Trailside restaurant story.



BY
ANNE
ELLERMETS

The Gift

The last two months of the calendar year contain many holidays that have gift-giving attached to them. Some people enjoy the thrill of last-minute shopping. I have an uncle who used to do all his shopping on Christmas Eve. Amazingly enough, he came up with some wonderful gifts that were still on store shelves, since this was long before online shopping. Among my favorite gifts from him were a set of three Nancy Drew books and a doll that came with a bed that turned into a suitcase. Other people carefully shop for their family and friends throughout the year, taking time to purchase “just the right gift” for someone. Where do you fall on this spectrum?

As part of an ice-breaker exercise in a recent meeting, everyone went around the table and shared the “best gift” they had ever received. It was fascinating to hear about all the gifts that meant so much to them. The unifying themes of the gifts were that they were still meaningful regardless of how many years had passed, and the monetary value was minimal. The gift of time often came up. The best gift I ever received was on the Christmas I had just returned home from the hospital with my third son during a huge snowstorm. My mother made up a little book for me, telling me that she

would bring dinner over for my family once a week for a year. I cried with appreciation that she would do this for me.

As this holiday season approaches, consider giving others the gift of time. Take a meal over to a young family or someone who is caring for a spouse or a family member. They will greatly appreciate it! Another suggestion is to simply spend time visiting a shut-in. Bake holiday treats with them. Listen to them tell stories of past holidays, or take them for a drive to see neighborhood

decorations. You could even help them put up some of their own decorations. Most school districts have choir and band concerts this time of year. Offer to pick up someone who can't drive and take them to one of these concerts. The students have worked hard all fall preparing for these performances and they will be grateful for a big crowd.

In *The Purpose Driven Life: What on Earth Am I Here For?* author Rick Warren writes, “Time is your most precious gift because you only have a set amount of it. You can make more money, but you can't make more time. When you give someone your time, you are giving them a portion of your life that you'll never get back. Your time is your life. That is why the greatest gift you can give someone is your time.”

So as we enter into this holiday season, remember that it's not the monetary value of a gift that will most be remembered, but the thought that went into it, and the time that we give to others. Get creative and think of some things you can do to brighten the upcoming season for others.

Anne Ellermets is the Director of Contracted Services & Program Development at the Area Agency on Aging of Western Michigan. She still has the Nancy Drew books and the doll with the bed that turns into a suitcase that her Uncle Francis gave her one Christmas.



It's Harvest Time



BY
MICHELLE
JACKSON

Thanksgiving is my favorite holiday because it speaks to the bounty of the harvest. I cannot decide what my favorite activity is: making s'mores by the campfire on cool nights, or the warm colors of the trees at their peak, or even the smell of hot apple cider and cinnamon. Whatever it is, this season brings me joy like no other.

I would think this is a favorite time for farmers, too. With hope and faith, they plant in the spring to get a plentiful bounty of corn, pumpkins, and more at harvest time. Our hearts are the same way. Let me explain what I mean. As a farmer plants seeds in the ground for a food harvest,

we plant words and actions in the hearts of our friends and family for a life harvest. Words are seeds, and actions are the fertilizers of these seeds. Without being fully aware of it, we plant something every time we speak and reinforce our words every time we act.

What words are you planting? What actions are you using to fertilize your words?

In hope and faith, choose your words and actions based on the harvest you want to reap. A harvest of peace is reaped from peaceful words and peaceful actions. A harvest of thankfulness is reaped from words and actions of thankfulness. A harvest of love and kindness is reaped from words and actions of love and kindness.

What kind of harvest do you want to reap?

One of my favorite examples of this in my own life happened just recently. I had the honor of counseling a young couple in preparation for marriage. It was such a pleasure, though sometimes sacrifices had to be made to accommodate their schedule. I saw it as a little thing because my heart's desire was to bless them. Well, did they ever bless me! After their honeymoon, they invited my husband and me to dinner. Then, they blessed us with a love offering! It was so sweet and so needed. It was such a joy to reap such a sweet blessing. I shed tears thinking of the joy reaping this harvest. And so it is with all seeds of life I sow.

Have you sown some words or actions of regret or bitterness? Be encouraged. To make the change, change your focus. Rather than trying not to sow regretful words, focus on sowing loving words. Sowing new seeds of forgiveness, love, kindness, nurture, and peace will produce a new harvest and eventually take over any seed of regret or bitterness sown. It is the nature of gardening, sowing, and reaping. It is the nature of the heart, too!

What is your favorite activity during this season? While you are warming your heart with the activities that only this season can bring, remember to warm the heart of your friends and family, too, by creating warm memories sharing kind words and actions.

Michelle Jackson is the Director of Church Builders Bible Training Center. She works with people from all denominations and walks of life to help them take the church outside of the four walls and be a living testament in the marketplace. Michelle believes every human at every age and stage of life has a life assignment to fulfill. Her passion is to help them find it and pursue it.



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Travel YOUR Way This Winter



BY
EMILY
ARMSTRONG

Travel is a pastime many enjoy. The sense of escapism and discovery you feel while visiting a new destination is one-of-a-kind. As it turns out, taking a trip, whether it is a short jaunt just a town over or across country borders, can have a positive impact on your overall health. According to a study conducted by the Global Coalition on Aging in partnership with the Transamerica Center for Retirement Studies, a strong majority of senior respondents said travel improves their overall health and well-being: 86% reported improvement to their mood and outlook, 78% say it reduced their stress level, and 77% noticed an increase in their physical well-being.

As the fall season shifts to winter and the holidays draw near, travel activity increases exponentially. People make plans to visit friends and family or head south to escape the frigid winter weather. As we get older, sometimes this freedom to travel wherever we'd like can start to feel like it is slipping away, but this doesn't have to be the case. There are a number of things you can do when planning your travel to make it easier for you to maintain your independence and feel confident when taking a trip. Here are a few quick travel tips!



- HealthyAging.org recommends a few simple things to make trips easier to navigate such as talking to your healthcare provider beforehand, wearing compression socks when sitting for an extended period to avoid deep-vein thrombosis, making a list of your medications and medical problems for easy reference, and drinking plenty of water to stay adequately hydrated.
- Traveling locally still counts as a getaway, too. Even a slight change of pace is all you need to feel revitalized. At the local level, resources such as RideLink are there to help you to navigate travel close by. RideLink provides seniors 60+ with affordable rides throughout Kent County. Using this service funded through the Kent County Senior Millage, you can schedule a lift in advance to wherever you would like: doctor's appointment, grocery store, a friend's house -- the opportunities are endless. You'll have a safe, reliable option to get you to your destination despite unpredictable winter weather, and if you are currently relying on a family member or friend to drive you, RideLink can help ease some of this responsibility. You can learn more about RideLink at www.aaawm.org/ridelink or feel free to call (616) 774-1288.
- Is air travel in your future? Take note of the new REAL ID requirements which will require you to have a REAL ID-compliant document to fly within the United States and to enter certain federal facilities. REAL ID security standards were implemented as a result of Sept. 11, 2001, and REAL ID is designated on your driver's license as a gold circle with a star inside. Though this requirement does not go into effect until October 1, 2020, it is imperative to get this documentation situated beforehand. If you have a passport, it is an acceptable form of identification as well. Learn more about REAL ID at www.Michigan.gov/REALID.

Regardless of your travel plans this winter or beyond, the best thing you can do is to plan ahead so you can focus on fully enjoying your destination rather than how you will get there. Bon Voyage!

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Long-Term Care Options

BY STEPHANIE HECKSEL, LMSW

Long-term care is not always a favorite topic for people to discuss. However, it is a topic that does arise in people's lives, sometimes planned and sometimes unexpectedly. Long-term care may be an option for

individuals when they begin to need more help on a daily basis due to a disability or chronic illness. Long-term care can include a variety of services, such as personal care, medication management, meals, home-making, and around-the-clock supervision. The type of services and the amount of care that are offered may vary from person to person based on each individual's unique needs. Before pursuing "long-term care," it is important for individuals to have an understanding of the different kinds of care offered so they can be prepared in planning for the next situation ahead of them.

IN-HOME SERVICES: When discussing long-term care, many people might initially say that they would like to remain independent and continue to reside in their own home setting. This may be an option for some individuals based on their care needs and in-home support they might be able to receive. Often family members, friends, and other supportive entities (such as a church community) become more involved to help. There are also home care agencies that can provide help on a private pay basis.

Programs like MI Choice Medicaid Waiver and the PACE are intended to meet the needs of individuals who qualify for nursing home placement by providing in-home services. The programs are intended to provide services to individuals on a long-term basis, which allows the person to receive "long-term care" in his or her own home instead of moving to another setting. There are income and asset guidelines, level of care criteria, as well as other factors the individual is required to meet in order to participate with these long-term care programs.

ASSISTED LIVING: There are times when, even with family support and agency services in place, individuals need more help than what they are receiving in an independent setting. When this occurs, individuals might look to move into an assisted living setting. "Assisted Living" itself is a term used to describe two types of settings: Adult Foster Care homes and Homes for the Aged. These settings typically offer a customary amount of service, including room and board, housekeeping, 24-hour supervision, medication management, and a minimal amount of personal care. Many homes have various levels of support available that help to meet specific needs. Assisted living can be small group homes intended for just a few residents or they can be larger facilities or anything in between. Because of the variety of sizes and levels of care that are provided, the cost for each facility will be based on the facility itself and the amount of care the individual may need while residing there. There are many assisted living options available and there are resources that can assist individuals in finding a setting that will best meet their needs and preferences.

SKILLED NURSING FACILITY/NURSING HOME: Skilled nursing facilities (nursing homes) are another setting where an individual receives

daily care. This setting provides the most amount of care available via a number of disciplines: nurses, nurse assistants, social workers, physical therapists, occupational therapists, dieticians, recreational therapists, and medical staff (facility physician, pharmacist, and more). Many skilled nursing facilities offer short-term rehabilitation stays and long-term care, where individuals will reside on a permanent basis if they choose. Individuals may first be admitted to a nursing facility following an unexpected illness or injury that resulted in a need for physical and/or occupational therapy. Sometimes individuals are able to recover and be discharged to a lesser restrictive setting, while other times individuals require a significant amount of care and will continue to reside in this setting indefinitely.

Overall, the idea of "long-term care" can feel overwhelming and, since no two situations are alike, it is difficult to plan for the future based on someone else's experience. It is important to plan proactively in thinking about all options. What type of care is best for me? When should I prepare to move to another setting? How do my personal preferences influence settings I might consider? How can I determine what I qualify for in regards to my care needs and my finances? Who should I speak to regarding my wishes for where I reside and how my needs are met? These are just some of the many questions that arise when an individual begins to consider long-term care options.

Stephanie Hecksel, LMSW is Access Manager with the Area Agency on Aging of Western Michigan

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Cathay's Cooking Corner

BY
CATHAY
THIBDAUE



Chicken Fettuccine Alfredo

16 oz. box of fettuccine
3/4 cup heavy cream
3/4 cup butter
3/4 cup freshly grated Parmesan, plus more for sprinkling
1 teaspoon salt
1 teaspoon black pepper
3 tablespoons chopped parsley
1 1/2 cups chopped precooked chicken

In a large pot of boiling salted water, boil fettuccine as directed on package. Reserve about 1/2 cup of pasta water, then drain well.

Meanwhile, in a large skillet over medium heat, heat cream and butter until the butter is melted, and the cream is heated, but do not boil. Whisk in Parmesan cheese and season with salt and pepper to taste. Add precooked chicken and heat through.

Add cooked pasta and toss until coated in sauce. If the sauce is too thick, add reserved pasta water, 1 tablespoon at a time. Garnish with parsley and serve at once.

Cathay is the Network Manager, Certified HIT Security Administrator and Certified HIPAA Security Professional Accelerated at Senior Resources of West Michigan. She also enjoys boating, fishing and spending time with her family.



AAAWM Eats

BY
STACI
GERKEN

Roasted Carrot Soup

This is a simple soup to prepare that will hit the spot during the fall and winter months!

Ingredients:
2 lbs. carrots
1 medium onion
4 cloves of garlic
2 Tbsp olive oil
Black pepper and dried rosemary
4 cups of vegetable broth
1 can of chickpeas (garbanzo),
drained and rinsed
juice from 1 lemon (3 tbsp)



1. Preheat oven to 425° F
2. Wash, peel, and chop carrots into 1 1/2" pieces. Cut onion in half and peel garlic. Place all vegetables in a bowl and add olive oil. Toss to coat, then place on a baking sheet lined with parchment paper. Sprinkle desired amount of black pepper and rosemary on vegetables.
3. Roast in oven at 425° for 45 minutes to 1 hour, stirring halfway through. The carrots should be fork tender.
4. Place roasted carrots, onion, and garlic in a blender. Add the drained and rinsed chickpeas and broth. Puree until smooth. If you would like a thinner consistency, add more broth or water to thin.
5. Place pureed soup in a pot and heat over low heat until hot and bubbling.
6. Enjoy! The soup can be garnished with rosemary and sour cream if desired and is best served with crackers or bread.

Substitutions:

- Any variety of white beans (great northern, navy, or cannellini) can be substituted for the chickpeas.
- Substitute 1 cup of canned coconut milk for 1 cup of broth for a creamier flavor. Or use the coconut milk to thin to desired consistency instead of broth or water.
- Chicken or beef broth can be substituted for the vegetable broth. (Note that making this substitution will mean it is not a vegetarian dish anymore.)

Staci Gerken is a Registered Dietitian and the Nutrition Contract Administrator at the Area Agency on Aging of Western Michigan where she works with congregate and home delivered meal partners in a nine-county region.

Older Adults and Depression



BY
CHRISTINE
WISTRUM

It's not unusual for older individuals to experience depression. As we age, we may begin losing control over our bodies, find our senses aren't as sharp, and discover that our social network is shrinking as we outlive our friends.

We often find our financial situation has changed drastically with retirement and we are living on much less than we had in the past. We can't walk as far, and we aren't as strong as we once were. We may find ourselves grieving the loss of many of those things that brought us value in life and reaffirmed our identities.

Estimates are that over two million older Americans are depressed, but depression is not a normal part of the aging process.

Most of us are happy with where we are and who we are in spite of things not being as easy as they were when we were younger.

Depression in an older adult may be difficult to recognize. Rather than looking depressed, we may seem to simply be more tired, or people may attribute our lack of response and enthusiasm as the beginnings of senility. Depression may be more likely if you've been clinically depressed in the past, if you're a woman, if you're disabled, or even if you take certain medications.

While physicians may find it difficult to recognize depression in their older patients, we may not even recognize it in ourselves! Some of the signs to watch for include:

- Lack of energy or feeling tired all the time
- Feeling sad, anxious, or hopeless

- Irritability
- Not enjoying things you used to love to do
- Eating more or less than usual
- Thoughts of suicide and death
- An increase in aches and pains without a clear physical cause
- Struggling to pay attention
- Moving or talking more slowly

Be careful to not confuse depression with grieving, as it is normal to experience some of these same symptoms when you have lost someone close to you.

Treatment for depression can greatly improve your quality of life. Talk to your doctor about how you feel first to rule out any medical conditions that might be affecting your emotional health. You may be prescribed medications to help with your depression, or therapy may be in order. Talk Therapy can be very helpful, as it helps you identify negative thought

patterns and develop more positive ways of viewing things. Remember, what you think has a great influence on how you feel.

If you think you may be becoming depressed, you'll want to take extra good care of yourself for a while: eat nutritious foods and get enough exercise to keep yourself healthy and strong. Exercise may make a big difference in preventing depression, as endorphins are released when you exercise, raising your mood naturally.

If you do find yourself thinking overly much about death and suicide, please tell your doctor. Depression is treatable! Over 80% of older adults who received treatment find it to be successful.

Chris is a Gerontologist who works at Disability Network/Lakeshore in Holland, Michigan as an Independent Living Specialist. Current interests include assistive technology, veterans' issues, emergency preparedness planning and service dog training.

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Your Earnings Record.

Your Financial History and Your Financial Future.



BY
VONDA
VANTIL

Social Security is an earned benefit. Your earnings history is a record of your progress toward your benefits. Social Security keeps track of your earnings so we can pay you the benefits you've earned over your lifetime. This is why reviewing your Social Security earnings record is so important.

If an employer didn't properly report just one year of your work earnings to us, your future benefit payments from Social Security could be less than they should be. Over the course of a lifetime, that could cost you tens of thousands of dollars in retirement or other benefits to which you are entitled. Sooner is definitely better when it comes to identifying and reporting problems with your earnings record. As time passes, you may no longer have easy access to past tax documents, and some employers may no longer exist or be able to provide past payroll information.

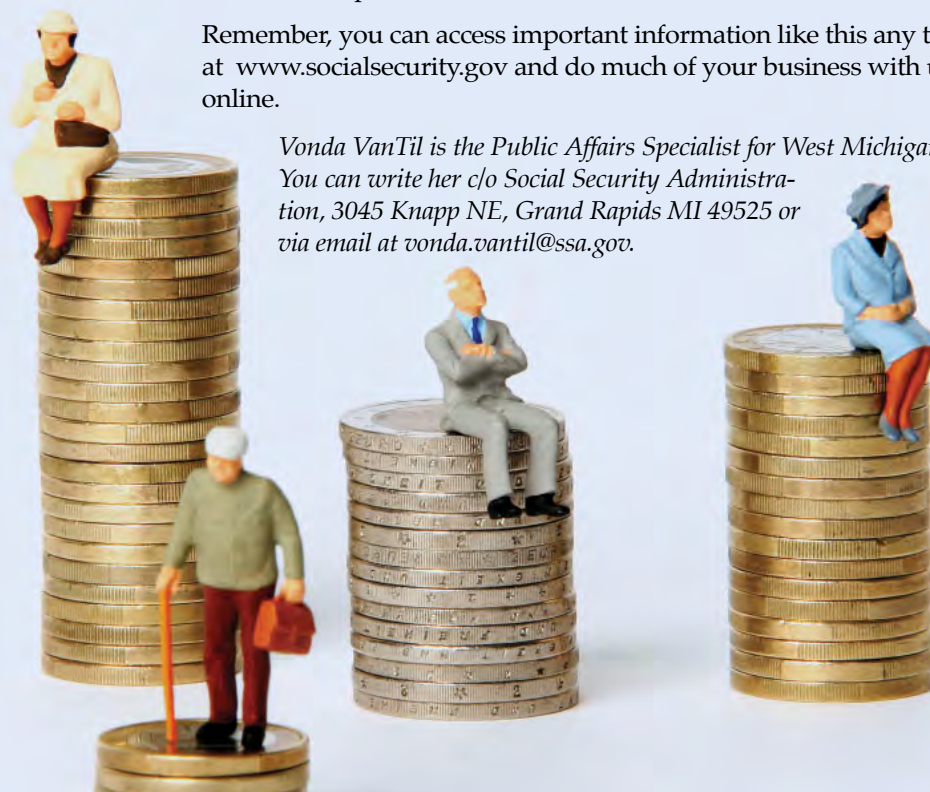
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Remember, you can access important information like this any time at www.socialsecurity.gov and do much of your business with us online.

Vonda VanTil is the Public Affairs Specialist for West Michigan. You can write her c/o Social Security Administration, 3045 Knapp NE, Grand Rapids MI 49525 or via email at vonda.vantil@ssa.gov.



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Ask the Provider

Obstructive Sleep Apnea: An Innovation in Therapy



BY
CHRISTOPHER
MORGAN, MD

Your sleep partner says that your loud snoring interrupts his or her sleep. Your partner comments that you gasp for air while sleeping, and sometimes you stop breathing entirely!

If you have heard comments like these, it is possible that you have obstructive sleep apnea, a medical condition that you should not ignore.

Question: What is obstructive sleep apnea (OSA)?

Answer: OSA is common breathing disorder that occurs only while sleeping. The back of the throat becomes blocked from the tongue and other tissues, leading to a lack of air reaching the lungs. This causes decreased oxygen to the body when sleeping and stress on the heart and lungs, leading to many awakenings and poor quality sleep.

Question: How common is OSA?

Answer: More than 25 million Americans have OSA. Experts estimate that:

- 80-90% of cases are undiagnosed.
- 25% of adults between ages 30 and 70 have OSA.
- 10% of adults have moderate to severe OSA.
- 4-17% of adults have OSA with daytime sleepiness.

Question: Can untreated OSA lead to other health problems?

Answer: Yes. Untreated OSA can lead to sleepiness and other medical conditions, such as:

- High blood pressure
- Stroke
- Heart attack or heart arrhythmias
- Diabetes
- Depression
- Memory loss
- Acid reflux/Heartburn

Question: Are there benefits to having a sleep study performed in a sleep laboratory rather than using a home sleep apnea test?

Answer: A home sleep apnea test only records a person's breathing and oxygen levels. This type of test may underestimate a person's condition because it does not detect arousals from sleep. An in-laboratory polysomnogram also measures brain waves to see if a person awakens from sleep. A polysomnogram provides a more accurate diagnosis of obstructive sleep apnea and assessment of severity.

Question: How is OSA treated?

Answer: Sleep specialists use a variety of methods for treating OSA. They include CPAP and other similar devices; anti-snoring devices; oral appliances; and surgical treatments. The most recent innovation in surgical treatment is Hypoglossal Nerve Stimulator, also known as Inspire therapy.

Question: How long has Inspire therapy been used in the United States?

Answer: This therapy was FDA-approved in 2014 and is used by 6,000 patients worldwide. Through an *outpatient* surgical procedure, a small generator is implanted in the patient to stimulate the hypoglossal nerve during sleep. Patients who have undergone this procedure have a high satisfaction rate.

Question: Who qualifies for Inspire therapy?

Answer: This therapy is specifically for patients who:

- Have moderate to severe OSA.
- Have more than 15 pauses in breathing per hour of sleep.
- Are unable to use or get a benefit from CPAP.
- Are not obese: an ideal candidate has a body mass index of less than 32.
- Are age 22+.

Question: What steps are involved in qualifying a person for Inspire therapy?

Answer: The major steps to qualify for Inspire therapy include the following:

- Screening over the phone by sleep clinic staff
- Sleep clinic evaluation, with a sleep study result that indicates moderate to severe OSA
- Use of a CPAP, which is non-invasive, to see if that form of therapy provides relief
- If a CPAP is not tolerated or has lack of benefit, the patient will be referred to an Ear, Nose and Throat (ENT) clinic for evaluation
- ENT doctor performs an upper airway exam under mild sedation
- Approval by insurance
- Outpatient surgical implantation of Hypoglossal Nerve Stimulator
- Activation of device with gradual acclimation over 2-3 months
- Sleep study following implantation
- Routine follow-up appointments

Christopher Morgan, MD, is the Medical Director of the Sleep Center at Mercy Health Hauenstein Neurosciences on the Saint Mary's Campus 616.685.6330

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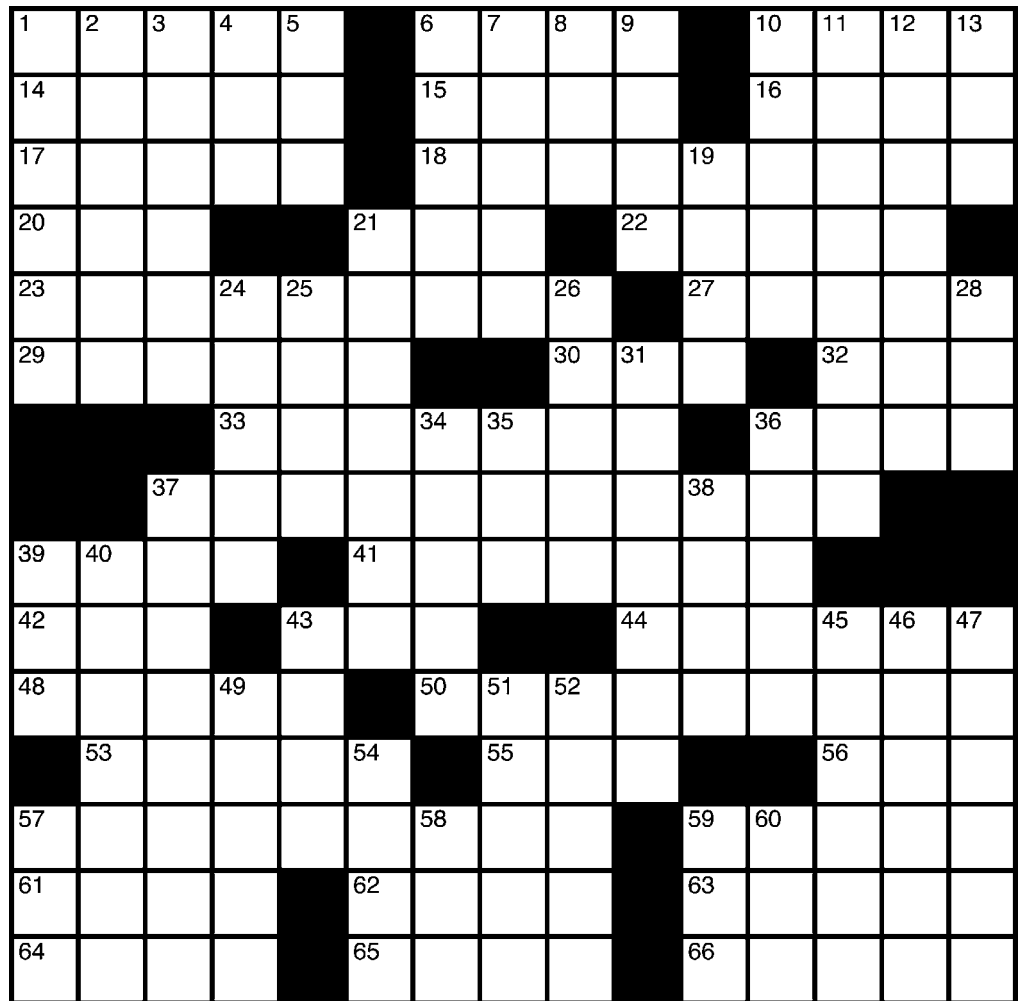


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ACROSS

- 1 With 66-Across, crisp serving with pâté
- 6 Gush forth
- 10 Australian gem
- 14 Mountains between Europe and Asia
- 15 Singer Guthrie
- 16 Bring on board, workwise
- 17 Enjoy to the max
- 18 Mug for the camera
- 20 Govt. assistance program
- 21 "Holy smokes!"
- 22 Hot spot
- 23 Pitch in
- 27 Battery post
- 29 Aggressive poker words
- 30 Some iTunes downloads, briefly
- 32 Queen ___
- 33 Road problem needing patching
- 36 Catcher's protection
- 37 Do the slightest thing
- 39 Aware of
- 41 Voice of Carl Fredricksen in "Up"
- 42 "What's up, ___?"
- 43 iPhone, e.g., briefly
- 44 HOW THIS IS TYPED
- 48 Shoulder wrap
- 50 What the winning quarterback may do as time runs out
- 53 Contemptible sort
- 55 Prosecutors, for short
- 56 Seine season
- 57 Theatrical "Good luck!"
- 59 "Really, bro?!"
- 61 Was sorry for
- 62 Grand soirée
- 63 Super Bowl party bowlful
- 64 Chianti and cabernet
- 65 Paradise
- 66 See 1-Across

- 12 Video game spots
- 13 Dixie general
- 19 Remote batteries
- 21 Stimulated, as one's appetite
- 24 Scoop up, as salsa with a chip
- 25 Starting on
- 26 Meat markets
- 28 Cry of fright
- 31 Cents
- 34 Attacked
- 35 All ___ sudden
- 36 Pfizer rival
- 37 Plant that is poisonous to livestock
- 38 Rowlands of "The Notebook"
- 39 Crooks may have fake ones
- 40 "You lie!"
- 43 Company car, e.g.
- 45 Lack of vim and vigor
- 46 Colorful flower parts
- 47 "Caught that movie last week"
- 49 Detectives follow them
- 51 Singer with the albums "19," "21" and "25"
- 52 Sotomayor colleague
- 54 Senate aide
- 57 "I'm freezing!"
- 58 Young fellow
- 59 Fake it
- 60 "___ goes there?"



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DOWN

- 1 Granola kin
- 2 Error remover
- 3 Rita Moreno or Gloria Estefan
- 4 ___-ray Disc
- 5 Snake that bit Cleopatra
- 6 South Pacific island nation
- 7 Shrimp kin
- 8 Fraternal club member
- 9 Misfortunes
- 10 "Terrific ... not!"
- 11 Lounge with keyboard music



JUMBLE

Unscramble these four Jumbles, one letter to each square, to form four ordinary words.

GILCO
 ○ ○ ○ ○
 NOCAG
 ○ ○ ○ ○
 DYNEOK
 ○ ○ ○ ○
 RUJINO
 ○ ○ ○ ○
 ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○

THAT SCRAMBLED WORD GAME
 by David L. Hoyt and Jeff Knurek



SHE KNEW THE DIFFERENCE BETWEEN STRATUS, CIRRUS AND CUMULUS AND WAS ---

Now arrange the circled letters to form the surprise answer, as suggested by the above cartoon.

		9	6	4				
						7		6
							4	
6			1		7	3	8	
	4		8		2		6	
	1	8	9					2
	3							
1		5						
			4	7	5	8		

SENIOR PERSPECTIVES GAME PAGE

Answers on Page 23



By David L. Hoyt and Jeff Knurek

INSTRUCTIONS: Find as many words as you can by linking letters up, down, side-to-side and diagonally, writing words on a blank sheet of paper. You may only use each letter box once within a single word. Play with a friend and compare word finds, crossing out common words.

**BOGGLE
POINT SCALE**

- 3 letters = 1 point
- 4 letters = 2 points
- 5 letters = 3 points
- 6 letters = 4 points
- 7 letters = 6 points
- 8 letters = 10 points
- 9+ letters = 15 points

**YOUR BOGGLE
RATING**

- 151+ = Champ
- 101-150 = Expert
- 61-100 = Pro
- 31-60 = Gamer
- 21-30 = Rookie
- 11-20 = Amateur
- 0-10 = Try again

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We put special brain-busting words into the puzzle grid. Can you find them?

Find **AT LEAST NINE WORDS** ENDING WITH "LM" in the grid of letters.

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

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Not any one person should have to care for a loved one with dementia alone. But finding the right help can be difficult.

Help is available at WPMemoryCare.org/HELP

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- Talk with a Waterford Place Counselor
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For the Birds A "Maze"ing



BY
JANET
HASSELBRING

Labyrinth: a single, non-branching, unicursal path, which leads to a center, then back out the same way.

Maze: a circuitous trail that may have one correct path but can also be multicursal – designed to trick travelers into hitting dead ends or losing their way.

Summer 2019. I'm walking a labyrinth at Chautauqua, NY, working my way to the center, when I remember – a memory so visceral, so vivid, it could have happened yesterday:

Summer 1967. London, England. First stop on a European tour with friend Judy, our travel bible, *Frommer's Guide to Europe on \$5 and \$10 a Day*, in hand.

We spend the first day acclimating ourselves to London; the next day we venture outside the city for a tour of Hampton Palace, on the Thames. As we're leaving the grounds, we notice a sign: "Hampton Court Maze," with what seems like a challenge in smaller font, "On average it takes 20 minutes to reach the center." It's mid-afternoon – we have plenty of time to walk the maze and catch the bus back to our hotel for the evening's entertainment. We're the last group to enter – this should give us pause, but we pay the admission and enter the maze.

We head down the path toward the center, reading the brochure as we go. Hampton Maze is the UK's oldest surviving hedge maze. Commissioned around 1700 by William III, it's a trapezoid covering a third of an acre. Originally planted using hornbeam, it was later replanted using yew. Before the creation of the Hampton Court Maze, unicursal or single path mazes were the most popular form of maze in the UK; however, this one is a multicursal or puzzle maze, known for confusing and intriguing visitors with its many twists, turns, and dead ends. Hmmm....

For Londoners, the Hampton Court maze is a rite of passage – a place their parents brought them to test their orientation skills. A double challenge for us – getting to the center in 20 minutes and proving that we (Americans and adults), have orientation skills equal to English children.

Before reading further, we hear fragments of disturbing music, sardonic laughter, and whispered conversations echoing around us. I recognize the music – *Jareth the Goblin King*, from the movie *Labyrinth*. Portrayed by David Bowie, Jareth is the powerful ruler of an otherworldly kingdom – a maze, the protagonist Sarah (portrayed by Jennifer Connelly) must journey through to win her brother Toby back (a movie banned for my children).

I read on: “Spooky sounds, designed to heighten the experience of getting lost, will follow visitors onto the benches at the center, which have been made touch-sensitive.”

Forty-five minutes elapse and we haven’t found the center. Another 15 minutes and the sun is setting behind the suffocating hedgerows of yew, creating eerie shadows. The tourists in our group are long gone.

A pleasant afternoon is unraveling fast. Alone with the demonic laughter, the impending darkness, the hedgerows closing in, panic and claustrophobia set in. I want to claw my way through the hedges, but they’re dense and tight like mangrove bushes guarding the Florida coastline.



We step up the pace. Time to cheat and consult the brochure map. Too dark to read. Forget the center. We just want OUT!

New worries set in. Does anyone know we’re still in here? What if they close the maze, leaving us here overnight? We meander wildly up and down paths. Desperate, we toss up a prayer. Can God can even hear us in here?

Then, oh joy! A miracle! We see an opening ahead. Dead tired and emotionally drained, two and a half hours after entering, we stagger out into a spacious dusky London evening. The sign screams a farewell. “Beware: getting lost doesn’t have to be scary – it can be entertaining.” Wrong.

Back at the hotel, we check details for our evening entertainment: “The Crystal Maze Live in London.” You’ve got to be kidding.

A “Maze” ing.

Janet lives in MI with her husband, Don and Welsh terrier, Maggie May. Jan drags herself off the tennis court occasionally to write - her book series, Tales from Pelican Cove, features wild/shorebirds and a second series, Country Dairy, describes life on her family farm, in west MI, in the 1930’s, when her parents lived and worked on the land. Her piano gets lonely because she chooses to whack fuzzy yellow balls instead of tickling its ivories.

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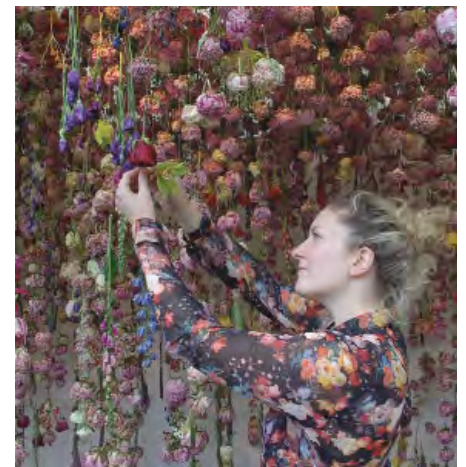
Family Fun in Grand Rapids

Frederik Meijer Gardens and Grand Rapids Public Museum Announce Latest Events and Exhibits



EXTENDED HOLIDAY HOURS

We will be open until 9 pm on December 17-21, 23, 26-28 and 30.
PLEASE NOTE: Meijer Gardens is CLOSED on November 28,
December 25 and January 1.



Metro Health Christmas & Holiday Traditions

November 26, 2019 – January 5, 2020
at Frederik Meijer Gardens & Sculpture Park

Excitement surrounds the holiday season as the annual Metro Health Christmas & Holiday Traditions exhibition brings the glow of over 300,000 lights, strolling carolers, rooftop reindeer and 46 international trees and displays.

This year, explore the Signs of the Season and learn the meaning behind some of the world's most iconic symbols.

Honoring holiday cultures around the world, Meijer Gardens focuses on the authenticity of holiday traditions: Germany tree, adorned with handmade glass ornaments and homemade springerle cookies, the England tree with antique Christmas cards and mistletoe, and the beautiful Eid ul-Fitr display, which celebrates the end of Ramadan. The companion Railway Garden exhibition is a unique horticultural display that incorporates garden design, miniature buildings made from natural materials, and model trolleys and trains.

Rebecca Louise Law: The Womb

Through March 1, 2020
at Frederik Meijer Gardens & Sculpture Park

British installation artist Rebecca Louise Law uses dried and fresh plant material to create site-specific installations that dazzle the senses. In this impactful gallery exhibition, *Rebecca Louise Law: The Womb*, new work by the artist will be presented in an immersive installation in the Balk Gallery. Law's use of natural materials, mainly floral, encourage the viewer to experience the relationship between humanity and nature. The natural decay of the plant material makes this exhibit time-based and encourages frequent visits to observe the process of drying. A big believer in sustainability, Law also reuses dried plant material that has been displayed in her previous installations. Law has exhibited at Kew Royal Botanic Gardens, Nivaagaards Collection, Chandran Gallery, NOW Gallery, bo-lee gallery and Toledo Museum of Art.



Bodies Revealed Exhibition Returning to the Grand Rapids Public Museum this Fall

After nearly a decade, this exhibition returns by popular demand

The Grand Rapids Public Museum (GRPM) announced today that after nearly a decade, the exhibition Bodies Revealed will return to the Museum this November. The exhibition features real, whole and partial body specimens that have been preserved through an innovative process, giving visitors the opportunity to view the complexity of their own organs and systems like never before.

Opening November 16, 2019, Bodies Revealed will allow people to learn about their own bodies and, ultimately, teach how to take better care of one's own health and make positive lifestyle choices. In this phenomenal exhibition about the amazing and complex machine we call the human body, more than a dozen full body human specimens and hundreds of organs are respectfully displayed to tell the story of the miraculous systems at work within each of us. With a reverent, academic approach, this display allows people of all ages to more closely observe the skeletal, muscular, nervous, digestive, respiratory, reproductive and circulatory systems, and to absorb information normally reserved only for medical professionals.

"Bodies Revealed is an incredible learning opportunity that will enlighten, empower, fascinate and inspire curiosity in Museum visitors," said Dale Robertson, President and CEO of the Grand Rapids Public

Museum. "It is rare to get such an in-depth educational and professional look at our amazing bodies and the complicated way they work – this exhibition gives us this opportunity. We are thrilled to bring this exhibition back to West Michigan."



Many of the whole body specimens are presented in vivid athletic poses that allow visitors to better understand their own everyday motions and activities, while other specimens illustrate the damage that can be caused to organs by habits like over-eating, lack of exercise and smoking.

The human body specimens in the exhibition are preserved through a technique called polymer preservation. The process permanently preserves human tissue through the use of liquid silicone rubber that is treated and hardened. The result is a rubberized specimen, preserved to the cellular level, showcasing the complexity of the body's many bones, muscles, nerves, blood vessels and organs.

"The educational impact of this exhibition is immeasurable," said Roy Glover, Ph.D., professor emeritus of anatomy and cell biology at the University of Michigan and chief medical director for Bodies Revealed.

Bodies Revealed will open at the GRPM on November 16, 2019. Tickets will go on sale Fall of 2019. Bodies Revealed is brought to the GRPM by Premier Exhibitions, Inc.

Bodies Revealed is sponsored by David & Carol Van Andel Family Foundation, Bank of America, Meijer, The Steve & Amy Van Andel Foundation, Lacks Enterprises, Inc., Williams Kitchen & Bath, Media Place Partners, AMR of West Michigan and Hope Network Foundation.

Have I Gotta Story to Tell You!



BY
DAVE
KAMPFSCHULTE

I think it is fairly common as we get older, to ask, *How are we going to be remembered? or, Did my life make a difference?* Many hospices have discovered that answering those questions can help bring peace at the end of life to many of their patients. I have been fortunate to have been involved with interviewing patients to obtain their “life story” for the past 10 years. I have done over 60 of them and each one is unique, but at the same time, they have the common theme of exploring the meandering pathways of their lives and realizing the people and events that impacted them, and conversely, who they have impacted.

In our younger years, we are like pinball machines. Our lives lead a frantic pace as we bounce from one side of the machine to the other, never stopping. But as we get older, the pace slows down a bit, and we have time to reflect and connect the dots a bit more. We are farther up the mountain now, and where we once just saw trees, we can see the whole landscape of our lives.

There are people who make it a business to record every event and pepper the story with multiple pictures, family history, and an elaborate record of events for their clients at a hefty price of thousands of dollars. This is not what I do. I tell my patients the idea of the Life Story is not to capture every event in their lives. It is kind of like a highlight film that captures their essence. It is a mixture of facts, feelings, and reflections.

I vividly remember my first patient. She was reluctant to start the process as she said to me, “I have nothing to say to you. I did not have much of a life.” She was thinking big. She wasn’t President nor did she save somebody’s life. I said to her what I now say to all my patients, “Let’s just try it. I will ask you some questions and you can stop anytime you want.” An hour and a half later, she was so hoarse she could not talk anymore. She concluded by stating, “I guess I did have quite a life!”

The stories help not only to clarify the life they have led. They are an opportunity to pass on family history, talk about events and people who have shaped them, give advice, talk about regrets and getting through hard times, and tell their philosophy of life and how it developed. It usually takes two or three times to interview, correct the draft by reading it back to them, and fill in the spaces. It is about three hours with the patient and three hours of taking the jumble of notes to put into a readable story.

I also have learned to let the patient know that if they tell me something that they don’t want in the story, I will make sure it does not see the light of day. I have had people tell me some pretty horrible things that have

happened to them and more than once they have told me that this is the first time they have ever talked about it.

On the other hand, it released a burden to finally bring it out of the hiding space where it has been parked for many years. We all carry around unresolved grief and being able to talk about it is very healing. A few times I have had people tell me to not bother taking notes, they just want to talk about their lives. It is not important for them to have a printed copy. I have come to realize that it is the process of reviewing their lives, not the finished product that matters. Pain is not always physical.

A good story is not just facts. Every story has events that have feelings attached to them. That is where the meat of the story is found. The feelings are there, but they are often not being said. My role is to bring forth those feelings and shine some light on them by listening to “what is not being said” and then follow up with probing questions.

I start off with easier to remember questions about childhood, loves, jobs, and family. I advance with advice type questions, like, *What advice would you have: for staying married, getting through tough times, picking a career, getting along with people.* To conclude, I ask them how they think they will be remembered, which always is cause for a pause. Many start off by saying that they never have thought about that before or nobody has ever asked them.

They usually have an answer. They just needed to be asked, or as I have come to call it, “invited into the conversation.” I have discovered how important these questions are in exploring the meaning of their lives.

That is the heart of life stories – inviting people to tell their story. It is something we all can do. Sometimes it takes the organized form of a printed booklet by someone in an official role. But many times, it is just sitting and listening without judgment and asking some open-ended questions to provide the space for people to talk about their lives. Both of my parents loved to talk about the people and events in their lives. I got a lot of practice earlier in life, asking them these types of questions.

At the conclusion of my interview, I ask people what they thought of the experience. One patient told me that she loved it because it helped her to think about things she had long forgotten that marked her and made her who she was. I always say, “If you have a story, you have had a life!”

*Dave Kampfschulte has been a hospice volunteer for 32 years with Spectrum Health Hospice and Harbor Hospice and is the author of *I’m Dying to Talk with You: 25 years of end of life conversations.* He will be making a presentation on *Life Stories to Caregiver University* on December 3 at Area Agency on Aging of Western Michigan.*



For Veterans Day 2019

I've been asked to choose my favorite performance in which I sang with the United States Army Field Band and Soldiers' Chorus. I'm thankful that the question asked is limited to the years I served on active duty. If my choice was not limited, my favorite could be a hymn on a Sunday morning or a rehearsal with the Muskegon Chamber Choir. Also, choosing a favorite may not even include the performance itself, but rather the afterglow or circumstances which a concert can engender, such as when India's Prime Minister Rajiv Gandhi skipped a scheduled meeting with generals from the Soviet Union to remain until the end of our concert. The military attaché to the American Embassy in New Delhi told us the Prime Minister stayed because he'd never heard his anthem played more beautifully. That concert remains one of many cherished memories, but another remains deeply rooted.



BY
JOEL
DULYEA

place to start the second half, our commanding officer announced the president's decision, "As of midnight tonight, allied offensive action will be suspended." A standing ovation ensued, lasting over eight minutes.

The following morning, the lead story in *The Daily Oklahoman* read, "BUSH

HALTS FIGHTING." There was much talk among us, and pride and gratefulness that the war was over. After loading my luggage on the bus, I walked down the hill from our Holiday Inn to the McDonalds across the highway. A young woman with dark, circular framed glasses and dark hair pulled back in a braided ponytail took my order for a side salad and hamburger. I recognized her from the day before, when she served an ice cream cone to me. She also was at the prior evening's concert, seated in the front row in a metal folding chair, with a toddler in her arms.

What transpired in the Gulf War during our performance made the concert very special. Her husband was with the 2nd armored cavalry in Kuwait. In the coming spring he would have been away for one year. In the meantime, their baby had grown from 18 months to almost 2½ years. The young mother told me she already knew what she and her baby girl would wear and where they would go together when he returned. At that very moment, we shared the same desire: to be home together with the ones we love.

Joel Dulyea is a United States Army retiree who loves to sing with his wife Merijo, spend time with his daughter and son-in-law, dote on his granddaughter and spoil his wire-haired dachshund, Heidi.

It was on February 27, 1991 that we performed in a gymnasium in Elk City, Oklahoma, the fifth in a series of concerts scheduled on a forty-eight-day tour through nine states. It was both the performance and the circumstances that made the day memorable. Overseas, our military was leading a coalition of allies against Saddam Hussein's army in Kuwait and were on the verge of winning the war. The country (and our concert goers) waited for President Bush's address to the nation.

When we took our positions for the downbeat, the packed gymnasium gave us a standing ovation. Backstage during the intermission, we tuned a Grundig radio to 107 FM to hear the announcement that Kuwait and Iraq were liberated. After intermission, with all personnel in



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BY
JOE
STAPEL

Safety and Security

Winter Weather Terms Used by the National Weather Service

OUTLOOK: Winter storm conditions are possible in the next 2 -5 days.

WATCH: Winter storm conditions are possible in the next 36 to 48 hours.

WARNING: Life threatening severe winter conditions have begun or will begin within 24 hours, such as six or more inches of snow and /or ice accumulations of a quarter inch or more.

ADVISORY: Winter weather conditions are expected to cause significant inconveniences and may be hazardous.

BLIZZARD WARNING: Issued when snow and strong winds combine to produce blinding snow (visibilities near zero) white outs, deep snow-drifts, and life-threatening wind chill.

WIND CHILL: What the temperature feels like to the human body based on both air temperature and wind speed.

WIND CHILL ADVISORY: Issued when potentially dangerous wind chill readings (-20 degrees to -34 degrees Fahrenheit) are expected.

WIND CHILL WATCH: Issued when life-threatening wind-chill readings (-35 degrees Fahrenheit or lower) are possible.

WIND CHILL WARNING: Issued when wind chill readings (-35 degrees Fahrenheit or lower) are expected to be life threatening.

How to be prepared at home for Severe Winter Weather.

Have available a battery-powered radio and extra batteries in case of power outages. A NOAA weather radio is recommended. Have extra batteries or power sources available for cell phones, iPads, and tablets in case of power outages.

Store food that can be prepared without an electric or gas stove.

Stock emergency water and cooking supplies.

Have flashlights or battery powered lamps with extra batteries in case of a power outage.

If you have a wood stove or fireplace, store a good supply of dry, seasoned firewood.

WINTER DRIVING

Adults 65 and over are involved in more car accidents per mile driven than any other age group. Winter is an especially important time for senior citizens to be vigilant when driving.

If you are driving this winter, have these 10 things in your vehicle.

1. Cell phone and charger
2. Ice scraper and snow brush
3. Bag of sand or kitty litter
4. Reflective hazard triangle, LED flashlight or

- flares
5. Blankets
6. Snacks and water
7. First aid kit
8. Compass or GPS system
9. Full windshield fluid container
10. Matches in a sealed container

HYPOTHERMIA AND SENIORS

Hypothermia occurs when your body temperature drops to a dangerous level. Older adults are at an increased risk of hypothermia due to changes to your body that occur with aging.

Precautions

1. Stay indoors or do not stay outside very long.
2. Keep indoor temperature at 65 degrees or warmer.
3. Stay dry because wet clothing chills your body more quickly.
4. Dress smart. Protect your lungs from cold air. Layer up! Wearing 2 or 3 thinner layers of loose-fitting clothing is warmer than a single layer of thick clothing.
5. Essential winter wear includes hats, gloves (or preferably mittens), winter coat, boots and a scarf to cover your mouth and nose.

Have a very safe winter!

References: Muskegon County Emergency Services. Health in Aging. National Safety Council

Joe Stapel worked as a police officer for three Departments in Muskegon County for 20 years. He also worked for Meijer Corp. office in Grand Rapids for 28 years -- as a security officer and as the Company's first Safety specialist. Joe also worked for Baker College as the Campus Safety Director with a staff of 37 armed officers and dispatchers.

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Question: How can I get a copy of my *Social Security Statement*?

Answer: You can get your personal *Social Security Statement* online by using your personal *my Social Security* account. If you don't yet have an account, you can easily create one. Your online Statement gives you secure and convenient access to your earnings records. It also shows estimates for retirement, disability, and survivors benefits you and your family may be eligible for.

To set up or use your account to get your online *Social Security Statement*, go to www.socialsecurity.gov/myaccount.

We also mail *Statements* to workers age 60 and over who aren't receiving Social Security benefits and do not yet have a *my Social Security* account. We mail the *Statements* three months prior to your birthday.

Question: My wife and I live in Minnesota, but plan to spend the winter in New Mexico. My wife will turn 62 while we are down south. Can she apply for benefits in New Mexico or do we have to wait until we get back home to apply for retirement at our local Social Security office?

Answer: These days, you don't even have to be near a Social Security office to apply for benefits. Regardless of where you and your wife are living, you can apply for retirement benefits online at www.socialsecurity.gov/applytoretire. It's so easy to do and



BY
VONDA
VANTIL

it can take as little as 15 minutes to complete and submit the application. If she prefers, your wife can file a retirement benefit application at any Social Security office—including the one closest to you in Minnesota, New Mexico, or wherever you happen to be.

Question: How do I know if I meet the eligibility requirements to get Social Security disability benefits?

Answer: To qualify for Social Security disability benefits, you must have worked long enough in jobs covered by Social Security (usually 10 years). You must also have a medical condition that meets Social Security's strict definition of disability. We consider an adult disabled under our rules if he or she has a medical condition, or combination of medical conditions, that are expected to last for at least one year or result in death, and that prevent the performance of any type of work. If you think you may be eligible to receive disability benefits and would like to apply, you can use our online application at www.socialsecurity.gov/applyfordisability.

Read our publication, *You May Be Able To Get Supplemental Security Income (SSI)* at www.socialsecurity.gov/pubs to learn more.

Vonda VanTil is the Public Affairs Specialist for West Michigan. You can write her c/o Social Security Administration, 3045 Knapp NE, Grand Rapids MI 49525 or via email at vonda.vantil@ssa.gov.

Become a Dementia Friend



Understanding how to engage with a person who has dementia will help improve our communities for all people.

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- Understand what it is like to live with the disease
- Receive tips on communicating with people who have dementia
- Turn understanding into practical action

NEXT SESSION: Friday, November 15
9:00 am to 10:00 am
Area Agency on Aging of Western Michigan

Register Online: DFMI8.org

(616) 222-7036



A Dementia Friendly America Initiative

Letting Go...

"How can this be happening? I am the fixer, always the fixer. I am the flag bearer in the family. I am the one who fixes everything!"



BY
ROLINA
VERMEER

And so she is. My dear friend, who has been there for so many of us who are included in her heart as family, watched over and cared for with love and great generosity. My dear friend who fixes and soothes and gives absolution, cannot fix this. She is losing the love of her life after years of fixing and soothing and resurrecting him from the demise that was sure to happen ages ago but is truly happening now. It is devastating.

She is not unaccustomed to the finality of friends and family. As the youngest of nine children, she has buried more than one per-

son's share of loved ones. But this time, her stalwart partner is leaving her. And she is trying to figure out how to let go.

"I'm your morale girl," she croons over his deathbed, harkening back to college days when she was indeed his "morale girl" for the annual tug of war between the freshman and sophomore men.

"I'm your morale girl."

And he, alert and aware, responds simply,

"You always have been."

Her schizophrenic heart is working at being that morale girl, while her fighting, fixing spirit is screaming inside her. Their future together cannot now be amended. Cannot be fixed.

Letting go of those we hold dear is the tortured inevitability so many of us have already experienced and most of us will encounter more than a few times. We know instinctively that life will never be the same, and for this one time we want nothing to change. But change is inevitable, and when inevitability knocks on our door, we are never ready.

Breathe in. Breathe out. Breathe in. Breathe out. Repeat.

"Life will unfold as it should," she always said, comforting me when my chips were down and my own heart was breaking.

There will be a resurrection when this is over. I am sure of it! But for now, I am trying my best to be her morale girl while life as she has known it for 64 years is slipping away and she is trying to accustom herself to letting go.

Rolina Vermeer has won several national awards for her essays celebrating the life and inspiration of her mother.



Family Caregiver University
helping caregivers one class at a time

UPCOMING CLASSES

Wednesday, November 6, 2019:
Holiday Gifts For Caregivers (Joys Of Caregiving)
The best gifts for caregivers are ones that make them feel supported and give them well-deserved time off from caregiving. Come learn about some of those gifts, and how you can make the time for yourself to experience a break even in the midst of caregiving.

Tuesday, December 3, 2019:
Have I Got A Story To Tell You: The Power Of Life Review
Taking comfort in finding meaning in one's life is a common challenge for many people. Meaning is often found through the stories that are hidden between the folds of everyday life. Join Dave Kampfschulte as he relates his experiences interviewing people for the My Life Story program. You will listen to the common life lessons, thoughts and feelings that wind through our collective lives. If you have had a story, you have had a life!

To Register: (616) 222-7032 | registration@aaawm.org

Location: Area Agency on Aging of Western Michigan
3215 Eaglecrest Dr. NE
Grand Rapids, MI 49525



ADVOCATES for Senior Issues

"Information is the currency of democracy"
Thomas Jefferson

Advocates for Senior Issues is a non-partisan group empowering seniors through education and advocacy. The group meets regularly to advocate, learn and socialize.

Upcoming 2020 Meetings:

- January 17
- February 21
- March 20
- April 17
- May 15
- June 21

*No meeting Dec. 2019

Contact us for more information & meeting location:

(616) 222-7015

LaceyC@aaawm.org
or
advocatesforseniorissues.org

Join us!





BY
JERRY
MATTSON

The Christmas Tree Ship

Many folks in this part of the country are familiar with the story of the Christmas Tree Ship. Several books, articles, poems, two musical stage productions and at least one novel based on the story

have been produced.

The tale of this ship began when the three-masted schooner was launched in 1868, as the *Rouse Simmons*. It ended in November of 1912, about 44 years later, when it sank in Lake Michigan, six miles from Point Beach, near the town of Two Rivers, Wisconsin.

Long-time owner Charles H. Hackley of Muskegon used it to haul lumber to several ports on Lake Michigan, mostly Chicago, for about 25 years. He sold the schooner in 1895.

For the next 15 years, the *Simmons* went through several owners. In 1910, Herman Schuenemann bought an interest in the ship and became 1/8 owner in 1912. Captain Charles Nelson of Chicago also owned a 1/8 interest in the ship. The majority owner was Mannes J. Bonner, a businessman who lived in St. James, Michigan, on Beaver Island.

The Schuenemann family had been trading in Christmas trees on Chicago's lakefront since the start of the twentieth century. Herman sold the trees to residents directly at dockside rather than through wholesalers and local grocers. By doing business this way, he was able to sell them for a dollar or less and still make money. He became known as "Captain Santa," and also gave some trees to needy families.

The final trip left Thompson Harbor, just west of Manistique on the northern shore of Lake Michigan, 180 miles directly north of Muskegon. The ship was loaded with



over 5,000 trees, well above the recommended weight limit. Not heeding warnings from several people, Schuenemann headed for Chicago. The *Simmons* fell victim to the "gales of November" and was one of three ships to sink in Lake Michigan that day. A fishing tug also went down near Pentwater and a schooner was lost in the waters of Green Bay. All hands, fewer than 20, were lost when the *Rouse Simmons* sank. (In 1971, it was located at a depth of 172 feet.)

Schuenemann's wife, Barbara, and

their daughters struggled to continue the Christmas Tree Ship tradition on loaned schooners, but later switched to rail transportation for the holiday trees. This annual practice continued until Barbara's death in 1933

A historic marker located on the shore of Lake Michigan just off U. S. 2 in Thompson is dedicated to the memory of the ship and its last voyage.

A musical, *The Christmas Schooner*, premiered in 1995. It has been presented in several theaters in the Midwest and has received many good reviews and several awards.

A new musical, *The Christmas Tree Ship*, will be presented at the Blue Gate Theater in Shipshewana, Indiana, from November 8, 2019 to January 4, 2020. An advertisement for the show states: "Don't miss this epic, heart-warming, inspirational tale, inspired by a true story that will remind us all of the importance of tradition, kindness and the joy of Christmas."

I feel a distant connection to this story, as I grew up about 10 miles from where the ship left port on its final voyage, and I now reside near where Charles Hackley once lived.

Maybe this year, Santa will leave a couple of tickets to the Shipshewana show under our Christmas tree.

Jerry has reached a milestone with this story, as it is number 400 with his by-line. In that total are 34 stories in Senior Perspectives.



Answers for Word Search , Crossword Puzzle and Suduko on Pages 12 & 13

M	E	L	B	A		S	P	E	W		O	P	A	L
U	R	A	L	S		A	R	L	O		H	I	R	E
E	A	T	U	P		M	A	K	E	A	F	A	C	E
S	S	I			W	O	W			S	A	U	N	A
L	E	N	D	A	H	A	N	D		A	N	O	D	E
I	R	A	I	S	E				E	P	S		B	E
					P	O	T	H	O	L	E		M	A
					L	I	F	T	A	F	I	N	G	E
I	N	O	N		E	D	A	S	N	E	R			
D	O	C		P	D	A			I	N	C	A	P	S
S	T	O	L	E		T	A	K	E	A	K	N	E	E
	T	W	E	R	P		D	A	S			E	T	E
B	R	E	A	K	A	L	E	G		A	W	M	A	N
R	U	E	D		G	A	L	A		C	H	I	L	I
R	E	D	S		E	D	E	N		T	O	A	S	T

7	5	9	6	4	1	2	3	8
4	8	1	5	2	3	7	9	6
2	6	3	7	9	8	1	4	5
6	9	2	1	5	7	3	8	4
5	4	7	8	3	2	9	6	1
3	1	8	9	6	4	5	7	2
8	3	4	2	1	9	6	5	7
1	7	5	3	8	6	4	2	9
9	2	6	4	7	5	8	1	3

Boggle Answers:

ELM PALM CALM BALM FILM
HELM REALM QUALM PSALM

Jumble Answers:

LOGIC CONGA DONKEY JUNIOR

ANSWER:

She knew the difference between stratus, cirrus and cumulus and was ON CLOUD NINE



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Area Agency on Aging of Western Michigan (AAAWM) connects adults to quality services that promote and preserve their dignity, independence and well-being, coordinates support and education for caregivers, and leads advocacy efforts on behalf of older adults.

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Services are funded through Michigan Department of Health and Human Services, the Michigan Aging and Adult Services Agency and the Kent County Senior Millage.