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Senior Voice

A publication of Older Persons
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Serving Alaskans 50+ Since 1978

Volume 44, Number 4 April 2021

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2020
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Dunlins and Western Sandpipers gather every spring to eat small invertebrates in the rich mud on the shores of Kachemak Bay. The Kachemak Bay Shorebird Festival, which celebrates the annual migration, returns this year May 5-9 in a hybrid format, combining live and online events. Visit kachemakshorebird.org for the activity schedule. For other upcoming events, see our calendar on page 13.

U.S. Fish and Wildlife Service stock photo



April ‘Age Smart’ forum will be positively theatrical

Senior Voice Staff

AARP Alaska, Older Persons Action Group and the Anchorage Senior Activity Center continues its series of “Age Smart – Let’s Talk” forums on April 13, from 6:30 to 7:30 p.m. Events are currently held virtually on the internet, using Zoom.

The April topic is “Let’s Talk Theater: Bringing Positive Impacts,” with guest panelists David Block, Midnight Sun Theatre owner; Teresa Pond, Cyrano’s Theatre Company Producing Artistic Director, and Schatzie Schaefer, Cyrano’s General Manager.

The “Age Smart – Let’s Talk” series is a monthly forum that focuses on a topic of interest and

importance to Alaskans who want to be thoughtful about how to make good choices as they grow older. The series is developed to provide working age adults with information necessary to plan and fulfill a secure, healthy and satisfying “life After 60” (all ages are welcome). Each month the series highlights a particular topic with a variety of formats, including issue experts, panel discussions, interactive presentations, and plenty of time for questions.

Admission is free and open to everyone. Presentation begins at 6:30. To sign up, go to AARP’s event page at <https://aarp.cvent.com/ASAPR2021>.

Updates on Alaska senior bills and budgets

Senior Voice Staff

Keep track of senior-related bills, budget decisions and other issues by attending the Alaska Commission on Aging Legislative Teleconferences. Hosted by local agencies statewide, and available by toll-free call-in, the teleconferences provide a convenient forum for seniors and advocates across Alaska to share information about issues and specific bills of concern, including Medicaid, state budget and funding, senior assistance, retirement, Pioneer Homes and more.

Zoom conferences are scheduled 9:30 to 11 a.m. every other Thursday and weekly during the last

month of session. The remaining 2021 meeting dates are April 8, 15 and 22.

Draft agendas and a legislative watch list will be available to print the day before each meeting, and a list of bills to be discussed will be available to print from the state Notices website at <https://aws.state.ak.us/OnlinePublicNotices/Notices/Search.aspx>.

The website will also have the Zoom address and phone numbers (for non-computer attendees).

Individuals who require special accommodations to participate should contact Lesley Thompson at 907-465-4793 at least two days prior to the teleconferences.



What’s in, what’s out for seniors in the American Rescue Plan

ANALYSIS

By ALAN M. SCHLEIN

Senior Wire

The American Rescue Plan (ARP) coronavirus stimulus package, which President Joe Biden signed into law in March, was designed to defeat the virus, get vaccines in the arms of Americans, checks in the pockets of those who need it, and jump-start the U.S. economy back to health, including safely re-opening schools.

This bill is so large in scale – \$1.9 trillion – that Republicans in both chambers opposed the legislation unanimously, characterizing it as bloated, crammed with what House Republican leader Kevin McCarthy called a “liberal wish list.”

For a 64-year-old person, who earned \$58,000 last year, according to the Congressional Budget Office, the monthly health insurance payment would drop from \$1,075 to \$412 with the federal government covering the cost difference. A 60-year-old with a \$55,000 income would see premiums drop between 50% to 80%, depending on the plan.

The bloated part is debatable, depending on political perspective, but there is no question the package is a massive, unprecedented effort to shore up the economy. The cost is roughly double the stimulus package that President Barack Obama signed into law during the Great Recession in 2009. This price tag is on top of the \$2.2 trillion and \$900 billion bills, two of the five coronavirus relief bills that Congress has approved since the

pandemic struck a year ago. Those happened with Republican support under then-president Donald Trump. This legislation is far more than just a coronavirus-focused bill. It makes one of the biggest federal efforts in decades to assist lower-and-middle-income families. It includes the most ambitious anti-poverty initiative in a generation, including expanded tax credits over the next year for children, child care and family leave

- some of which Democrats have signaled they’d like to make permanent. It also provides spending to help
 - ▶ renters
 - ▶ money to re-open schools
 - ▶ food assistance programs
 - ▶ help with people’s utility bills
 - ▶ extended boost to unemployment insurance

- ▶ help for farmers of color
 - ▶ help for student borrowers
 - ▶ aid to ailing industries from restaurants to airlines to concert halls.
- The bill also includes relief for states, local and tribal governments, many who weathered tax revenue drops and intense budget tightening.

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Mission statement:

“To work statewide to improve the quality of life for all Alaskans through education, advocacy and collaboration.”

Vision statement:

“Promote choice and well being for seniors through legacy and leadership.”



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3340 Arctic Blvd., #106
Anchorage, Alaska 99503
Phone 907-276-1059
Toll free 800-478-1059
www.opagak.com
www.seniorvoicealaska.com

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How Alaska seniors have fared in the pandemic

By **LAWRENCE D. WEISS**
For Senior Voice

No point being a member of the “Nice Club.” We seniors are important, and there are a lot of us. There are 139,000 seniors (age 60+) in the state. We represent 19% of the total Alaska population. According to the June 2019 issue of Alaska Economic Trends, Alaska seniors are growing faster than in any other state. We are one heck of

a voting bloc, and we contribute billions of dollars to the state’s economy every year. Nevertheless, I resist beating my chest yelling, “We are invincible!” Because we are not. The pandemic hit us pretty hard and laid us low. Things are definitely getting better now, and we’ll get to that, but here is some of the not-so-good news first. The COVID-19 news started out promising. We are 19% of the total population,

but we only got 15% of Alaska’s COVID infections, according to Alaska Dept. of Health and Social Services’ March 19, 2021 report, Demographic Distribution of Cases. We weren’t infected with as much COVID compared to the rest of the state, but when we were, it hit us hard. As of March 19, 2021, 788 seniors had been hospitalized due to COVID. We represented fully 60% of all Alaskans hospitalized

for COVID. In other words, once we came down with COVID, we were about four times more likely to end up in the hospital compared to younger age groups. No question about it – that’s not good. Moving on, I have only one more piece of bad news, then it gets better. COVID killed 265 seniors in Alaska as of March 19. In fact, an astounding 87% of all COVID-related deaths in Alaska were seniors. This parallels the extremely

high mortality of seniors across the nation, but still, we were hit really hard. We are still grieving. But now, the better news. Alaska is reported to have a higher proportion of its residents vaccinated than any other state. Truly a remarkable achievement. As of March 23, 2021, nearly 20% of Alaska’s population have been vaccinated. But here is an extraordinary

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DMV closure proposal meets resistance

By **KEN STEWART**
Senior Voice

The Alaska State Legislature is still working on the next steps for the Department of Administration’s (DOA) proposed closing of six rural DMV locations around the state of Alaska, including Delta Junction, Eagle River, Haines, Valdez, Tok and Homer for the FY2022 budget. On Mar. 18, Rep. Sara Vance, R-Homer, proposed HB 140 with the support of several constituents, including Rep. Mike Cronk, R-Tok, a representative from one of the impacted DMV locations. HB 140 repeals the requirement for Alaskans – specifically for seniors age 69 and older – to appear in person for a driver’s license renewal. Instead, seniors aged 69 and older looking to renew their license without visiting the nearest DMV would obtain an eye exam from their local physician and provide documentation of approval for renewal online or via mail. This would reduce nearly half of the state’s in-person DMV visits, according to a press release from the Alaska

House Republicans. While HB 140 seems to solve a key issue for seniors needing to use in-person DMV services in the case of the closures being implemented, Peter Zuyus, executive director of Friends of Seniors, an advocacy organization that supports senior citizens statewide, points out the hidden problems with HB 140. “In Alaska, Medicare does not pay for eye exams,” said Zuyus. “The Alaskan Department of Labor said \$232 is the average cost for a non-paid eye exam. All of a sudden, the drivers license renewal for a senior goes from \$20 to \$252. That’s a big change in price, so Seniors of Alaska is opposing that.” Prior to the release of HB 140, Rep. Zack Fields, D-Anchorage, introduced HB 137, which proposes that the only entity authorized to close any DMV location, particularly for those in rural areas defined as communities with at least 850 persons, will be the legislature, not the Dept. of Administration Commissioner.

“HB 137 has been implemented to protect access to DMVs for seniors and Alaskans,” said Rep. Fields. “It’s nonsensical to close down DMVs when they generate revenue for the state. Why would you close down a program that makes money?” Currently, Dept. of Administration Commissioner Kelly Tshibaka has

authority to close all six rural DMVs, despite a lack of support from the legislature. At a March 8 Senate Finance Committee meeting, Commissioner Tshibaka offered to the legislature, “The proposals for the DMV are for you all to consider... We’re not going to impose those cuts if you’re not thrilled with them.”

On March 23, the House State Affairs Committee voted to reject the DOA’s proposal to close six rural DMV locations. As Zuyus says, “We have only won a skirmish. The budget still has to go to the House Finance Committee before being consolidated for the House and the

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Send us your letters

Send letters to the editor to Senior Voice, 3340 Arctic Blvd., #106, Anchorage AK 99503. Maximum length is 250 words. Senior Voice reserves the right to edit for content and length. Space may be made available for longer opinion piece essays up to 400 words. Contact the managing editor at editor@seniorvoicealaska.com to discuss this. Copy deadline is the 15th of the month prior to publication.

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To heal, we need to build community



Elders shop at an Asian produce market. Simply being able to participate in activities like this without fear of harm should be a goal of every community. *pixabay*

By **QUYEN DINH**
Diverse Elders Coalition

Over these last few weeks, the Southeast Asian Resource Action Center (SEARAC) has joined Asian Americans across the country in grief and in alarm over the ongoing anti-Asian violence recently culminating in a nationwide series of separate attacks on our elders. Our hearts go out to the victims of these horrific acts and their families.

This surge in anti-Asian hate against our communities has hit close to home, directly impacting our SEARAC family. Our Board Vice Chair, Kathy Duong, recently shared her mother's traumatic experience as one such victim. In describing the support needed for her mother to heal from this incident, Kathy urges, "What my mother needs to heal is a sense of community. Our elders simply have the right to not be afraid living their daily lives: knowing they can go to the grocery store or the bank and not have to plan on whether they are making themselves someone's target."

SEARAC has devoted deep reflection toward the path we must take to support our elders. We've given much thought about our commitment to advocate for policies that dismantle hate, unify our communities, and allow our elders to age with dignity.

And we've taken guidance from SEARAC's core values: that the voices of all ages, genders, and sexual orientations matter; that those most impacted by the issues should be the faces and voices leading our work; and that love and community must be centered in the cultivation of healing.

We join our partners in demanding immediate and long-term investment into our Southeast Asian and Asian American communities across all sectors; and into culturally sensitive, linguistically accessible, community-centered interventions that will actually keep our people safe. Simultaneously, we resist the calls for more aggressive policing and enforcement, which have only created more harm and a culture of distrust for communities of color.

Ultimately, we know there is no easy or short-term solution to the hard work of rebuilding community, security and trust.

But only together, in cross-racial solidarity, can we heal and build communities where there is no place for hate.

Quyen Dinh is the Southeast Asian Resource Action Center Executive Director. This article was originally published on www.searac.org and is part of an ongoing series by the Diverse Elders Coalition, focusing on different senior populations.

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Pfizer vaccine is authorized for ages 16 and up. Moderna and Johnson & Johnson (Janssen) vaccines are authorized for ages 18 and up.

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News update on COVID risks, testing, more

By **JOHN C. SCHIESZER**

For Senior Voice

Smart watch detects COVID infection

A new kind of smart watch may be able to tell if you become infected with COVID-19. University of Miami Miller School of Medicine researchers are testing whether a wristwatch can capture real-time data and alert wearers of subtle physiological changes that may

indicate they have become infected with COVID-19.

The goal of the research is to prevent COVID-19 transmission in healthcare settings by letting wearers know that they may have been infected before clinical signs or symptoms of the virus start, according to Frank Penedo, who is an associate director for cancer survivorship and translational behavioral sciences at Sylvester Comprehensive

Cancer Center and professor of psychology and medicine at the Miller School of Medicine in Miami.

The wearable device employs an algorithm that captures early signs for respiratory infection. “The idea is to be able to pull biometric data such as temperature and heart rate together to see if there is a way to accurately predict seroconversion to COVID-19 prior to the development of clinical

symptoms that otherwise might not be detected,” said Penedo. It is hoped that this type of early warning system could prompt wearers to get a COVID-19 test to confirm results from the device, then quarantine with less risk of spreading the virus.

Asthmatics found to be at no higher risk

Those living with asthma
can take a big sigh of relief.

New research is showing individuals with asthma had a 14% lower risk of getting COVID-19 and were significantly less likely to be hospitalized with the virus. George Institute for Global Health researchers in Australia analyzed data from 57 studies with an overall sample size of 587,280. Almost 350,000 people in the pool had been infected

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Expanded services from Hospice of Anchorage

By BETHANY BURGESS

Hospice of Anchorage

Hospice of Anchorage is pleased to announce an exciting expansion of our Resource Center. All resources will be available to the Anchorage community at no cost. This expansion helps fulfill our mission: to help individuals and families prepare for and live well with serious life-limiting illness, dying and grief. We work toward this mission through running the Resource Center for our community, and through

Starting in April, free music players, robotic pets, and fidget blankets will be available to anyone experiencing dementia in the Anchorage area.

our Lifeways Program that provides free nursing, social work, and volunteer support to anyone with a life-limiting illness.

Equipment and other resources

The Resource Center is here to help you and your loved ones in your time of need and includes the following components: Loan

Closet, Lending Library, Advanced Directives, and Dementia Care. Our Loan Closet is full of durable medical equipment such as wheelchairs, walkers, bedside commodes, canes, etc., as well as incontinence supplies. Our Lending Library has hundreds of books on subjects ranging from dementia to end of life to caregiving to living with

chronic illness and more. The Advanced Directives section has a variety of different health care directive and power of attorney legal forms that you may need in planning for the aging process and end of life.

Help with dementia care, nutrition

Our Dementia Care Section offerings have expanded dramatically. Starting in April, free music players, robotic pets, and fidget blankets will be available to anyone experiencing

dementia in the Anchorage area. To purchase these items generally costs anywhere from \$50 to \$150 in a store, but through a generous grant from the State of Alaska we are able to provide them without any cost to you. Every journey with dementia is different, and rather than continue to spend money on things that may or may not help, call us today and we can set you up with these items to see if they benefit you or a loved *one*.

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Your home health care benefits with Medicare

By COLTON T. PERCY

For Senior Voice

What is home health care? What services are included in home health care? Who is eligible for these services? These are some common questions that people have about their Medicare benefits.

Home health care includes a wide range of health and social services delivered in your home to treat illness or injury. Medicare covers skilled nursing services, such as injections and catheter changes. It covers home health aides, such as to help with bathing and dressing, and medical social services, such as counseling. It also covers skilled therapy services, such as physical, speech and occupational therapy. Finally, Medicare's home health benefit covers certain medical

supplies, such as wound dressings and catheters as well as certain durable medical equipment, like a wheelchair or walker.

You must first be considered homebound to be eligible for home health care benefits. This means it is extremely difficult for you to leave your home and require the assistance of medical equipment or other people to do so. Second, you must need skilled nursing or therapy services. Third, you must have a face-to-face meeting with a doctor within the 90 days before or the 30 days after you begin receiving care at home. This meeting can be conducted via telehealth. Fourth, your doctor must sign for and approve your plan of care. Last, you must receive care from a Medicare-certified home health

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At-home tips to make your hearing aids last longer



By **DONNA R. DEMARCO**

Accurate Hearing Systems

Part one of two.

While there are certain maintenance items that are recommended only for the manufacturer or a hearing care professional, there are many other preventative measures that the hearing aid wearer, or the caretaker in some instances, can complete regularly to ensure that the hearing aid is well maintained and functioning at its full capacity.

Ear wax. The most common culprit for hearing aid repair is earwax. Daily cleaning of the aid(s) is recommended at home. In order to prevent wax from clogging critical compo-

nents of the hearing device, such as the microphones or receivers, it is important for the wearer to wipe off the hearing aid each morning with a cloth or tissue. Tissues should not be used if they contain aloe or lotions. Cleaning cloths should be cleaned regularly in order to avoid re-depositing wax or other debris onto the aid. While it is instinctive to clean the devices at night after a day's use, it is best to wipe the aids down in the morning when the wax has had the opportunity to dry and will remove with more ease. It is also important to be careful to not wipe debris onto the microphone ports from another part of the aid.

Next month we will talk more about what you can do to prevent damage to your hearing aids.

For more information and to schedule a free hearing test, call 907-644-6004.

Donna R DeMarco, AAS, BC-HIS, Tinnitus Care Provider, International Hearing Society Certified.



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Spring Health Fair opportunities

By **SHARON PHILLIPS**

Alaska Health Fair, Inc.

April is a busy month for all Alaskans and the wonderful prospect of seeing more friends and family is right around the corner.

Alaska Health Fair's busy office and community draw schedule is updated occasionally, so check our website for the most recent event listings.

We continue to follow our appointment model, which works extremely well, and our clients are pleased with the services.

All dates are posted on our website, under specific Alaska regions, at www.alaskahealthfair.org

Our Anchorage and Fairbanks offices hold blood draws in their office each month by appointment only.

To make an appointment, go to the website and find the program that serves your region; pick the city

and date you're interested in, then select the "Make Appointment" button on that line.

The system will ask you a few questions and walk you through scheduling your appointment. You'll receive confirmation and reminder emails/texts from notifications@calendly.com (our scheduling system). If you don't see them, check your junk mail.

The ability to change or cancel your appointment can be found at the bottom line of your original confirmation email.

If you have problems, give our local office a call for assistance:

Anchorage, 278-0234; Fairbanks, 374-6853 and Juneau, 723-5100.

We have a special April event being held in the Soldotna community:

Peninsula Mall, Soldotna April 23, from 4 to 6 p.m.

This special "late draw" offers the ability to eat an early breakfast and skip lunch, then receive services late.

Peninsula Mall, Soldotna April 24, from 9 a.m. to 1 p.m. Our traditional "morning draw" offers the ability to scoot in early and then go enjoy a good lunch.

Make your appointment for either day on the www.alaskahealthfair.org website.

If you are a community or worksite interested in hosting a "by appointment only" venue, just give us a call, as we would love to bring our popular services to people that matter most in your world.

Alaska Health Fair blood tests start at just \$20 and are affordable, confidential and comprehensive.

Sharon Phillips is the Tanana Valley/Northern Region program director for Alaska Health Fair, Inc.

Medicare: Home health benefits

continued from page 5

agency.

The definition of home-bound has been broadened during the coronavirus public health emergency to include being certified by your physician that you cannot leave your home because you are at risk of medical complications if you go outside, or if you have a suspected or confirmed case of COVID-19.

Medicare has also expanded telehealth services during the coronavirus public health emergency. A telehealth service is a full visit with a provider using

technology that allows for both audio and video communication. Depending on the situation, you might access telehealth from your home or at a medical facility. Original Medicare usually only covers telehealth in limited situations, like if you require telehealth services due to an acute stroke or behavioral health conditions, or if you live in a rural area.

There are limits to the home health care benefit. Home health care is limited to no more than eight hours per day and usually 28 hours per week. In certain cases, you could receive up to 35 hours per week if needed.

You can continue to receive home health care for as long as you qualify, but it must be approved by your doctor every 60 days. Contact the Medicare Information Office for individualized counseling and assistance about your home health coverage.

Colton T. Percy is a Certified Medicare Counselor and the Volunteer Coordinator for the Alaska Medicare Information Office. If you have questions about Medicare or are interested in volunteering and helping your fellow Alaskans navigate Medicare, please call 1-800-478-6065 or 907-269-3680.

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MLS

Hospital visits: Supporting a person living with dementia

By **LINDA SHEPARD**
For Senior Voice

As the old saying goes, “It’s not a matter of if, but when.” Unfortunately, for older adults and people living with dementia, a hospitalization is more often a matter of when. Do you have an emergency hospital plan in place? Being prepared can make the experience less overwhelming.

Being in the hospital is stressful for most but especially for people living with dementia, who may exhibit anxiety, agitation, aggression and resistance to care. Medical tests, procedures and treatments can be overwhelming and frightening. A person with dementia may be unable to communicate concerns or feelings of pain. COVID-19 has made caring for your loved one in a hospital setting especially challenging when visits or staying by their bedside is limited or prohibited. All of these scenarios can increase a person’s stress level and confusion, making it very difficult to function as usual.

Planning ahead and having a thoughtful care plan prepared in case of a hospital stay can provide the best outcome for a person with a chronic condition or a person with dementia. Following are some helpful suggestions to assist you in being prepared for a hospitalization.

Prepare instructions for staff. Provide a list of the person’s current health care providers with phone numbers and current medical conditions. Also, provide a complete medication list which includes over-the-counter vitamins and supplements. A list of emergency contacts with relationship and phone numbers is important information to provide. Be sure to list if your loved one wears glasses, dentures, hearing aids, or uses a CPAP machine.

Favorite things and comfort items. What does a typical day look like for your loved one? Include their daily schedule, sleep

patterns and favorite activities. Be prepared to bring some familiar objects for your person to hold or look at. Include items that bring comfort or a diversion such as a favorite snack, a small photo album, music player with earphones, or deck of cards. It will be helpful if you can complete the menu requests, and let the staff know about food and fluid likes or dislikes.

Strategies for communication. Be aware that hospital staff want to provide the best possible care; however, many do not have the specialized training needed to care for people living with dementia. Share the best way to approach your person and give them tips on how to communicate effectively. For example, they should always approach the person from the front, getting within the person’s visual range, identify themselves, and call the person by name. Encourage them to connect by smiling and extending their hand to connect in a positive way. Ask staff to limit quizzing the person or asking, “Do you remember?”, which can trigger agitation and confusion. Encourage staff to speak slowly, especially when giving directions and allow extra time for the person to respond.

Be an advocate. You will need to advocate for your partner; they cannot do it for themselves. Hospital staff may not recognize if your loved one is in pain, especially if your partner has difficulty communicating verbally. You’ll need to advocate for their care when it comes to making sure his or her pain is evaluated and addressed. Some expressions of pain can be confused with anxiety or agitation such as pacing, wandering, clenching teeth or fists, or hitting. Other signs to report can include moaning, grimacing or more labored breathing.

In addition, immediately notify the nurse if your care partner has a sudden change in thinking or ability. Medical problems



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New insights on golf, plant protein and joint replacements

By JOHN SCHIESZER

Medical Minutes

Boosting veggie intake may benefit the brain

What you eat on a daily basis may be very important in terms of preventing dementia and Mild Cognitive Impairment (MCI), a condition that often precedes full-blown dementia. A new study shows that there may be hidden brain benefits from eating more vegetables. Postmenopausal women who ate high levels of plant protein had lower risks of premature death, cardiovascular disease and dementia-related death compared with women who ate less plant proteins, according to research published in the Journal of the American Heart Association.

Researchers analyzed data from more than 100,000 postmenopausal women ages 50 to 79 who participated in the national Women's Health Initiative study between 1993 and 1998. All the women were followed for 20 years. At the time they enrolled in the study, participants completed questionnaires about their diet detailing how often they ate eggs, dairy, poultry, red meat, fish/shellfish and plant proteins such as tofu, nuts, beans and peas. During the study period, a total of 25,976 deaths occurred — 6,993



deaths from cardiovascular disease; 7,516 deaths from cancer; and 2,734 deaths from dementia.

Compared to postmenopausal women who had the least amount of plant protein intake, those with the highest amount of plant protein intake had a 9% lower risk of death from all causes, a 12% lower risk of death from cardiovascular disease, and a 21% lower risk of dementia-related death. Higher consumption of processed red meat was associated with a 20% higher risk of dying from dementia.

Playing golf may benefit older adults with Parkinson's disease

When it comes to one specific exercise that does the most good for adults with Parkinson's disease,

golf may hit above par. A new study is suggesting that golf is even better than tai chi for improving balance and mobility.

"We know that people with Parkinson's disease benefit from exercise, but not enough people with the disease get enough exercise as therapy," said study author Dr. Anne-Marie A. Wills, who is with Massachusetts General Hospital, Boston, Massachusetts. "Golf is popular, the most popular sport for people over the age of 55, which might encourage people to try it and stick with it."

The Boston researchers compared golf to tai chi because tai chi is the gold standard for balance and preventing falls in people with Parkinson's. The study involved 20 adults with moderate Parkinson's disease. Everyone was offered 10 weeks of two one-hour group classes per week of golf or tai chi at no cost. Eight people were randomly assigned to practice their golf swing at a driving range while 12 did tai chi. At the start and again at the end

of the study, researchers evaluated everyone with tests, including one that measures balance, walking ability, and risk of falling in older adults. For the test, a person is timed while getting up from a chair, walking 10 feet and then returning to the chair and sitting down.

The golfers were 0.96 seconds faster on the test at the end of the study, while those who did tai chi were 0.33 seconds slower. "While the results for golf might be surprising, it's important to remember that the number of participants in our study was small, and the period over which we studied them was relatively short," Dr. Wills said. "More research in larger groups of people over longer periods of time is needed."

Researchers said overall satisfaction with their sport was similar in both groups, however 86% of golfers compared to 33% of tai chi participants were "definitely" likely to continue the activity. "Our finding that golfers were much more likely to continue with their sport is exciting because it

doesn't matter how beneficial an exercise is on paper if you people don't actually do it," Dr. Wills said.

Age matters when it comes to outpatient hip or knee replacements

Having hip or knee replacement surgery and going home from the hospital the same day is becoming more common, but it is not for all patients, according to Dr. Geoffrey Westrich, who is with the Adult Reconstruction and Joint Replacement Service at Hospital for Special Surgery (HSS) in England. Same-day joint replacement is generally performed early in the morning, and the patient goes home at the end of the day.

"Five years ago, outpatient joint replacement was almost unthinkable. But advances in technology, surgical technique and pain management over the past few years have made same-day hip or knee replacement a viable option for patients

next page please

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Insights: Golf, joints

from page 8

who meet certain criteria,” said Dr. Westrich, who is an orthopedic surgeon. “During the pandemic, many people find this appealing since they leave the hospital more quickly and can spend their first night after surgery in the comfort of their own home.”

Much smaller incisions and robotic-assisted joint replacement, which allows for ultraprecise positioning of the implant, benefit patients who wish to go home the day of surgery. A study in 2018 by researchers in the United Kingdom found that robotic-assisted total knee replacement was associated with decreased pain after surgery, improved early functional recovery and a shorter hospital stay.

A technique known as multimodal pain management has resulted in better pain control after surgery, another advantage for patients wishing to leave the hospital the same day, according to Dr. Westrich. The technique uses various medications that target multiple pain pathways and generally decrease the need for opioid medications.

Dr. Westrich said adults interested in same-day surgery need to be highly motivated and have a positive attitude. An individual who is very anxious about surgery or experiencing a great deal of stress about recovery may not be a good candidate for same-day joint replacement. Those who have heart or lung issues, diabetes, or sleep apnea do not qualify for outpatient joint replacement.

Adults in their 40s or 50s and 60s tend to be better candidates. Those in their early 70s in very good general health may also be candidates.

“Ultimately, outpatient joint replacement surgery is a choice that patients and their orthopedic surgeon make together after weighing the pros and cons,” Dr. Westrich said. “Even if someone qualifies, it’s an option, not a requirement. Everyone is different and should make a decision based on what makes them feel most comfortable.”

John Schieszer is an award-winning national journalist and radio and podcast broadcaster of The Medical Minute. He can be reached at medicalminutes@gmail.com.

Hospital visits: Dementia

continued from page 7

such as fever, infection, medication side effects, pain and dehydration can cause delirium on top of their dementia, which is an extreme state of confusion and can cause serious complications.

Finally, be sure all the hospital staff know that your loved one has dementia and offer different techniques to keep them calm if they become agitated, such as using soothing music or practicing redirection.

Hospitalizations during COVID. If your loved one has advanced dementia and needs to be hospitalized, the Centers for Disease Control and Prevention recommends that hospital staff know that your in-person assistance may be required to communicate important health information and emergency

support. Be prepared to use personal protective measures if you are in the same room with your loved one. Check with the hospital on their visitation risk level system. These risk levels are based on COVID activity in the community and can change daily.

We don’t know when a hospitalization may happen, but thinking ahead and making a plan will help ease the way for you and your loved one when it does happen. We all want the best possible hospital experience and outcome for the person living with dementia -- and for you too.

Linda Shepard is a registered nurse and an Education Specialist with Alzheimer’s Resource of Alaska. Learn more about Alzheimer’s disease and related dementia by visiting www.alzaska.org or call 800-478-1080.



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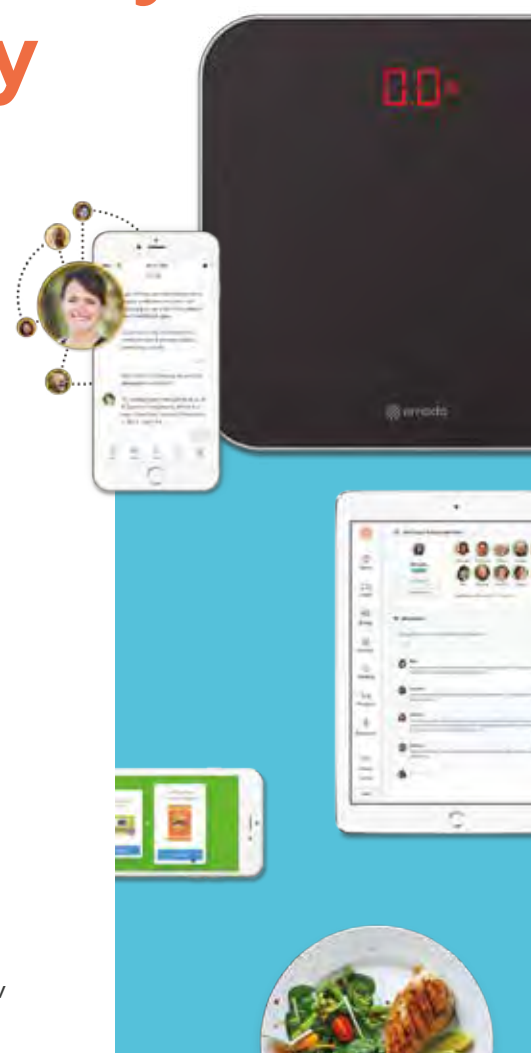
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Caregiving for a loved one needs planning, teamwork

By KAREN CASANOVAS

For Senior Voice

Question: My mom received both dosages of the SARS-CoV-2 vaccination and I recently traveled home to visit her. While there I noticed she was having trouble doing tasks she used to do with ease. Living so far away, how can I support her growing needs, yet be respectful of still wanting her independence?

Answer: Seeing a parent getting older can be a new and emotional experience and understanding that our

population is generally living longer puts into sharp focus the emerging needs of older adults. By 2030 seventy million Americans will be over the age of 65, according to the U.S. Census Bureau.

The first step is for your mother and family members to have a group discussion about preferences for her care. It's better to understand and contemplate your mom's choices before a crisis occurs. Fears of losing independence or control will generally stir up resistance. Holding an exchange now of options surrounding

health, finances, driving capabilities or end-of-life care are uncomfortable, but best talked about in a fair manner by both parent and adult children.

Issues considered without urgency before a crisis erupts set the foundation for a plan when action steps are required. Does your mother want to stay in her home as she ages? Now that you see she needs help, how does your mom feel about that? Would she still want to stay put or make a move to a facility that could provide more assistance? Has she planned ahead for these

expenditures?

Research the options in her community such as neighbors checking in on her, in-home care, adult day programs or resources through the National Association of Area Agencies on Aging. If her living space is still safe to remain in, there are home modifications and funding opportunities available to make her place of residence better suited to meet the changing needs in preventing falls, sustaining independence and support caregiving.

By providing collaborative care for your mother,

you can work toward helping her live with dignity and choice for as long as possible. With all of us joining together, we can provide the health, wellness, physical and social support needed for older Americans to live a high quality of life as they age.

Karen Casanovas is a Professional Certified Coach who oversees a private practice specializing in aging and health. She's a Fellow with the Institute of Coaching and former member of the Anchorage Senior Citizens Advisory Commission. Contact her at info@karencasanovas.com.

Weatherization, accessibility program for Anchorage

Rural CAP

The Rural Alaska Community Action Program, Inc. (RurAL CAP), through a grant provided by the Municipality of Anchorage, is pleased to announce our expanded 2021 Weatherization, Accessibility, Repair and Modifications (WARM) Home Program.

The WARM Home program consists of three categories that emphasize health, safety and indoor air quality: Weatherization, mobile home repair and accessibility upgrades. Each service is available to eligible homes in Anchorage, Girdwood, Chugiak

The WARM Home program consists of three categories that emphasize health, safety and indoor air quality: Weatherization, mobile home repair and accessibility upgrades.

and Eagle River.

WARM Home Program staff assess each eligible home before determining what improvements are possible. Staff regularly provide services that include sealing windows, adding insulation, and improving the efficiency of heating systems. They also provide client education and resources that support the ongoing maintenance and efficiency of homes,

increasing home affordability through lower utility costs and home livability.

Benefits of the improvements can include increased home energy efficiency, reduced maintenance

costs, prolonged safe aging in place, and extended useful life on mobile and single-family homes. As our community continues to address COVID-19, improvements to indoor air quality also support health and safety.

Visit <https://bit.ly/3m6SDXb> to verify your eligibility and apply for

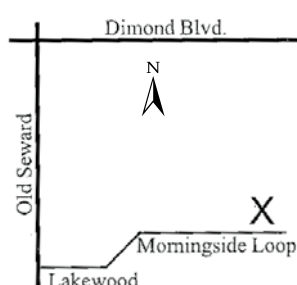
the WARM Home Program today.

RurAL CAP is a private, statewide, 501(c)(3) non-profit organization with a mission to empower low-income Alaskans through advocacy, education, affordable housing and direct services that respect Alaskan's unique values and cultures. More information is at www.ruralcap.org.

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All in the name of Grandma



Maraley McMichael with grandson, Harlen, during his visit to Alaska in August 2007.

Courtesy Maraley McMichael

By MARALEY MCMICHAEL
Senior Voice Correspondent

“So, Mom, what do you want to be called when you become a grandma?” my daughter, Erin, asked in the weeks after we learned she was expecting our first grandchild. This question set off much discussion and research that would continue all through her pregnancy. I could never have guessed my name would become Grandma Aye-Yi. Short for Aye-Yi-Yi!

Our two children were very fortunate to have two grandpas and two grandmas as they grew up. My husband, Gary, and I thought nothing of calling both sets of our parents “Grandpa and Grandma,” but it wasn’t long before we had to add the last names of either Clayton or McMichael to differentiate who we were referring to. As I thought about becoming a grandma, I knew I wanted a name unique to me, but that also wasn’t a mouthful. The only name I could rule out was “Granny,” because my soon-to-be-born grandson’s other grandmother had already claimed that moniker.

I even consulted our son and his wife, as I hoped to have just one name that would work for both families. My daughter-in-law did her own research and emailed me a list of possible

names with their explanation of meaning. She also said that her mother would be called “Mamacita,” so that crossed out another option.

In the meantime, I read a couple of articles by other baby boomers turned grandmothers, about their quest for a special grandmother name. Nana, Nono, Meema, Meme, MiMi, Bubbe – so many possibilities, but none seemed just right. I even inquired about the term for grandmother in the Ahtna Den’ae traditional language, since I grew up in Glennallen.

There seemed to be no problem as far as Gary was concerned. He was PaPa to our kids growing up, which changed to Pop as they got older. Pop, Pa, or Grandpa were all fine with him. Our grandson’s other Grandpa was already PawPaw.

After Harlen was born, during one last discussion with Erin, it was decided that I would be just plain Grandma! So it was settled...Grandma and Grandpa, but at least we wouldn’t have to add our last name for clarification.

All that fuss, and of course Harlen didn’t call us anything for the first year. We realized we’d have to be patient, knowing the “g” sound is one of the last sounds a child learns to say.

When Harlen was 17 months old, he and his

family traveled from Colorado to Alaska for a two week vacation. We so enjoyed our time with him and we communicated well, but he didn’t yet call us Grandma and Grandpa. He spoke a few words, such

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Rambles

News from the Grapevine

The April 9 deadline is coming right up for nominations for the **Ron Hammett Award** for community service. The annual award recognizes an outstanding individual whose service, dedication and leadership have had a significant impact on the quality of life for seniors in the **Anchorage** area. Nominees must be an Anchorage resident and nominations may be made by an individual or organization and should include both the achievements and background of the nominee, as well as explaining the reasons for the nomination. This year’s winner will be celebrated at a virtual ceremony to be held in May. Applications and other information are available at the **Anchorage Municipal Senior Citizens Advisory Commission** website. Go to <https://bit.ly/3wgkvwW> and look on the right-side panel for the criteria and nomination forms ... Speaking of honors for service, **Homer** resident **Nona Safra** was recognized in March by the Office of the Borough Mayor for her work on behalf of the community, particularly seniors. Nona currently serves on the board of the **Alaska Commission on Aging**, has volunteered for a number of years for the **Anchor Point VFW Post 10221 Auxiliary**, and served on the **Anchor Point Senior Center** board of directors. After moving to Homer, she joined the **American Legion** Post 16 Auxiliary, according to an article in the **Homer News**. During a presentation at a March 8 Homer City Council meeting, Nona spoke about working with so many good people over the years, and attributed much of her civic inspiration to meeting **First Lady Eleanor Roosevelt** when she was four years old. Roosevelt became one of her

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Rambles

News from the Grapevine

continued from page 11

first “sheros,” Nona said. “From that moment on, I knew I wanted to be like her and I wanted to grow up and make a difference.” Congratulations, and thank you, Nona ... After seven years leading **Wasilla Area Seniors, Inc.** as CEO, **Chuck Foster** is retiring. In the organization’s March newsletter, Chuck writes: “I learned early that senior services in the **Mat-Su** is a team sport. No one – not WASI, not **Palmer**, not any organization – can meet the need. Some of my deepest disappointments were the times our partners fell through. Some of my greatest joys were times when they pulled us out of the fire (so to speak).” While he says he’ll miss the job, he will stay involved. “I’m a lifetime member and I have no intention of sailing away to the South Seas. I’m sure to find a place to volunteer, where I can still do some good around here. Those days will be just great!” Thanks for everything, Chuck. Great days are made by great people ... **Santa’s Senior Center** in **North Pole** plans to offer to-go **steak dinners** on Friday, April 30. A minimum of 10 orders are needed to make it happen; suggested donation is \$20, and the meal pickup time will be 3 to 4 p.m. on that day. Sound tasty? Call and put in your order, 488-4663 ... **Valdez Senior Center’s annual membership meeting** will be held this year via **teleconference** call on April 8, at 1:30 p.m. The annual report will be provided, along with board election results and other business. Call the center for the dial-in number and code, 835-5032.

Rambles is compiled from senior center newsletters, websites and reader tips from around the state. Email your Rambles items to editor@seniorvoicealaska.com.

Grandma: Settling on a name

continued from page 11

as “hi,” but was still not talking much.

One morning during this visit, while we were all at my dad’s cabin on Kenai Lake, I was cooking a big breakfast of potatoes, eggs and bacon in the kitchen, while Harlen was out in the living room with everyone else having a pre breakfast snack in his highchair. I didn’t want to miss all the fun, so I joined the party in the living room. All of the sudden I remembered the breakfast and ran back to the kitchen. As I turned the potatoes and onions over and saw they were quite dark, I exclaimed, “Aye Yi-Yi! I’m burning the potatoes!” I was surprised and delighted to hear a little echo of “Aye Yi-Yi” coming from the living room. Harlen imitated my words and tone of voice perfectly.

A month later, they were back home in Colorado and Gary and I were in Nome for the “Pioneers of Alaska” annual convention. Our cell phone rang as my dad, Gary, and I sat in a local

restaurant eating lunch. Erin said, “Mom, Harlen was thinking about you, so I decided to call so he could hear your voice.” I replied, “Great, wonderful, but how could you possibly know he was thinking about me in particular?” “Well,” she said, “he was sitting in the living room and he said “Aye Yi-Yi”. I asked him if he was thinking about Grandma and he nodded his head.”

After that, when I called, Erin would ask Harlen if he wanted to talk to Grandma Aye Yi-Yi. Then it was shortened to Aye-Yi. We saw him in person at 20 months of age. “Hi” had become “Hallo” with the emphasis on the first syllable and he greeted us with “Hallo Aye-Yi” and “Hallo Pa,” repeating that over and over because he was so excited to see us.

Gary and I continued our “snowbird” adventures that winter. One particular phone call is permanently etched in my mind. Harlen was at home in Colorado

and we were in Texas. At the end of our conversation, Harlen said in his very slow and deliberate way, “I love you, Grandma Aye-Yi.” Who could ask for anything more? Even if my name was connected to burnt potatoes and onions.

By the time Harlen turned two, we had definitely become Grandma Aye-Yi and Grandpa. I wasn’t sure I wanted to continue to encourage that. I tried unsuccessfully to picture Harlen as a teenager, introducing me to a friend saying, “This is Grandma Aye-Yi.” But what the heck, I’d wanted a unique name. It stuck for quite a while, but there was no need to worry. Harlen recently turned 15 and he has called me just plain “Grandma” for years now. Which of course is fine. Who cares, as long as we communicate?

Maraley McMichael is a lifelong Alaskan now residing in Palmer. Email her at maraleymcmichael@gmail.com.



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Find the link to the concert (available April 16) on Facebook, Instagram and our website. Subscribe to our YouTube channel to receive notification of the event.

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Alaska Chamber Singers is funded, in part, by the Anchorage Assembly, the Atwood Foundation, the Carr Foundation, the Municipality of Anchorage, the Murdock Charitable Trust, the Rasmuson Foundation, and through the generosity of many individuals and corporate community leaders.



Input wanted on Mat-Su health master plan

Senior Voice Staff

The Mat-Su Health Foundation is working to develop a vibrant, mixed-use Community Health Campus on land it owns surrounding Mat-Su Regional Medical Center and is seeking input from the public about the project. Mat-Su residents are encouraged to complete the Mat-Su Community Health Campus Project Survey now through April 4, 2021, at www.matsucommunity-healthcampus.org. Surveys will be accepted after that date as well.

Mat-Su Health Foundation contracted with HDR, Inc. to create a master plan that will help provide a long-range vision for how the community health campus can best be designed to serve as a center for health and wellness. The plan will

include a long-range vision for the campus that:

- ▶ Develops a vibrant center for health and wellness in the Mat-Su;
- ▶ Fosters growth of a community health-based campus;
- ▶ Considers long-range community health campus expansion, including mobility and parking needs, future health services, and complementary services; and
- ▶ Understands community needs and values.

Written project comments and requests to receive a hard-copy survey can be submitted to the project team via email to info@matsucommunityhealthcampus.org or by mail to MSHF Mat-Su Community Health Campus Master Plan, 777 N Crusey Street, Ste. A201, Wasilla, AK 99654.

We've run out

Older Persons Action Group has no more copies of our "Directory for Older Alaskans" available.

Stay tuned for updates on a new edition.

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Calendar of Events

Editor's note: Due to COVID-19 safety concerns and restrictions, all events are subject to change or cancellation. Always confirm before attending.

April 3: Sitka "Chuna McIntyre: Share Your Culture/Share Your Research," via Zoom, 2 p.m. Join on Zoom for a talk by Chuna McIntyre (Yup'ik) entitled "Reserved & Quiet Splendor: Central Yup'ik clothing and Ceremonial Accouterments". Visit <https://friendsofsjm.com/event/> for Zoom login information.

April 5-11: Statewide 46th Alaska Folk Festival Online. Featuring workshops, guest artists, main concerts, and quarantine happy hours—all offered online via Zoom, Facebook and YouTube. All concerts will be broadcast on the radio at KRNN, 102.7 FM. Visit www.akfolkfest.org for a full schedule of events and virtual locations.

April 7: Ninilchik Bingo at Ninilchik Senior Center, 1:15 p.m. After a year hiatus, bingo is back. Bring your mask and prepare to social distance. 907-567-3988

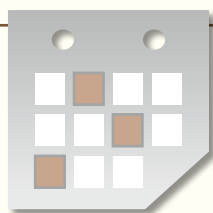
April 8: Anchorage Mindfulness-Based Stress Reduction at the U.S. Department of Veterans Affairs, Domiciliary Care Program at 3001 C St. Learn to manage chronic conditions and life issues. 8-week group sessions every Thursday in the atrium. Contact Dr. Jayson Hsieh for enrollment, 907-273-4020.

April 17 & 18: Statewide "Community | Media | Possibility: Statewide Virtual Conversation," 1 to 4 p.m. both days. The Alaska Humanities Forum hosts to ask the question: What's possible when community and media connect? Bring your questions and ideas about the kind of relationship you want between the community and media. Register for the online event at https://www.akhf.org/community_media_possibility.

April 17: Homer 27th Annual Homer Winter King Salmon Tournament at the Homer Spit. After missing last year, Alaska's premier fishing tournament returns for 2021. Organizers want this to be a fun and safe environment for everyone, so contact them if you have any questions, 907-235-7740 or info@homer.alaska.org.

April 18-May 8: Wrangell Stikine River Birding Festival at the Nolan Center. Upcoming events will be spaced out over several weekends and include virtual talks, physically distanced outdoor events, boat trips, movies and contests. Check out <https://www.wrangell.com/birdingfestival/birding-festival-2021> for an updated schedule of events.

April 26: Fairbanks Grief Support for Women at Foundational Fairbanks Memorial Hospital Hospice, noon to 1:30 p.m. A safe and caring place where women with loss related to the death of a loved one can come together to share information, experiences and open hearts. Groups are on a drop-in basis. Please arrive 10 minutes early to your first meeting to fill out paperwork. Offered every second and fourth Monday of each month. 907-458-3095



Send us your calendar items

Send to: Senior Voice, 3340 Arctic Blvd.,
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Deadline for May edition is April 15.

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World War 2 brings military to Anchorage

By LAUREL DOWNING
BILL

Senior Voice
Correspondent

Six years before World War II broke out, Anthony J. Dimond, Alaska’s delegate to Congress, started asking for military planes, airfields, army garrisons and a highway to link the Lower 48 to Alaska.

When the war actually began in September 1939, rumors ran rampant around Anchorage that his pleas had been heard and military bases soon would be built to protect the northern front.

Congress finally appropriated funds for Alaska in 1940, and the military started making plans for the construction of navy and army bases, as well as a fort, ranging from Anchorage to Sitka and Kodiak to Unalaska. On June 27, Anchorage’s 4,000 residents greeted the first troops.

Under the command of Maj. B.B. Talley, engineers started construction of Fort Richardson, in honor of Brig. Gen. Wilds P. Richardson, who’d served as the first president of the Alaska Board of Road Commissioners from 1905 to 1917. The engineers also worked on an airfield, named to honor Capt. Hugh M. Elmendorf who’d died in an aircraft accident at Wright Field in Ohio in 1933.

Fort Richardson later became a U.S. Air Force base and took the name Elmendorf. The U.S. Army built a new Fort Richardson seven miles away, near the foothills of the Chugach Mountains.

Brig. Gen. Simon Bolivar Buckner arrived in Anchorage in July 1940 and took charge of all military operations in the territory.

With the building of the military facilities stretching out over several years, serious housing shortages developed as the city’s population swelled to about 9,000 by mid-summer 1941.

However, when the Japanese attacked Pearl Harbor on Dec. 7, 1941, the population dropped as the government evacuated Army families. By April 1942, Anchorage had an estimated 3,200 men, 1,500 women and 1,300 children under the age of 18. Only about 75 of the 6,000 who remained in the city were Alaska Native.

Irene E. Ryan, who arrived in Alaska in 1932, recounted what it was like living through those tumultuous times in “Anchorage: A Pictorial History,” by Claus M. Naske and Ludwig J. Rowinski:



World War II soldiers perform exercises in front of their tents at Fort Richardson in June 1940.

Photo courtesy University of Alaska Anchorage, UAA-hmc-0396-14f-192

“...after the outbreak of the war, a blackout went into effect. Cars had been dug. So whenever the sirens sounded, citizens were to

drove with parking lights only, and on the base all windows were painted black with only a small slit in the center for daylight. In the face of a shortage of black paint, residents improvised and dissolved phonograph records in acetone and used the result as a paint substitute.

“As a precaution against possible Japanese air attacks, trenches

vacate their homes and seek shelter in these trenches.”

After the armed forces secured the Aleutians in May 1943, the military presence in Alaska went from 152,000 members to 19,000 by 1946.

This column features tidbits found among the writings of the late Alaska historian, Phyllis Downing Carlson. Her niece, Laurel Downing Bill, has turned many of Carlson’s stories – as well as stories from her own research – into a series of books titled “Aunt Phil’s Trunk.” Volumes One through Five, which won the 2016 gold medal for best nonfiction series from Literary Classics International and voted Best of Anchorage 2020, are available at bookstores and gift shops throughout Alaska, as well as online at www.auntphilstrunk.com and Amazon.com.

The World of Animals

Across

- 1 Standard
- 4 Dwindle
- 7 Mama bear, in Madrid
- 10 Tax prep. expert
- 13 Embitterment
- 14 Extinct flightless bird
- 15 Bounced check inits.
- 16 “2001” mainframe
- 17 Lizard look-a-likes
- 20 Nouvelle Caledonie, e.g.
- 21 Stomach
- 22 Prefix with god
- 23 Primatologist’s study
- 24 Aberdeen pooch
- 26 Cow locale
- 28 Anatomical pouch
- 29 Rock hopper
- 32 Stationer’s stock
- 36 Mongolian desert
- 38 Tot watcher
- 39 Native Alaskan
- 41 Salad topper
- 42 Boozer
- 43 Romeo, to Juliet
- 44 Tugboat sound
- 46 Adherents (Suffix)
- 47 Creepy crawlers
- 49 Poetic contraction
- 51 ___-majesté
- 52 Small long-winged songbird
- 56 Roman god of war
- 58 Ham’s father
- 60 Propelled a boat
- 62 ___ vapeur (steamed)
- 63 Asian big cat
- 65 Mudder’s fodder
- 66 Ten-percenter (Abbr.)
- 67 ___-di-dah

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- 68 Oklahoma county seat
- 69 Helpful connections
- 70 “The Matrix” hero
- 71 Mag. staffers
- 72 Queens team, initially
- 10 Burrowing, big-cheeked rodents
- 11 Not too bright
- 12 Pub quaffs
- 18 Commotion
- 19 Irish Sea feeder
- 23 Wild sheep of central Asia
- 25 Label
- 27 “___ Karenina”
- 29 Leader for the school
- 30 “What’s ___ for me?”
- 31 “Science Guy” and family
- 32 Cronies
- 33 Cockeyed
- 34 Mantas
- 35 Some gloves and jackets
- 37 The facts of life?
- 40 Very, in Versailles
- 45 Acapulco aunt
- 48 Weasel out
- 50 Slow-moving arboreal mammals of South America
- 52 Problem of the middle ages?
- 53 My ___, Vietnam
- 54 Periodical
- 55 Like an overgrown path
- 56 When repeated, a fish
- 57 Astronaut Bean
- 59 Not fooled by
- 61 Apothecary’s weight
- 63 Outlaw
- 64 Young fellow

Crossword answers on page 22



Paul ‘Crocodile Dundee’ Hogan is back – sort of

By NICK THOMAS

Tinseltown Talks

It’s been 35 years since Paul Hogan unleashed the iconic character of rugged reptile-wrestling Mick Dundee onto the world in the 80s hit film “Crocodile Dundee” and two sequels. Hogan returned last December – via digital download in the U.S. – in “The Very Excellent Mr. Dundee,” released on Blu-ray/DVD February 16.

The Aussie actor is quick to point out that “Mr. Dundee” is not another Dundee movie, but a self-parody where the quiet-living Hogan (starring as himself) falls afoul of a series of ill-fated self-inflicted blunders that snow-

ball, sully his good reputation. The film also takes a gentle jab at celebrity culture and social media.

“But it’s not a deep meaningful movie, just a bit of fun,” Hogan said from his Los Angeles home. “While it pokes fun at Hollywood rules and how social media through the modern online community can give you a reputation that you don’t deserve, it’s mostly aimed at me.”

The screenplay, written by longtime collaborator Dean Murphy, is mostly



Blu-ray cover for “The Very Excellent Mr. Dundee,” starring Paul Hogan.

Lionsgate photo

fantasy sprinkled with factual tidbits about the real Hogan. Many more facts about Hogan’s life and career are recounted in his autobiography, “The Tap-Dancing Knife Thrower: My Life (without the boring bits),” published last year.

While the book has been highly praised, critics were not so generous when “The Very Excellent Mr. Dundee” was first released last year. No surprise, that didn’t

bother the unflappable Hogan. “I ignored it, you just take it as it comes.”

Critics were much kinder when “Crocodile Dundee” was released in 1986 to international acclaim. “Its impact was staggering and it turned out to be the most successful independent movie ever,” said Hogan.

The original film yielded one scene destined for cinematic comedy history where Hogan defensively brandishes that giant

hunting knife on the streets of New York City.

“I’ve still got the original knife, safe in a bank,” said Hogan. “We also had rubber and wooden ones for various scenes, but I co-designed the original. It might be worth a bit of money to a collector now.”

Then there was the heart-stopping scene where Hogan’s love interest, played by Linda Kozlowski,

encounters a huge crocodile.

“That was mechanical, but there were real crocs in the water during filming,” he recalled. “We had guys up trees with rifles just in case one came along and ruined everything.”

So, did Hogan consider asking Kozlowski, his co-star and former wife, to take a role in the new film?

page 22 please



Paul Hogan as Crocodile Dundee with co-star Linda Kozlowski.

Rimfire Films, distributed by Paramount

Advice to my younger self

Dear Editor, in the March issue you asked your readers what they would say to their 21-year-old self. This is my response.

Rosemary Vavrin, age 75, Chugiak, Alaska, Planet Earth

To 21-year-old Rosemary: Get ready for an adventurous odyssey that you cannot comprehend at the age of 21. Travel with the spirit of a world citizen, a global citizen, a citizen of planet Earth. Clue: You will wind up in the most beautiful state of all, Alaska! And be prepared for a future interest in Earthlings going to Mars and becoming the first Martians. Please stay in touch and be supportive of all your/our relatives and friends from each decade of life. Be big hearted, be open to the spiritual dimension of life on Earth, be open to

learning about very healthy eating, be ready to travel when the opportunity presents itself, and be appreciative and grateful for absolutely everything. Be grateful for your upcoming spiritual journey and you’ll know what the word ‘Baha’I’ means.

To my future Rosemary: Look out and get ready; I’m walking into the future. Yes, I’m very interested in the future because that’s where I’ll spend the rest of my life, and I can’t wait to see what happens next. Thank you, God, for the gift of life.

What advice would you give to your 21-year-old self? Email it to editor@seniorvoicealaska.com. Or mail to Senior Voice, 3340 Arctic Blvd., #106, Anchorage AK 99503.

Stay Connected with AARP Alaska



Sky Blossom Preview Screening on April 7 at 8 p.m.: This special AARP Alaska virtual event will focus on the Sky Blossom caregiving documentary and feature a live discussion on caregiving with several of the featured families, including Alaska’s own Bushatz family. Sky Blossom has been nominated as a “Best Documentary” for the 2020 Movie for Grownups Awards.

AgeSmart – Let’s Talk on April 13 at 6:30 p.m.: Join a group of local panelists to learn about the theater and its tremendously positive impacts on our lives as we age. This discussion is part of our monthly AgeSmart Series with the Anchorage Senior Activities Center, the Older Persons Action Group, and Senior Voice.

Alaska Chamber Singers Spring Concert on April 16 at 7 p.m.: The Alaska Chamber Singers, in partnership with AARP Alaska, bring you their spring virtual concert, with a sweet music theme of “Love and Romance.” You can expect a unique collection of arrangements by local, elite musicians. Don’t miss it; we think you will “love” this!

COVID Vaccine Update on April 20 at 11 a.m.: AARP Alaska is hosting regular vaccine updates with Dr. Anne Zink and RN Tessa Walker Linderman, co-chair of the Alaska Vaccine Task Force. This is a chance to ask your questions about vaccination, immunity, allergic reactions and more directly to Dr. Zink!

Fraud Watchdogs HOWL on April 22 at 1 p.m.: Join AARP Alaska for our April Fraud Watchdogs event, featuring AARP Alaska State Director Teresa Holt discussing how common household devices can be hacked – and how to protect yourself.

Registration information for all AARP Alaska events at www.facebook.com/AARPAK or by calling 1-877-926-8300.



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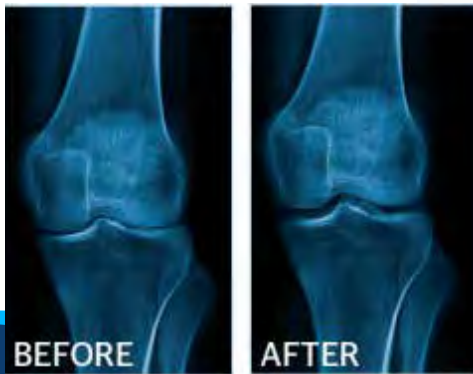
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‘Do I really need a will?’ Yes you do

By **KENNETH KIRK**

For Senior Voice

Sometimes when you spend all day, every day dealing with the complications of a particular area of law, the simplest question can surprise you. People ask me, on a fairly regular basis, whether they really need a living trust, or a power of attorney, or a transfer-on-death deed, or some other specific item.

But once in a while, people ask me if they actually need a will.

The person who asks that question might think they don’t have enough money to need one. Perhaps they assume that if they don’t have a will, the money simply goes to their spouse or their children. Or maybe they have made arrangements to avoid probate and think that will be sufficient.

Spoiler alert: Everybody needs a will.

I’m going to give you a few stories here. These are real-life cases, although the names (and a few other details) have been changed to protect the innocent. Chances are none of these will be exactly your situation, but I am hoping it will give you an idea of the kinds of things that can come up.

Example 1: Margery, an elderly widow with no children, didn’t have a lot of assets. She had some furniture, a couple pieces of jewelry, and a few personal items. She lived on Social Security and a small pension, in a rented apartment. She figured that



a will was unnecessary, as there wasn’t enough for anyone to fight over.

Then one day, as Margery was walking home from the bus stop, a van belonging to a local company rounded a corner too fast, slid on the ice, jumped onto the sidewalk and seriously injured Margery. The insurance company paid out \$500,000 to Margery, who died soon afterward.

Since she didn’t have a will, Margery’s estate will be divided according to a set of laws called the “intestate statutes.” If the word “intestate” is unfamiliar to you, understand that it is from the same root word as testament, as in “last will and testament.” If someone is intestate, that is the opposite of having a last will and testament. If you die intestate, a very inflexible set of laws says who gets your money.

In Margery’s case, since she died without a surviving spouse or children, and since her parents had also already died, the intestate statutes require that the money go to her nearest relatives, which is her brother and sister. So

whatever is left after her creditors (not to mention the lawyers and accountants) have gotten their fill, will go to her siblings. Margery hadn’t seen her brother in over 50 years, and her sister is in a nursing home and will have to give up the money to Medicaid.

She didn’t think she had much money, but her estate sure did.

Example 2: Bob and Diana built up a decent-sized estate during their long marriage. They were planning on getting around to doing their estate planning at some point, but they both seemed healthy and there were other priorities. And then one day Bob unexpectedly had a massive stroke, dying after a few weeks in the hospital.

Diana assumed that, as the surviving spouse, she would receive the entire estate. They had a lot of rental properties, but since Bob was the one who handled all of that, those properties were only in Bob’s name. So were a lot of the investment accounts that were funded by the profits.

And everything might have gone to Diana, except for one thing. Bob and Diana had a teenage son, Ronny. There was also a daughter named Andrea, but Diana had Andrea before she met Bob, and even though he raised Andrea and treated her as his own, he never formally adopted her.

Under the intestate statutes, the first \$205,000 from Bob’s estate will go to Diana as the surviving spouse. But because Diana has a child who is not also Bob’s child, half of the remainder will go to Ronny. At this point he is planning to rent an entire floor of a hotel for his 18th birthday bash. Par-tay!

Example 3: David and Betty never had children, they just had each other. As an interracial couple from the South, they had been disowned by their respective families, and moved to Alaska. They lived here happily for many years, until Betty succumbed to a brain tumor.

Betty worked for the same employer for many years and had a lot of

money saved up in her 401(k). David thought he was listed as the beneficiary, but somehow the paperwork had never been filed, and the 401(k) had to go through probate. David was shocked to learn that because Betty’s mother is still alive, he gets the first \$255,000 from the 401(k), but he will have to give one-fourth of the rest of it to his mother-in-law -- a woman he has not seen in 30 years, who cussed him out and used a racial slur the last time he saw her, and who would not even attend her daughter’s funeral.

I could give more examples — perhaps in a future column I will — but do you get the point? Don’t rely on the intestate statutes. Everybody needs a will.

Kenneth Kirk is an Anchorage estate planning lawyer. Nothing in this article should be taken as legal advice for a specific situation; for specific advice you should consult a professional who can take all the facts into account. And yes, you really need to do that.

Networking for Anchorage, Mat-Su area providers

Interested in learning more about businesses and agencies providing senior services in the Anchorage and Mat-Su area? Want to get the word out about your own service? The monthly Service Providers Breakfast (formerly known as the Interagency Breakfast), sponsored by Older Persons Action Group, Inc., is an opportunity for all the above. Informal, early and

free, the monthly event currently meets virtually online via Zoom. The April meeting is April 14, hosted by AARP Alaska. Begins at 8 a.m.

RSVP by calling Older Persons Action Group, Inc. for more information on these events or to be added to our e-mail reminder and Zoom invitation list, 276-1059.

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May 4, 6:00 pm to 8:00 pm
May 12, 9:30 am to 11:30 am
May 18, 9:30 am to 11:30 am
May 26, 9:30 am to 11:30 am

June 3, 6:00 pm to 8:00 pm
June 16, 9:30 am to 11:30 am
June 22, 9:30 am to 11:30 am

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Clubhouse, new printers, battery cases

By BOB DELAURENTIS
Senior Wire

Q. What is Clubhouse?
A. Clubhouse is a new social network that connects people in audio chat rooms. It has become quite popular in the last couple of months and is by invitation only. If it continues to accelerate, it will only be a matter of time before someone invites you to join. But my advice is to tread cautiously. The Clubhouse app does a few things that old-time internet folks such as myself find distasteful.

When you first sign on you are asked for permission to access your contact list. Say no and you are stopped cold. Say yes and Clubhouse now has access to every single one of your contacts.

The request is framed like a benefit to you, but a single tap will send Clubhouse your entire contact list, including everything from street addresses to telephone numbers. In my view, the contact information for my friends belongs to my friends, and I have an obligation to protect their privacy.

The Clubhouse app does a few things that old-time internet folks such as myself find distasteful. When you first sign on you are asked for permission to access your contact list. Say no and you are stopped cold. Say yes and Clubhouse now has access to every single one of your contacts.

Another behavior I find downright dangerous is that Clubhouse can connect you with a random person in your address book with a single tap. You may not realize what is happening until you are talking to someone you prefer to avoid. Every contact is considered your best friend, no matter what. That is simply wrong.

Clubhouse is functionally similar to Facetime audio or Skype calls, along with a few added bells and whistles. If Clubhouse becomes wildly popular, similar features will appear in other apps, and hopefully public pressure will address the privacy concerns. Until then, stick with what you have now.

Q. I need a new printer. There are so many models, so many different prices. Choosing is overwhelming.

Where do I start?
A. Start with the biggest difference among printers, inkjet or laser. If you print color photos, inkjet is your best option. If you print black text or illustrations on white copier paper, you should choose a laser printer.

Printing is expensive no matter what, but comparing printer prices is measuring the wrong thing. What matters most is the price per page. Unless you only print a few dozen pages a year, a laser printer will be the most cost effective.

Sometimes you can Google around and find a printer's consumable costs in printer reviews. But unless you have a clear idea of how many pages you are going to print over a given time frame, it will still be a rough

estimate.

Inkjet printers can produce stunning photo prints and attractive color charts and graphs. When you move up in price, you generally get better quality, and faster output. That means the ink refills will be more expensive as well, and the cheapest inks are more expensive per ounce than fine wine. While I have owned inkjets from time to time, I send photo prints to the drug store or a pro photo lab.

For everyday printing, I depend on a wireless Brother laser printer, model HL-L2350DW. It is inexpensive and reliable, handling several thousand pages on a single toner cartridge.

Q. Searching my house for fresh batteries has become a regular pastime. How do I make sure I have borrowed from one device to feed another for the last time?
A. Extra disposable batteries are just as vital as duct tape or a box of bandages. I am old enough to remember when the phrase

“batteries not included” was a punch line. When I was a kid, batteries were a kind of currency. We never had enough. As an adult I used the kitchen junk drawer to keep extra batteries, but what started as good intentions sank into chaos.

I finally achieved battery nirvana thanks to the Battery Daddy 180 Battery Organizer Storage Case (about \$20 on Amazon). As a tech nerd with an affinity for electronic gadgets, 180 batteries seems about right. I don't fill every slot, but I make sure to keep a few of every possible size, just in case. Fortunately, there are dozens of smaller cases available more suited to a modest-sized inventory.

But no matter the size, a case is the solution. It lets you keep track of batteries as they are used, prompting you to buy replacements before it is too late.

Bob has been writing about technology for over three decades and can be contacted at techtalk@bobdel.com.

Wander the Web

Here are my picks for worthwhile browsing this month:

Quack Cures
The Quack Doctor documents scores of dubious health claims from past centuries. If you enjoy sick entertainment, this site is good for what ails you. www.thequackdoctor.com

Geography Challenge
Travel the world from your couch as you compete to name famous landmarks from the comfort of your Web browser. www.geoguessr.com

I Miss My Bar
This site describes itself as a modern digital artifact. It recreates the atmosphere of your favorite drinking establishment. www.imissmybar.com

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Confusion, bad snacks and shrieking cats

A memorable trip in pandemic times

BY DIMITRA LAVRAKAS

Senior Voice Travel Correspondent

OK, so I haven't lived in Alaska since 2012, and we decided to return when real estate prices tripled in Gloucester, Massachusetts, and the streets of my mother's beloved working-class fishing hometown became crowded with Lexuses, BMWs, Mercedes and Jaguars. I even saw a Rolls.

Plus, people were not behaving in the stores, especially the supermarkets where management had stuck arrows down to



For four days our flight to Tenakee Springs was canceled due to weather. But that's Alaska, where you can't get somewhere from anywhere anytime.

A move like no other

I've moved lots of times. My son thinks I should talk to a shrink about it, but really, I think change excites me or maybe I'm searching for the best place to be. This, my fifth

and Massachusetts license plates would not turn out well. Had the border into Canada been open it would have been possibly safer.

Inoculated but disconnected

Because we were living in senior housing, we had the second Pfizer shot a week before we left. In that last week, we canceled the internet so had no idea when we left for the airport in Boston that the country was at a standstill due to snow and ice storms. I thought maybe there'd be other flights than ours, but the airport flight board was but one panel. I'd never seen that before.

Our flight was moved to the next morning so that meant finding a hotel. The taxi driver finally took us to where we once stayed on another trip, only to find it was closed for renovations. But up the street was a Courtyard by Marriott with the best mattress and pillows I've ever experienced in a hotel.

Up at 5 a.m., we checked in at the Alaska Airlines counter in the cattle call line up. For some reason I thought everyone had boarded and so we went right on only to find out we were the first. And we were just lowly coach passengers.

While Alaska Air has, as has other airlines, limited the type of animals allowed on as service or emotional support animals, no one told the cat down the aisle of its elite status. Regular high-pitched wails pierced

the air, laughable at first then deeply annoying.

The sound of the carts rolling down the aisles offered a possible distraction.

Remember the days when Alaska Air had real food – like a salmon burger or silverware with its logo on it (and I have such a spoon and a fork I got at a thrift store)? No more. And you have to have a smart phone to order a meal 24 hours before your flight. If you don't, you get bags of pretzels or a party mix. Save yourself the disappointment and pack a snack yourself.

Landing in Alaska

We finally set down in Juneau after a six-hour layover in Seattle. Forget a direct flight, there's always a wait at SeaTac. Maybe it's a winter schedule, but pulling into Juneau at 11 p.m. or 2 a.m. is not fair to a state that gave your airline its name.

We'd heard the State of Alaska had discontinued the COVID restrictions at the airport but, nope, there were the inspectors. Bruce sweet-talked one who called him over and didn't have to show her anything. I, however, got a young man who was nervous and kept asking an older inspector for guidance and neither my immunization card or my negative COVID test would satisfy him and I had to fill out the state form.

At the Juneau airport

you have to lug your suitcases across the street to the lot where the taxis and the hotel vans pick up people. Ours never did send the van to get us and the taxis other travelers called eventually went away leaving us standing in the cold for another one to come. Bruce said, "No one respects old people anymore." "They'll find our bones in the morning," I said.

Note: Have the telephone number of a taxi company at your final destination when you travel.

Becoming an Alaskan – again

We spent the next day doing what all rural and Bush residents do when in the city – we went to Costco and dropped close to \$500, then taxied the totes to Alaska Seaplanes for a flight the next day.

Then we taxied to the Department of Motor Vehicles to get drivers licenses.

I found the questions on the video test to be kind of puzzling. Why do I need to know how many years I'd lose my license if I caused an accident? Well, for the first time in my life, I failed.

"You can come back tomorrow and take it again," the very helpful DMV employee said, and I panicked

next page please



Bruce Ware chills out with a newspaper on the M/V LeConte on the way to Tenakee Springs.

Dimitra Lavrakas photos

indicate the flow so people could keep a safe distance. Time after time, I'd point out to someone they were going the wrong way and be told "Oh really?" or with a shrug "It happens," which made me utter bad words under my mask. And I have to admit I liked the mask for that, as it muffled my old lady mutterings and hid my tongue when I stuck it out.

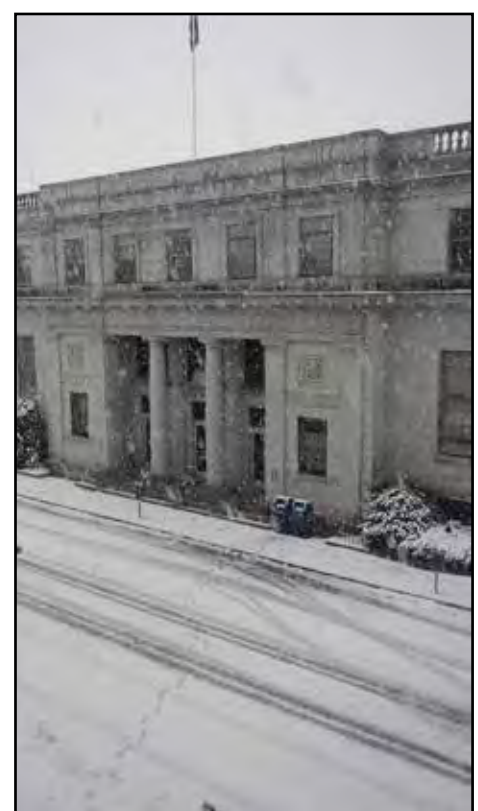
However, the tension I dealt with in the stores was making me so nuts I asked my doctor for something to calm me down.

Now, nestled here in Tenakee Springs with maybe 45 souls and regulations -- like only two people at a time allowed in the post office or the store -- that are followed faithfully, I no longer need those pills.

cross-country move, was the most difficult, intricate and expensive ever.

Because Bruce Ware and I lived across the street from the main post office in Gloucester, a gorgeous granite WPA project, we ran a shopping cart across the street filled with boxes. Although the postal clerks were fascinated by our move to Alaska, they finally lapsed into moans of "More?" In the end, we spent all of our relief money that the feds gave us by giving it back to them through the U.S. Postal Service.

We had intended to drive across alongside a friend with a truck, which would have saved money, but we figured that in this time in American history, motor-ing across the border states in a Prius hybrid with very liberal bumper stickers



The view from the window of our apartment at the Central Grammar Apartments in Gloucester, Massachusetts, a senior living facility we liked but found far too tame.

Tenakee: *Arrival*

COVID immunization passports for travel?



Coming into Tenakee Springs on the M/V LeConte for the first time (for me).
Dimitra Lavrakas photo

from page 20

because we were flying to Tenakee the next morning. Instead, I decided to get my state identification card. Why do I need a license in a town with no roads and where cars are not allowed? Our morning flight was canceled due to weather, and again the next day and again and again. But wonders of wonders, the state added the M/V LeConte on a run from Juneau to Tenakee. After starting out on Valentine’s Day on a Sun-

day, we would be sailing a week later. All that time in hotel rooms, all that money spent. Truthfully, I’d rather take the ferry than fly any day — it’s safer and cheaper. Plus, we met some lovely people and had great conversations. The food is good, hearty Alaska fare and the view unrivaled. Yes, it takes longer than a plane, but being disconnected from electronics life is simpler and time passes pleasantly. Try it.

By JOHN C. SCHIESZER
For Senior Voice

Proof of immunization against severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) may soon be required in many parts of the globe. Along with your regular passport, you may need a COVID-19 Immunization passport to visit certain countries. “We expect that immunization passports may be imminently introduced for international travel,” according to Dr. Kumanan Wilson, who is with the University of Ottawa Centre for Health, Law Policy and Ethics, Ottawa, Ontario. The World Health Orga-

nization (WHO), International Air Traffic Association and World Economic Forum have been exploring standards for these digital passports, indicating they may be used first for international travel but could also be required for large gatherings and within some workplaces. A properly constructed approach to immunization passports could help to limit the spread of COVID while allowing society to reopen and the global economy to be revitalized. Currently, there is a call for input from legal and ethical experts and for the development of standards to ensure that those who

can’t be vaccinated are not discriminated against or denied access to services. There also are many concerns about safeguards to protect the privacy of personal information. Dr. Wilson and his colleagues are concerned that if governments do not develop the necessary capacity to implement COVID immunization passports, it is likely that private corporations, airlines, and large event venues will develop their own requirements and systems. This could potentially lead to problems related to equity, privacy and coercion, according to legal experts.

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Pandemic: How Alaska’s seniors fared

continued from page 3

caveat: If you look just at Alaska seniors (65+ for this purpose), a whopping 62% have been fully vaccinated, and several percent more have had one of two shots and await the second. This is according to the Alaska Dept. of Health and Social Services Coronavirus Response Hub.

There are a couple of special communities of Alaskan seniors we ought to take a peek at. The first is seniors who are in long-term-care facilities. In Alaska and across the

nation, seniors in these facilities have been ravaged by COVID-19. I inquired about this issue at a March 17, 2021 panel discussion featuring several Alaska public health experts. Dr. Lisa Rabinowitz, staff physician with Public Health for the Alaska COVID Task Force, responded. “We just did a study to try to improve our data collection on long term care,” she said. “It’s difficult because they’re using the federal partners [private pharmacies that contract directly with the federal government] for that vaccination. And cur-

rently, it looks like we have about 89% of long-term care residents. Our staff vaccinations are a little low at 57%. As a state, we’ve been working really hard to do outreach education on vaccine hesitancy in that kind of long-term care staff population.”

Another relatively hidden but fast-growing community of seniors is incarcerated in prisons and jails across Alaska. According to the Alaska Dept. of Corrections 2019 Offender Profile, at that time there were 296 incarcerated seniors (age 60+) in Alaska – approximately 7% of all offenders in institutions. Dr. Anne Zink, Alaska’s Chief Med-

ical Officer, said in a panel discussion in March that “we’ve been seeing this as a potential real challenge ... with cases kind of accelerating.”

In the same discussion, Toni Hackney, Nursing Administrator, Dept. of Corrections, said, “We have a very fluid population. Some people come in and they stay in for a day, and some people stay in for years. And so it is constantly changing. At the time of our mass clinics, we were able to vaccinate at least 50% of them. Some facilities were a lot higher percentage than that, and other ones are a little bit lower with the declines, and also with

that fluidness as they came in and went out back into the community... We have pretty good uptake for our facilities and for that vulnerable population.”

Bottomline: Your friends and your family want you around as long as possible. Get that vaccination! Call the COVID helpline at 907-646-3322 for assistance. Hours are 9 a.m. to 6:30 p.m. on weekdays, and 9 a.m. to 4:30 p.m. on weekends.

Lawrence D. Weiss is a UAA Professor of Public Health, Emeritus, creator of the UAA Master of Public Health program, and author of several books and numerous articles.

Paul Hogan: Returns

continued from page 15

“No, she’s given up acting,” he said. “I see Linda a lot and we’re still friends.

She was living in Morocco for a while but now is back in LA.”

Despite all the money and fame his Dundee character generated, Hogan has remained grounded, unpretentious, and largely distanced from the Hollywood scene.

“I never really fitted in,” he admitted. “After the success of Dundee, I received all sorts of script offers, good and bad. But I wasn’t interested in becoming an actor for hire. My joy was seeing some-

thing that I wrote come to life on the screen.”

While fans may be disappointed that the new movie only features a luckless Hogan as himself, the spirit of Mick Dundee lingers throughout the film. Now 81, however, Hogan has no plans to resurrect the character.

“The original worked fine. I’d like to just leave it alone now.”

Nick Thomas teaches at Auburn University at Montgomery, Ala., and has written features, columns, and interviews for over 850 newspapers and magazines and is the author of “Raised by the Stars: Interviews with 29 Children of Hollywood Actors.”

DMV closure: Resistance

continued from page 3

Senate to vote on further.”

Zuyus says Seniors of Alaska supports HB 137’s offering of protection to rural DMVs.


As of March 17, HB 137 and HB 140 have both been referred to the House State Affairs Committee for further deliberation.

Both bills can be tracked online at www.akleg.gov.


Enter “HB 137” or “HB 140” into the search bar at the top right of the page to view all bill information including documents and session teleconferences.

Crossword answers from page 14

P	A	R		E	B	B		O	S	A		C	P	A
I	R	E		M	O	A		R	T	M		H	A	L
S	A	L	A	M	A	N	D	E	R	S		I	L	E
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COVID: Asthma updates; testing with phones

continued from page 5

with COVID-19 from Asia, Europe and North and South America.

The results, published in the peer-reviewed Journal of Asthma, show that just over seven in every 100 people who tested positive for COVID-19 also had asthma, compared to just over eight in 100 in the general population having the condition. There was no apparent difference in the risk of death from COVID-19 in people with asthma compared to

those without.

“Chemical receptors in the lungs that the virus binds to are less active in people with a particular type of asthma and some studies suggest that inhaled corticosteroids, commonly used to treat asthma, can reduce their activity even further,” said study co-author Christine Jenkins, who is the head of The Institute’s Respiratory Program.

When the COVID-19 pandemic first spread across the world concerns were raised that people with asthma

might be at a higher risk of becoming infected or of becoming sicker. Previous findings have shown that people with chronic respiratory conditions like asthma were reported to be at greater risk during the Middle East Respiratory Syndrome (MERS) outbreak, caused by a virus with a similar structure.

Phone testing for COVID in minutes

COVID-19 can be diagnosed in 55 minutes or less

with the help of programmed magnetic nanobeads and a diagnostic tool that plugs into an off-the-shelf cell phone, according to researchers at Rice University. Mechanical engineer Peter Lillehoj has developed a stamp-sized microfluidic chip that measures the concentration of SARS-CoV-2 nucleocapsid (N) protein in blood from a standard finger prick. The nanobeads bind to SARS-CoV-2 N protein, a biomarker for COVID-19.

“What’s great about this device is that it doesn’t re-

quire a laboratory,” Lillehoj said. “You can perform the entire test and generate the results at the collection site, health clinic or even a pharmacy. The entire system is easily transportable and easy to use.”

The lab found that 55 minutes was an optimum amount of time for the microchip to sense the virus. Lillehoj said it would not be difficult to manufacture the microfluidic chips or to adapt them to new COVID-19 strains if and when that becomes necessary.

Hospice of Anchorage: Expanded services

continued from page 5

Additionally, we are offering free nutrition consultations with our registered nurse for those experiencing life-limiting illness. We have a variety of books and samples to help those expe-

riencing difficulty with their nutrition.

Donations are critical

For the second year in a row, our largest fundraiser, Heroes of Hospice Gala and Silent Auction, is canceled

due to COVID-19. We can’t let that stop us. As a volunteer hospice provider, we exist only through corporate and individual donations, along with state and federal grants.

If you’re able to support the work we do, please make

a donation at HospiceOfAnchorage.org.

Curbside pickup

If you have any questions about these new resources, or would like help determining what might be helpful

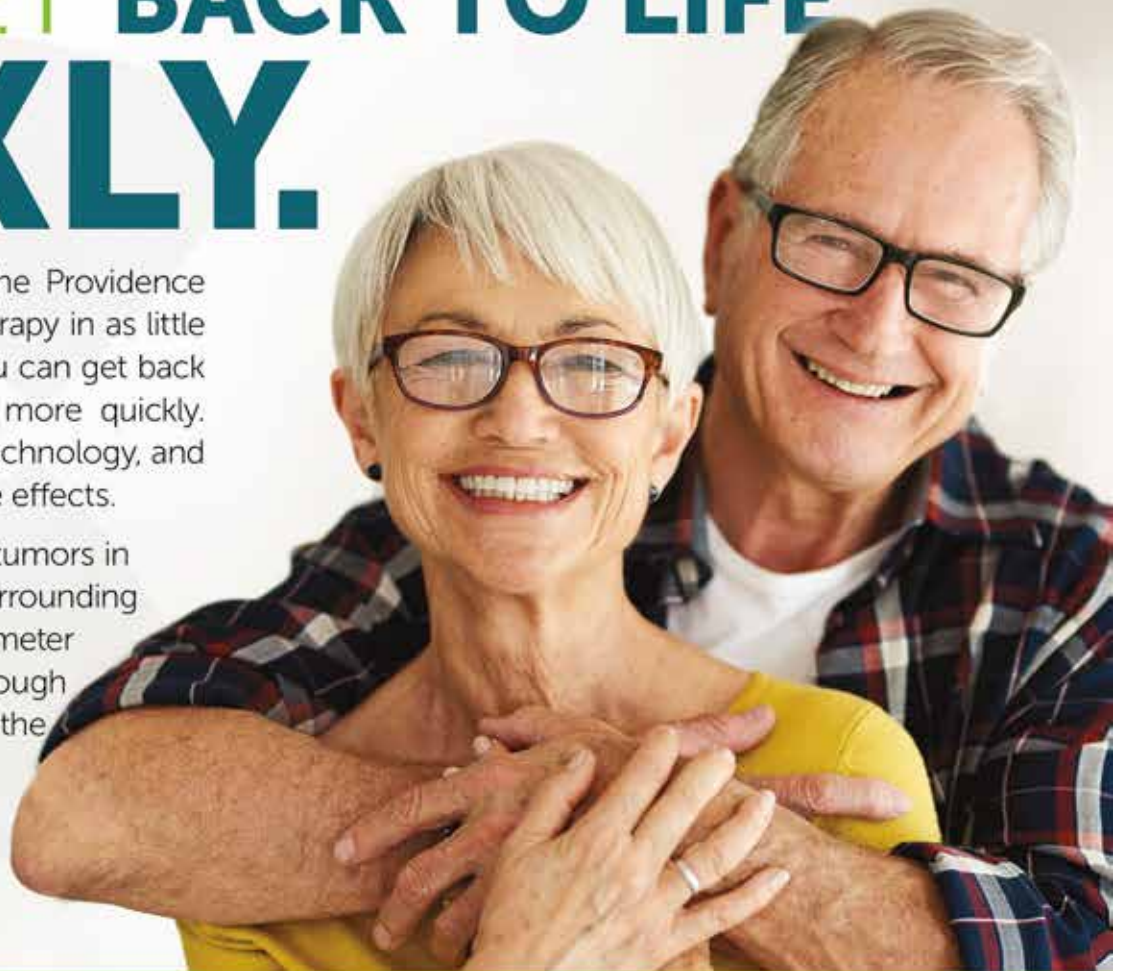
in your specific situation, please give our office a call at 907-561-5322. We offer curbside pickup for any of our resources so that you can get them safely.

Bethany Burgess is the Hospice of Anchorage clinical director.

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The State of Alaska, Division of Senior and Disabilities Services, administers the ADRC grant in partnership with the 6 regional sites. For more on the ADRC grant program, contact an ADRC Program Manager at 907-465-4798 or 1-800-478-9996.

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907-343-7770 www.muni.org/adrc

Kenai Peninsula/Kodiak Island/Valdez/Cordova

Independent Living Center
47255 Princeton Ave., Ste 8, Soldotna, AK 99669
907-262-6333 / 1-800-770-7911 www.peninsulailc.org

Southeast Alaska

Independent Living Center, SAIL
3225 Hospital Dr., Ste 300, Juneau, AK 99801
907-586-4920 / 1-800-478-SAIL (7245) www.sailinc.org

Mat-Su Borough

LINKS Aging & Disability Resource Center
777 N. Crusey St., A101, Wasilla, AK 99654
907-373-3632 / 1-855-355-3632 www.linksprc.org

Fairbanks North Star Borough

Fairbanks Senior Center - North Star Council on Aging
1424 Moore St., Fairbanks, AK 99701
907-452-2551 www.fairbanksseniorcenter.org

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