Big-hearted artists create colorful outdoor murals

Richmond artist Hamilton Glass worked with the nonprofit group Girls for a Change to produce a mural with that name on Broad Street in Jackson Ward. A part of it is shown here. The mural, like many others painted throughout the area by local artists, is visible any time, free of charge.

Photo courtesy of Richmond Region Tourism

A publication of the Beacon Newspapers, Inc.
What you have told us

First, a thank-you to the hundreds of readers who have filled out and mailed (or taken online) our “How are you faring?” coronavirus pandemic survey.

I want to share some of the results and comments received, as I think they are enlightening. Below I combine answers received over several weeks from all four of our readership areas: Greater Baltimore, Howard County, Greater Washington and Greater Richmond.

We asked several questions to find out how many readers are complying with the guidance to stay home as much as possible and keep six feet of distance between themselves and others.

By and large, people are complying very well. In the week before taking the survey, 21% said they had not left their home once, and 49% had left only one or two times to run errands or go to work.

This has, of course, severely limited interactions with other human beings: 29% had not interacted in person with someone outside their home or apartment over the past week. And 45% had only encountered others once or twice in the past week.

Furthermore, nearly everyone (95%) said they have maintained the recommended social distance of six feet when in the presence of others.

Perhaps due to this excellent level of compliance, only 20% of respondents personally know anyone who has come down with COVID-19, the illness caused by the novel coronavirus, and only 1% have been exposed to it, to the best of their knowledge.

At the same time, people have continued to reach out to friends and family to stay in touch. Nearly all (98%) told us they have communicated with others via telephone or computer in the past week.

Of particular interest is that many have started using technologies that are new to them as a result of the pandemic. More than 61% have begun using video chat services such as Skype and Zoom, 42% have started using social media, one-third are giving streaming video a try, and 26% have had their first telemedicine experience.

In addition, 20% have started ordering grocery and meal delivery to their home, and 11% have started shopping online for the first time.

These are changes that will no doubt have huge repercussions in the coming months and years. I think it’s wonderful that more older adults are becoming comfortable using these technologies. The impact will, however, no doubt add to the toll the virus has already taken on retail stores, restaurants, and theatre and music venues.

Another unfortunate effect, for now at least, has been that many have cut back on exercise (37%), including regular walks (32%). If this is something you have experienced, I encourage you to try working out at home.

There are hundreds of exercise classes and videos online (search on YouTube or check your county recreation department’s website), or pull out those old Jane Fonda workout tapes, if you prefer. Regular exercise has many benefits, including keeping our immune system strong and helping keep weight gain in check.

Exercise can also help keep our spirits up, which is why some numbers from our survey have been concerning.

About one-third of respondents say they feel lonelier, and one-third feel more depressed or anxious, since being asked to shelter in place.

Perhaps these feelings will pass as society slowly starts to open up again. But if they continue without let-up, it is important to seek help. Trained disaster distress counselors can be reached 24/7 at 1-800-985-9999.

Even while experiencing such feelings, most respondents have “taken advantage” of the slower pace of life brought about by the pandemic to do more things that bring them pleasure (or to simply get necessary things done).

More than 70% are reading for pleasure and a similar number are watching more TV and movies. Also popular are calling old friends (60%) and writing letters (41%).

More than half have gone the productive route, cleaning out a room or attic or filing important papers, while 24% have used the time to complete and file their tax returns.

I was glad to see that about 15% have gone the creative route — drawing, painting or playing a musical instrument to help fill the time and refresh the soul.

This gives us a snapshot of how well our or Fifty Plus readers are coping in these uncertain and alarming times. The additional comments many respondents shared give us even more insight.

To share just a few: “It’s really scary out there.” “Less pressure on social obligations, more freedom.” “I believe the crisis has exposed how so many are in desperate economic straits, and I pray this will lead to systemic change.”

“Neighbors have been so helpful in so many ways.” “Devastated by total loss of work.” “How quickly time passes even without social interaction!”

“It makes me sick, depressed and angry that nobody ever asks about what tremendous needs a locked-down, high-risk person has, and the sheer terror that goes with that.”

“This experience has taught me that even in the midst of chaos there is some good to heal the pain.”

“I’m lonely. Not for activity so much as the intimacy of touch. There’s just something about one hand resting firmly over another’s that says, ‘I really care.’”

And one more comment that probably sums up most of us as being: “My main fear is not knowing when, or even if, life will return to normal, as it was before.”

Even though it’s uncertain what tomorrow may bring, our goal at Fifty Plus is to help light the way forward as best we can. Thank you for completing our survey and thank you for reading.

—from the Publisher

Dear Editor:

When I was in my 50s, I had double vision in both eyes. My muscles were very weak, which made walking very difficult. I lost hearing in both ears, and I was in constant, debilitating pain.

I was diagnosed with multiple sclerosis, M.S., an autoimmune disease that affects 1 million Americans.

When I was first diagnosed with M.S. in 2001, my doctor said he did not know the cause of M.S., and that there was no cure, but, “Don’t worry, it’s not fatal.”

It took all the courage that I had to refuse the only treatment option that the doctors offered me: drugs. I thought the side effects of the drugs doctors wanted to prescribe would make me worse.

Instead, I instinctively knew that I had to find the source of my pain. I decided to rely on my own research and faith to solve my problem and to find a solution to my medical mystery.

I discovered that I have celiac disease that had been undiagnosed since childhood. I have since learned that gluten is what damaged my immune system, leading to M.S.

The dietary changes were difficult at first — avoiding wheat, soy sauce and other common ingredients in most foods. But the diet got easier as my pain started to go away, and my health improved remarkably.

Now, I am symptom free and getting
Murals turn city into free open air museum

By Diane York

Hungry for art? Due to the coronavirus, the VMFA is closed, art exhibits and festivals are cancelled, and galleries are shuttered. It’s hard to get your visual stimulation fix.

But RVA is home to an incredible collection of street mural art, accessible all day, every day. From three-story murals to tiny gems tucked in alleyways, murals have popped up in the Fan, the Carytown district, Jackson Ward, Carver and most recently the Green Gate Shopping Plaza in the far West End.

Artists from all over the world created these vibrant works thanks to RVA Street Art Festivals, the Richmond Mural Project and individual commissions. Richmond also has a local talent pool of mural artists, including recruits from VCU’s lauded art department.

One of these graduates is Nils Westergard. His work can be seen worldwide, on walls in London, Prague, Berlin, the Hague, Belgium and the Czech Republic, as well as throughout Richmond. His 100-foot-tall mural “Kaiya with Tulips,” in Waynesboro, Virginia, was named number one on the list of “One Hundred Best Artworks and Street Artists of the Year” in 2019 by 360 Street Art, an online magazine.

Creating these massive works of art can be logistically and emotionally challenging, Westergard said.

“It is more physicality and nerves than anything else. The basics of it are quite easy — margins of error quite large,” he said in an interview with Fifty Plus.

“It is simply exhausting and terrifying. These huge jobs require the rental of big lifts that can get you up high — and hopefully keep you safely there.”

Westergard creates tender but honest portraits of friends, as in “Kaiya with Crown,” which graces the side of the Pine Street Barber Shop, and the two-story “Girl with Phone,” on the side of a building at Belmont and Patterson.

His work can be ferocious, too: A drooling hyena with a terrifying grin guards the door of the Veil Brewing Company.

Westergard is currently working on plans for a mural of the late singer John Prine, to be installed in Chicago, Prine’s hometown, later this year.

‘Rock climbing’ for art

Nico Cathcart, who lives in the Lakeside area of Henrico County, said she became a mural painter partly because of the challenge.

“It’s simply exhausting and terrifying. These huge jobs require the rental of big lifts that can get you up high — and hopefully keep you safely there.”

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“Cosmic Moxie” by artist Nico Cathcart stretches 40 feet across the side of the Vitality Float Spa building in Carytown.

Located on the side of the 50-year-old Pine Street Barber Shop in Oregon Hill, “Kaiya with Crown” by Nils Westergard depicts a friend of the artist.

See MURALS, page 24
By Marilyn Marchione

For the first time, a blood test has been shown to help detect many types of cancer in a study of thousands of people with no history or symptoms of the disease.

The test is still experimental. Even its fans say it needs to be improved and that the recent results are not ideal.

Yet they show what benefits and drawbacks might come from using these gene-based tests, called liquid biopsies, in routine care — in this case, with PET scans to confirm or rule out suspected tumors.

“We think that it’s feasible,” said Nickolas Papadopoulos, a Johns Hopkins University scientist who helped develop the test. Using it along with standard screening methods “doubled the cancers that were detected” in the study, he said.

But the test also missed many more cancers than it found, and raised some false alarms that led to unnecessary follow-up procedures. It was only studied in women 65 to 75 years old and needs to be tried in men, other ages and more diverse groups.

“This is not at the place where it could be used today,” said Dr. Len Lichtenfeld, deputy chief medical officer for the American Cancer Society. “It will need many more studies to demonstrate value,” including whether it improves survival, he said.

Results were published in the journal Science and discussed at an American Association for Cancer Research conference that was held online because of the coronavirus pandemic.

Goal is early detection

Many companies are working on liquid biopsies, which look for DNA and other things that tumors shed into blood, to try to find cancer at an early stage.

This test was invented by Hopkins doctors who formed a company, Thrive Earlier Detection Corp., to develop it with Third Rock Ventures, a biotechnology finance firm.

Until now, these multi-cancer detection tools have been tested on blood samples from people with and without cancer to estimate their accuracy.

The new study was the first “real world” test in routine medical care, following patients through surgery or other treatment to see how they fared.

Nearly 10,000 women 65 to 75 years old with no history of cancer were recruited through the Geisinger Health System in Pennsylvania and New Jersey. That’s because some deadly cancers, such as ovarian, have no screening test now, and women in this age group have a higher risk for cancer yet are young enough to benefit from finding it early, Papadopoulos said.

They were encouraged to continue regular screenings such as mammograms and colonoscopies, and were given the blood test, which was repeated if findings suggested cancer.

If the second test also was suspicious, they were given a whole-body PET-CT scan, an imaging test that costs around $1,000 and can reveal the location of any tumors.

After one year, 96 cancers had been diagnosed. Usual screenings found 24, and the blood test helped find 26 others. The remaining 46 were found because symptoms appeared or the cancer was discovered in other ways, such as an imaging test for a different reason.

Benefits suggest future value

Blood testing “made a genuine difference” in detecting cancers, the researchers said.

See BLOOD TEST, page 5

By David Bauder

Heidi Van Roekel makes instructional art videos for YouTube when coronavirus news overwhelms her. Bill Webb takes his boat out. Stacy Mitchell searches her TV for something — anything — to make her laugh.

Paradoxically, Kevin Reed, a software designer from Kenmore, Washington, has binged “The Walking Dead” after turning off the news. He’d rather watch fake, flesh-eating zombies than a real-life pandemic.

It’s no surprise that news outlets are in demand with a story that directly affects so many people, whether they’ve gotten sick, lost jobs or are locked down at home.

Almost 90% of Americans said they were following coronavirus news either very or fairly closely, according to a Pew Research Center survey taken in late April.

Yet that takes a toll. Pew also found that 71% of Americans said they need to take breaks from the news. To watch some videos for YouTube when coronavirus was happening now during lockdowns. Some parts of the U.S. are seeing increasing numbers of daily new cases, and some are seeing declines.

Health officials will be looking at the number of new cases per day and the percentage of positive COVID-19 tests.

How long before we know if reopenings cause virus spikes?

By Carla K. Johnson

States in the U.S. and countries worldwide are cautiously relaxing restrictions while watching for potential spikes in coronavirus infections.

Getting the timing right is complicated. Disease trackers note the impossibility of seeing clearly what’s happening without widespread testing.

Here’s a look at when we might start to see any health impacts of reopening:

When are we going to know?

The virus can circulate undetected, then flare up in a nursing home or after a family gathering. So, it could be several weeks to see surges in infections.

What’s more, there are still new infections happening now during lockdowns. Some parts of the U.S. are seeing increasing numbers of daily new cases, and some are seeing declines.

Health officials will be looking at the number of new cases per day and the percentage of positive COVID-19 tests.

Why does it take that long?

After exposure to the virus, it can take three to five days for someone to feel sick, and many infected people won’t have symptoms or only mild ones. Some with mild illness might delay getting tested. It can take another few days to get test results back and report them.

All told, it can take two weeks or so — the time for one group of people to spread the virus to another — to have enough testing data. Crystal Watson of the Johns Hopkins Center for Health Security said it will take a few rounds of infection spread — five to six weeks — to know how reopenings have affected epidemic curves.

If there’s a spike, how would we stop it?

Ideally, investigators would call people who test positive, track down their contacts and get them into quarantine before they can spread the virus to others. There’s evidence the coronavirus can spread before people feel sick, making it important to act quickly.

States are just starting to expand their ability to do this contact tracing. Without adequate testing and contact tracing, returning to restrictions or a lockdown might be necessary if there is a surge in infections.

—AP
The news is distressing. Silver said. “There are not many uplifting stories. It’s the repetitive bad news that is so draining.”

The pandemic story is particularly difficult because it’s not a single event that fades with time. There’s no telling how long it will go on. Because of unemployment and so many staying at home, more people have time to follow it.

That’s precisely what is happening with Jose Moreno of San Antonio, Texas, a caretaker for his elderly mother. The news makes him overthink, he said. “When I leave the house, I’m wondering, ‘Am I doing something that I shouldn’t be doing?’ It’s a lot of stress,” he said.

Positive stories now appearing

Some news organizations recognize the impact of a steady diet of sobering news and have sought ways to offer relief.

CBS News reporter Steve Hartman, whose regular “On the Road” series has been grounded, is “teaching” an online class in kindness.

During a meeting with fellow editors at the Associated Press one morning in March, running down a particularly distressing list of the day’s stories, Sally Stapleton promoted a story about a homebound woman in Norway who asked people on Facebook to send birthday greetings to her children, and people all over the world did. Also, a college student sent home to New York after classes were suspended organized 1,300 volunteers in three days to shop and make deliveries for shut-ins.

The stories got such a positive reaction that “One Good Thing” is now a daily feature. AP journalists all over the world compete to have a story included.

Fox News has similarly collected more than 700 television and online stories showing resiliency under the “America Together” banner. The featured articles have received more than 25 million page views.

“If you’re in a position to spread these stories that warm the heart at a time when there is uncertainty, sadness and fear, I think it’s our obligation to do so,” said Fox News anchor Dana Perino.

Find a happy medium

Even people who need to step away from the tough news recognize that it’s essential. UCal-Irvine’s Silver stays informed by reading online news sites in the morning and evening, and gets notifications during the day. She recommends against keeping the TV or news radio on constantly in the background.

“People should make a conscious effort to monitor their exposure,” Silver said.

Van Roekel, a stay-at-home mom from Los Alamos, New Mexico, said she limits her exposure to national news to four days a week, and makes sure she stays away from social media before bedtime.

“You’ve got to take a break for your mental health,” Van Roekel said.

—AP

Blood test

From page 4

In discovering cancers in a small number of patients, took seven months on average, and led to 1% of women getting a PET scan when they incidentally did not need, Lichtenfeld said.

The blood test helped reveal six ovarian cancers, including one in Rosemary Jemo, 71, a hairdresser and exercise instructor who lives near Hazleton in eastern Pennsylvania.

“I would have never known…I didn’t feel anything” before the football-sized tumor was found, she said. Surgeons were able to remove it, and she is being monitored now.

Alberto Bardelli, a cancer specialist at the University of Turin in Italy who discussed the study at the conference, called it “extraordinary” and said it shows a way to move liquid biopsies into routine care.

The test still needs to be improved, but “it can become very valuable,” he said.

The research was funded by foundations and government grants. Many study leaders have financial ties to Thrive or other companies related to the work, and Johns Hopkins holds some patent rights.

Some companies may seek to market liquid biopsies under rules that allow certain tests to be sold without federal Food and Drug Administration approval.

Thrive’s CEO Dave Daly said the company plans a larger, definitive study and is committed to working with the FDA, but that “all options are on the table” for developing the test.

Cost hasn’t been decided, he said, but will be “in the hundreds of dollars, not the thousands.”

—AP
How to have an effective telehealth visit

Dear Savvy Senior,

I manage a large doctor’s clinic that treats hundreds of seniors each month. We are moving to more telehealth visits to help keep our patients safe at home during the coronavirus pandemic, but this new way of seeing a doctor is befuddling to many of our older patients. Can you write a column educating patients on how to prepare for a telehealth appointment?

Regular Reader

Dear Reader,

I’d be happy to help! To help keep patients safe and at home during the coronavirus crisis, more and more doctors and other healthcare providers are turning to telehealth (a.k.a. telemedicine) appointments — remote e-visits using a smartphone, tablet or computer.

Although telehealth has been around for a few years now, recent updates to regulations and a surge in demand have made it the easiest way to get many different types of medical care.

Most telehealth appointments today tend to be primary care or follow-up visits that can assess symptoms or check on people who have had a medical procedure. Telehealth also works well for some specialties like dermatology or mental health care (counseling/therapy) services. (See “Virus drives demand for online therapy” on page 12.)

So, what can patients expect from a telehealth visit, and how should they prepare?

What tech do you need?
The first step is to call your doctor’s office to find out whether telemedicine visits are available, and whether you will need to set up an account or install special software on your computer, phone or tablet.

Until recently, doctors were required to conduct telehealth visits through platforms such as Doxy, Thera-Link or MyChart that were compliant with the Health Insurance Portability and Accountability Act, or HIPAA.

But some of those requirements have been relaxed in the current crisis, so many providers are using popular apps such as FaceTime, Skype and Zoom to conduct visits.

Become familiar with it
Once you know what technology you will be using, get familiar with it. You don’t want to spend the first 10 minutes of your visit trying to figure out how to unmute the audio.

For older patients who aren’t familiar or comfortable with technology, ask a relative or friend with a smartphone, tablet or laptop to assist you.

Get prepared
Take the time to clarify the purpose of the televisit before it begins. Prioritize a written list of three or four issues you want to discuss with your doctor, and make a list of the medicines you’re taking, along with the dosages.

Also, have relevant medical devices or logs on hand, such as a penlight or smartphone flashlight for viewing a sore throat, a blood-pressure cuff and thermometer (or recent readings), blood-sugar logs if you’re diabetic, or a food log if you have gastrointestinal problems.

If you’ve received medical care at different places, such as an urgent care facility or another doctor’s office, have your latest medical records with you during the telemedicine visit.

Wear loose clothing that will allow you to show your medical provider what is concerning you.

The length of the appointment may depend on the problem. A routine visit could be very quick, while others, such as a physical-therapy appointment, may last as long as a session at a clinic. Waiting rooms are sometimes replaced by virtual waiting rooms.

Arrange for follow-up
Before the visit ends, make sure you know the follow-up plan. Do you need to schedule an in-office visit, fill a prescription or get a referral to a specialist?

Right now, Medicare and Medicaid are covering the cost of telehealth visits (see medicare.gov/coverage/telehealth for details), and most private insurers are following suit.

If, however, you don’t have a primary care physician or you need urgent care, you can get help through a virtual healthcare service like Doctor on Demand (doctorondemand.com) or TeleDoc (teladoc.com). These services currently do not accept original Medicare, but they may be covered by private insurers including some Medicare Advantage plans — be sure to check.

Send your senior questions to: Savvy Senior, P.O. Box 5443, Norman, OK 73070, or visit SavvySenior.org. Jim Miller is a contributor to the NBC Today show and author of The Savvy Senior.
What diabetics should know about COVID

By Jim Miller

Dear Savvy Senior,

My husband and I are both in our late 60s, and have diabetes. We would like to find out if our diabetes increases our risk of getting the coronavirus.

Concerned Diabetics

Currently, there’s not enough data to show that people with diabetes are more likely to get coronavirus (COVID-19) than the general population. But the problem for diabetics is, if you do happen to contract the virus, your chance of developing serious complications are much higher. This is especially true if your diabetes isn’t well controlled.

Here’s what you should know:

**Diabetic risks**

Health data is showing that about 25% of people who go to the hospital with severe COVID-19 infections have diabetes. One reason is that high blood sugar weakens the immune system and makes it less able to fight off infections.

Your risk of severe coronavirus infection is even higher if you also have another condition, like heart or lung disease.

If you do get COVID-19, the infection could also put you at greater risk for complications like diabetic ketoacidosis (DKA), which happens when high levels of acids called ketones build up in your blood.

Some people who catch the new coronavirus have a dangerous body-wide response to it, called sepsis. To treat sepsis, doctors need to manage your body’s fluid and electrolyte levels. DKA causes you to lose electrolytes, which can make sepsis harder to control.

**How to avoid COVID-19**

The best way to avoid getting sick is to stay home as much as you can. If you have to go out, keep at least six feet away from other people. Cover your nose and mouth with a mask. And every time you come back from the supermarket, pharmacy or another public place, wash your hands with warm water and soap for at least 20 seconds.

Also wash your hands before you give yourself a finger stick or insulin shot. Clean each site first with soap and water or rubbing alcohol.

To protect you, everyone in your house should wash their hands often, especially before they cook for the family. Don’t share any utensils or other personal items.

And if anyone in your house is sick, they should stay in their own room, as far as possible from you.

The CDC also recommends that you stock up on medications and diabetes testing supplies to last for at least a month.

Medicare is now covering the cost of telehealth visits, so if you have questions for your doctor, you can ask by video chat or phone instead of going into the office.

**If you get sick**

The most common symptoms of COVID-19 are a dry cough, fever or shortness of breath. If you develop any symptoms that are concerning, call your doctor about getting tested.

If you find that you have contracted COVID-19, the first level of care is to stay home and check your blood sugar more often than usual, and check your ketones.

COVID-19 can reduce your appetite and cause you to eat less, which could affect your levels. You also need more fluids than usual when you’re sick, so keep water close by, and drink it often.

You should also know that many over-the-counter medicines that relieve virus symptoms like fever or cough can affect your blood sugar levels. So, before you take anything, check with your doctor.

And be aware that if you start experiencing severe shortness of breath, high levels of ketones or DKA symptoms like severe weakness, body aches, vomiting or belly pain, you need to see your doctor or get to an emergency room right away.

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Q and As on fainting and forgetfulness

By Howard LeWine, M.D.

Q: What happens inside the body when a person faints?

A: Fainting occurs when something interrupts blood flow to the brain. Although usually harmless, fainting can cause injuries and sometimes signals a problem with the heart or circulatory system.

If you faint, it’s worth talking with your doctor, especially if there doesn’t seem to be an explanation.

Some basic physiology helps explain what happens when a person faints. It’s harder for the heart to pump blood up to the brain than down to the toes. Blood pressure helps overcome the downward tug of gravity and push blood to the head.

We tend to think of blood pressure as a relatively stable entity. It isn’t. It changes every time you stand up, sit down, bend over, eat, sneeze, get stressed or relax. The human body is designed to counter these shifts and quickly bring blood pressure back to its usual point.

This requires an intricate feedback system that involves sensors in the aorta and in the carotid arteries leading to the brain. These sensors stimulate a host of nerve and hormone signals that change how fast the heart beats, how much blood it pumps with each beat, and the contraction and relaxation of blood vessels.

When blood pressure falls for any reason, heart rate should speed up and blood vessels should contract to maintain blood flow to the brain.

The brain requires a constant supply of sugar and oxygen to function. If the heart and blood vessels don’t respond to low blood pressure as they should, the brain quickly goes into an energy-conserving shutdown. The brain’s signals to nerves and muscles stop, and the person slumps to the ground.

Once the body is horizontal, it’s easier for the heart to pump blood to the head. Usually the brain “wakes up” again within seconds. That may not be true if loss of consciousness was due to a heart problem.

Role of the vagus nerve

Most fainting episodes result from excessive stimulation of the vagus nerve. Known as vasovagal syncope, it happens when blood vessels relax and blood pressure starts to fall.

The vagus nerve sends signals to the heart to slow down, lowering blood pressure even more. Blood flow to the brain halts, and the person blacks out and collapses.

Many situations can trigger an episode of vasovagal syncope. Standing for a long time in a hot, crowded environment is a common one.

Sometimes the trigger is a strong emotion, such as the response to bad news. Some people faint when they see blood, have a coughing spell, laugh hard or strain to urinate or move their bowels.

Vasovagal syncope is more common in people under 35, in part because the nervous system is more sensitive in younger people.

Q: I am getting more forgetful. I will sometimes walk into a room and not remember what I wanted to do. When are memory changes like these worrisome?

A: Memory lapses like what you describe are very common as we get older. They can be unsettling, but they don’t necessarily herald impending dementia. The key is in how often these slips occur.

Keep track of the pattern. Is it happening several times a week, or is it happening once or twice a month? Is it a change compared to a few years ago? Is it getting gradually worse?

Forgetfulness can be a normal part of growing older. Memory lapses can also stem from several other conditions, including lack of sleep, stress, medications, alcohol or depression.

Any of these conditions can be treated. For example, you can adjust your sleep schedule, try deep breathing or other techniques to reduce stress, change the dose or type of medications you take, cut down on your drinking, or get treated for depression.

Don’t be alarmed by occasional forgetfulness. The time to call your doctor is if it’s more persistent or if you develop worsening memory loss that’s interfering with your daily activities and routine.

What you can do now

Clinical studies continue to show that exercising daily, eating a healthy diet, such as the Mediterranean diet, and getting enough sleep are the best ways to maintain brain health.

Regular exercise can slow the progression of and may even prevent cognitive decline. Exercise is thought to shield the brain from damage in a number of ways: by improving blood flow, protecting the blood vessels that feed the brain, and reducing stress hormone levels.

There have been some large studies showing a benefit of the Mediterranean-style diet in slowing and perhaps preventing cognitive decline as we age. The Mediterranean diet includes fresh fruits and vegetables, whole grains, olive oil, nuts, legumes, fish and small amounts of red wine.

Growing evidence suggests that enough good quality sleep leads to greater clearance of amyloid from the brain, which can help prevent Alzheimer’s disease. Aim for seven to nine hours per night.

Other ways to help maintain cognitive fitness include staying socially connected and learning new things, such as taking a course at a local college or picking up a new instrument.

Howard LeWine, M.D., is an internist at Brigham and Women’s Hospital in Boston and assistant professor at Harvard Medical School. For additional information, visit health.harvard.edu.

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Take steps to avoid heat-related illnesses

Q: Temperatures exceed 90 degrees Fahrenheit for much of the summer season in Virginia. How do I keep myself safe during these summer months?

A: Climbing temperatures coupled with high humidity can pose health risks to many people.

Older adults in the community are at an increased risk for heat-related illness due to age-related changes in skin thickness, a decrease in sweat production, and the potential for exacerbating health conditions. Some health conditions of particular concern include heart, lung or kidney disease, and high blood pressure.

Heat-related illness is a collective term that includes heat stroke, heat edema (or swelling), heat syncope or dizziness, heat cramps and heat exhaustion.

Heat stroke is the most severe; a person who is experiencing a heat stroke should call 911 and seek medical attention immediately. Symptoms of heat stroke may include:

• Dry or flushed skin
• Racing pulse
• Lack of sweating

In more serious cases, a person may exhibit behavior changes or confusion and could suddenly lose consciousness.

Other heat-related illnesses are not immediately life threatening; however, if left untreated, they can pose serious health risks.

If you or someone you know is exposed to high temperatures and humidity during this season and notice leg swelling, excessive sweating, nausea and vomiting, muscle cramping, extreme thirst, fatigue or dizziness, they are likely experiencing some form of heat sickness.

Seeking shelter from the heat is the first step to staying safe from heat sickness. Other treatments for these conditions include cooling the body with cool showers and cool compresses on the neck, armpits and groin area.

The symptoms and risks of heat-related illness can be prevented with several easy-to-follow tips:

Drink every hour. Because dehydration is common with these high temperatures, adequate fluid intake is most important. Even when indoors, increasing water consumption on days with temperature and humidity alerts may help prevent heat-related health issues. It is recommended to set a goal to drink something every hour rather than waiting until you feel thirsty.

Avoid your stove. Cooking with a stove or oven significantly increases temperatures inside the home and can make it difficult for air-conditioning units and fans to keep up. Preparing foods ahead of time or eating cold meals decreases the use of these appliances and reduces heat in homes.

Easy does it. Exercise and other strenuous activity should be avoided between the hours of 10 a.m. and 4 p.m., as this is the hottest period of the day. And when engaging in these activities, wearing loose, light-colored clothing made of cotton is cooler and will make these activities more manageable.

If you have any questions about heat-related illnesses, talk with your medical provider or local community pharmacist. Katie Jones is a fourth-year Pharm.D. student at VCU School of Pharmacy. She studied biology and minored in chemistry at Virginia Commonwealth University. After graduation, she hopes to pursue a career in geriatric pharmacy.
Got mobility or balance issues? UpBed™ is the ONLY adjustable bed that puts your feet safely on the ground.

The only adjustable bed that helps you “Get Up and Go” by yourself!

For millions of Americans, “Rise & Shine” has become a thing of the past. Mobility and balance issues have forced many people to struggle getting in and out of bed. Not being able to get out of bed by yourself can be inconvenient, undignified and downright dangerous. To solve this problem, this product has been introduced in continuing care and other health care facilities. Now, thanks to firstSTREET, the leading marketer of innovative products for seniors in the United States, that same bed can enable people to get up, get going and live independently in their home. It’s called the UpBed™, and there is nothing else like it. The secret to the UpBed™ is its revolutionary system for raising the mattress to any position for a variety of activities. It features a state-of-the-art mattress with memory foam for a great night’s sleep… like sleeping on a cloud. With the touch of a button, it gently raises your upper body to a “sitting up” position, perfect for reading a book or watching TV. Another touch and it moves to a full sitting position, enabling you to eat, knit, play cards… all in a comfortable position. Time to get out of bed? It’s never been easier or safer. The bed elevates slowly, and the bottom of the mattress curls in, enabling you to put your feet firmly on the floor while the bed lifts you gently towards the “nose over toes” position where you simply stand and walk away. It’s easy, safe and no other bed can do it.

Nothing is worse than spending the night worrying about how you are going to get out of bed. Call now, and a helpful, knowledgeable product expert can tell you how you can try out the UPbed™ for yourself, in your own home. Delivery of the bed is most convenient as we offer to-your-door delivery or we can provide White Glove delivery and we will completely set up the bed where you would like. Call today!

Call now to find out how you can get your own UpBed!
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Summer bean, corn and avocado salad

By America's Test Kitchen

For an easy, light, summertime bean salad, we combined fiber-rich black beans with fresh corn, bright tomato and creamy avocado. Toasting the corn in a skillet until golden-brown will bring out its natural sweetness. Chipotle chile, cilantro and lime juice provide the perfect Southwestern flavor profile to this easy-to-prepare salad.

Fresh corn is important for the flavor of the salad — don’t substitute frozen or canned corn.

Southwestern Black Bean Salad

Servings: 4

Start to finish: 15 minutes

Ingredients:
2 scallions, sliced thin
3 tablespoons lime juice (2 limes)
2 tablespoons extra-virgin olive oil
1 ½ teaspoons minced canned chipotle chile in adobo sauce
Salt and pepper
2 ears corn, kernels cut from cobs
1 (15 ounce) can no-salt-added black beans, rinsed
1 tomato, cored and chopped
1 avocado, halved, pitted and cut into ½ inch pieces
3 tablespoons minced fresh cilantro

Directions:
Whisk scallions, lime juice, 1 tablespoon oil, chipotle, ¼ teaspoon salt and ¼ teaspoon pepper together in large bowl. Heat remaining 1 tablespoon oil in medium skillet over medium-high heat until just smoking. Add corn and a dash of salt and cook, stirring occasionally, until golden-brown, 6 to 8 minutes. Transfer corn, beans and tomato to bowl with dressing and gently toss to coat. Gently fold in avocado and cilantro. Season with pepper to taste and serve.

Nutrition information per serving: 302 calories; 145 calories from fat; 16 g. fat (2 g. saturated; 0 g. trans fats); 0 mg. cholesterol; 462 mg. sodium; 35 g. carbohydrate; 13 g. fiber; 5 g. sugar; 10 g. protein.

—AP

Have you heard of the other green tea?

By Lori Zanteson

It seems there’s another member in the green tea family. And it’s not even green! That’s because hojicha (pronounced HOE-je-cha) is made from roasted green tea leaves, stems and stalks, giving it an earthy reddish-brown hue that makes it look more like black tea or coffee than its verdant cousins. Very popular in Japan, mellow, slightly sweet and smooth, hojicha (also houjicha), is patiently steeping its way into North America, popping up at mainstream tea and coffee houses such as Starbucks and flooding social media sites.

But how does this emerging trend compare to its ancient green tea ancestry?

Origins
Compared to traditionally prepared green tea, which has been around for thousands of years, hojicha is a relative newcomer to the tea scene. It’s said to have debuted in the 1920s in Kyoto, Japan, the roasted result of tea merchants attempting to make economic use of the stems and stalks that were mixed among the green tea leaves during harvest. Apparently, the aroma of the roasted concoction was so inviting, it lured people into the shops.

What is it?
Hojicha is a general term for any roasted Japanese green tea, so it may be made from sencha, bancha or kukicha leaves, stems and twigs, depending on the preference of the tea maker. Variations produce slightly different flavors and aromas. All Japanese green teas are made from leaves steamed right after harvest. What makes hojicha different is that it is then roasted at high temperature, which affects the nutrient profile and flavor.

Roasting breaks down the compounds — caffeine, tannins, flavonoids — that make tea bitter tasting and acidic. The result is a milder brew that has a toasted flavor that’s slightly nutty, sweet and smoky, with less of a caffeine jolt.

Health benefits
Green tea is well known for its health benefits due to its impressive supply of antioxidants that fight inflammation and protect cells from damage that can lead to illnesses like type 2 diabetes and heart disease. It also contains an amino acid, L-thianine, which See GREEN TEA, page 12

To subscribe for half price, see page 21.
Virus drives demand for online therapy

By Matthew Perrone

The coronavirus pandemic is driving up stress levels for many Americans — and new business for online therapy companies. More than four in 10 U.S. adults say worries tied to the outbreak are impacting their mental health, according to a recent poll by the Kaiser Family Foundation.

Not surprisingly, companies that offer online therapy are seeing increased demand for video and text-based consultations.

Dr. Neil Leibowitz, chief medical officer of Talkspace, spoke with the Associated Press about what the coronavirus may mean for the present and future of teletherapy. The conversation was edited for clarity and length.

Q: How is the outbreak affecting Talkspace’s business?
A: Unfortunately or fortunately, we’re seeing significant growth, as high as 65 to 70% in the last month, of new clients coming into treatment. And we’re seeing growth coming from every aspect of people seeking help.

We’re seeing people with anxiety about coronavirus or things related to friends and family and keeping them safe. A lot of people are coming in with anxiety related to their economic circumstances.

And then what’s been popping up more and more as we get deeper into social distancing and stay at home orders has been couples seeking counseling or help with relationships.

Q: Do you expect these people to become long-term users?
A: For a lot of people going through this, what they need is a brief intervention to help them adjust. They’ll need help acclimating with some issues that they’re maybe having with their families.

So, there’s going to be a subset of people who cycle through therapy, and a couple weeks or two months is really what meets their needs. And that’s okay.

There are other people for whom this will be a significant episode and launch them into long-term treatment. And the average person coming to us stays for somewhere between three and six months. And we don’t expect it to be significantly different coming through this current situation.

Q: Public and private insurers have been trying to promote broader use of telemedicine for years. What does this crisis mean for that effort?
A: I think a lot of us in the virtual and the telehealth space have been trying to reach the inflection point. In a way, reaching it this way is a little less satisfying because there are so many people going through pain.

But sometimes it may take an event for people to try something new because we’re so stuck in our patterns. It seems so normal to go to an office and seek treatment. And we don’t really think about, ‘Well, why are we leaving work to do this? Why are we sitting for hours to go to an appointment when I can just go on a screen or I can message at any time when I have a five-minute break?’

So, I think that this could be that inflection point for a lot of people where they really see this is something that is positively changing how they access their care.

For more information, visit talkspace.com.

—AP

Green tea

From page 11

produces a calming effect to reduce stress.

While roasting does lessen the amounts of these health-protecting compounds, research shows that roasted tea has high antioxidant activity and is beneficial to human health.

Hojicha, available as a loose tea or a fine powder, might just be a great addition to a tea lover’s collection, or a worthy new taste for someone who likes the idea of tea’s benefits, but without the bitterness or caffeine.

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Stand Up Straight and Feel Better

Discover the Perfect Walker, the better way to walk safely and more naturally

It’s a cruel fact of life, as we age, gravity takes over. Our muscles droop, our bodies sag and the weight of the world seems to be planted squarely on our shoulders. We dread taking a fall, so we find ourselves walking less and less— that only makes matters worse.

Well, cheer up! There’s finally a product designed to enable us all to walk properly and stay on the go. It’s called the Perfect Walker, and it can truly change your life.

Traditional rollators and walkers simply aren’t designed well. They require you to hunch over and shuffle your feet when you walk. This puts pressure on your back, your neck, your wrists and your hands. Over time, this makes walking uncomfortable and can result in a variety of health issues. That’s all changed with the Perfect Walker. Its upright design and padded elbow rests enable you to distribute your weight across your arms and shoulders, not your hands and wrists. Its unique frame gives you plenty of room to step, and the oversized wheels help you glide across the floor.

Once you’ve reached your destination you can use the handbrakes to gently slow down, and there’s even a handy seat with a storage compartment. Its sleek, lightweight design makes it easy to use indoors and out and it folds up for portability and storage.

Why spend another day hunched over and shuffling along? Call now, and find out how you can try out a Perfect Walker for yourself... in your own home. You’ll be glad you did.

Perfect Walker
Call now Toll-Free 1-888-639-6880
Please mention promotion code 113053.

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Many spices are natural blood thinners

Blood health can be manipulated by foods, spices and drugs. Clots do not happen to everyone who gets the virus; in fact, some people don’t even know they’ve been exposed or infected!

So, as you read this article, please know that my intention is not to provoke fear or anxiety; it is to offer sensible advice, so you can improve your blood health. Furthermore, I am not suggesting any of this as a treatment for COVID-19 or any coronavirus.

**Dried spices**
- Paprika
- Cayenne pepper
- Chilies
- Thyme
- Garlic
- Cinnamon (contains coumarin, a powerful blood thinning agent)
- Curry powder
- Dill
- Ginger
- Oregano
- Curry powder
- Turmeric

**Foods**
- Ginger (fresh, sliced)
- Dill (fresh)
- Peppermint (fresh)
- Beets (high in nitrates)
- Walnuts (high in vitamin E)
- Salmon (omega 3 fatty acids)
- Cherries
- Berries (blueberries, strawberries, cranberries)
- Chocolate (due to flavonol)

- Citrus (oranges, tangerines)
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Executive Director’s Message
Dr. Thelma Bland Watson
Executive Director, Senior Connections, The Capital Area Agency on Aging

Preparing for the Future: Response to COVID-19 and Survey for the Four-Year Plan for Aging Services

Response to COVID
We regret the loss of so many lives and the significant suffering that has come with COVID-19.

We have also identified many challenges and opportunities. In response, we continue to join with community partners to address the immediate and long term needs of older adults and caregivers. We salute our staff and volunteers who have worked tirelessly to ensure needed services in this time of crisis. We also thank our many community partners who are working with us to ensure needed resources. We thank the many funders and supporters who generously support our mission.

We express special thanks to the Virginia Department for Aging and Rehabilitative Services (DARS) and Commissioner Hayfield for their support and guidance. Also, thanks are extended to the Virginia Department of Rail and Public Transportation (DRPT) for ongoing support and guidance.

Most of all, we salute and thank older residents and caregivers in all of our communities for their determination and wisdom. Due to the nature of COVID-19 and the many needs that we are seeing, we are targeting assistance for coronavirus as a priority for our 17th Annual Empty Plate Campaign that is now underway.

With anticipated proceeds from this year’s Campaign, we will be able to fill more “empty plates” for older adults and caregivers who have no other sources of assistance. We will be able to assist them with meals, groceries, personal supplies, transportation, home care and other critical needs. The generosity of our contributors gives us much hope for the future.

Therefore, we extend special thanks to those who have already contributed to our Empty Plate Campaign. We also extend a special invitation to others who may wish to contribute to this important effort. You may contribute on our website at www.seniorconnections.org or send your donation to Senior Connections, CAAA, 24 East Cary Street, Richmond, VA 23229. Thanks for helping us fill “empty plates” this year and into the future!

Survey for the Four-Year Plan for Aging Services
In this issue of Engage at Any Age, you will find a survey to gather input for the Four-Year Plan for Aging Services that is being updated this year. The current Plan is effective until September 30, 2023.

This continues to be an important time in Senior Connections’ history as we prepare for the Agency’s 50th year of service in December 2023. This Plan addresses priority needs and plans for the provision of home and community services funded by the federal Older Americans Act through the Virginia Department for Aging and Rehabilitative Services (DARS). Thank you for completing the survey and returning it to us, to give us your input, including ideas and insights. We look forward to seeing your suggestions and using your input to help shape current and future services. If you prefer, you may fill out the survey on our website at www.seniorconnections.org. We value and appreciate your input and participation.

Thank you and best wishes.

Executive Director

Senior Connections, The Capital Area Agency on Aging: Almost 50 Years of Service

Established as a private nonprofit organization in 1973 and governed by a Board of Directors, the Agency provides services for older adults and caregivers residing in Planning Service Area (PSA) 15, which includes the City of Richmond and the Counties of Charles City, Chesterfield, Goochland, Hanover, Henrico, New Kent, and Powhatan. The Agency also serves as the Region’s designated No Wrong Door Service Program. Additionally, the Agency co-manages the Greater Richmond Age Wave Coalition with the Department of Gerontology at VCU.

Senior Connections is designated as the Area Agency on Aging for the development and enhancement of comprehensive, coordinated home and community-based services for older adults and caregivers. Roles and responsibilities include: advocacy, planning, coordinating services, information/assistance, leadership, partnerships, collaboration, focal point for services, and assessing/meeting the needs of older adults. This designation is from the U.S. Administration for Community Living (ACL) through the Virginia Department for Aging and Rehabilitative Services (DARS).

Summary of Services
In support of addressing social connections and helping individuals age successfully, Senior Connections is proposing these programs and services as part of the 2020-2023 Area Plan for Aging Services:
- Adult Day Care (Partnership with local Adult Day Care Centers)
- Care Coordination (Assessment of Service Needs)
- Care Transitions (Hospital-to-Home Partnership with Hospital Systems to Reduce Readmissions and Help Older Adults Connect with Community Resources)
- Caregiver Counseling and Support (Information and Assistance to Help with Duties)
- Chore Services (Heavy house work or yard work)
- Communication, Referral, Information & Assistance (CRIA)
- Congregate Meals and Activities (Friendship Cafes)
- Emergency Services (Critical Needs: Help with Payments for Housing, Utilities, and Medications)
- Employment and Training Assistance (Job Training and Referrals/Matches)
- Health and Wellness Classes (Evidence based for workshops on Chronic Disease Self-Management and Fall Prevention)
- Home Delivered Meals (Meals on Wheels: Partnership with FeedMore, Inc.)
- Legal Assistance (Partnership with Central VA Legal Aid and Senior Legal Day)

Long-Term Care Ombudsman and Elder Abuse Prevention (Information & Complaint Resolution)
Money Management (Check Writing for Bills and Budget Management)
- No Wrong Door (Virtual system and statewide network of shared resources designed to streamline access to long term services and supports)
Nutrition Counseling
Options Counseling (Choices for Service Selection)
Outreach & Public Information & Education (Presentations, Health/Resource Fairs, Newsletters, Publications, Press Releases, Advertising, Website)
Personal Care, Homemaker and Respite Services (Partnership with Home Care Providers and Direct Payments to Caregivers)
Residential Repair and Renovation
- Socialization & Recreation (Exercise, Arts, and Activities)
- Telebridges Telephone Support (Volunteers Connect with Seniors)
- Transportation and Mobility Management (Rides to and from Friendship Cafes and Ride Connection for Medical Appointments)
- Virginia Insurance Counseling and Assistance Program/VICAP (Help with Medicare and Other Insurance)
- Volunteer Opportunities (Engagement)

Planning for the Future
The Agency’s Board of Directors, Advisory Council and Staff is engaged in a multi-year Planning Process. This process involves the integration of several planning initiatives: The Greater Richmond Regional Age Wave Readiness Plan, Updated Strategic Plan, and the Implementation of the Four-Year Plan for Aging Services, which is approved by the Virginia Department for Aging and Rehabilitative Services (DARS). Also, the Board is adopting a Communication Plan.

The Longevity Project (formerly Greater Richmond Regional Age Wave Coalition)
Senior Connections continues to partner with the Department of Gerontology at VCU to lead work of the Longevity Project, which is intended to guide creation of livable communities for all ages. Senior Connections has a key role in implementing several important service components of the Coalition: Transportation Coordination, Homeless Diversion pilot program, Longevity Center, and the No Wrong Door partnership expansion with focus on increasing social connections.

See SENIOR CONNECTIONS, page B-2
Senior Connections

From page B-1

Strategic Plan Update

Strategic Plan Update sets goals and directions for Agency Programs and Activities based on four focus areas: Visibility/Marketing, Programs/Services, Funding/Resources, and Sustainability.

Goals are:
• Create distinctive and recognizable public image (brand) for Senior Connections.
• Increase development and delivery of comprehensive and collaborative programs that address the short term and long term needs of older adults, adults with disabilities and their caregivers.
• Develop diverse, sustainable funding sources while continuing strong stewardship of all resources.
• Sustainability.

Area Plan for Aging Services

Area Plan for Aging Services serves as the blueprint for the work of Senior Connections and is the official funding application to the Virginia Department for Aging and Rehabilitation Services (DARS). It also informs interested persons about the intent of the Agency to deliver services outlined under the Older Americans Act. The Plan describes the manner in which the Agency will continue to develop a comprehensive and coordinated delivery system for older adults, caregivers, and their families. This is the second year of a Four-Year Plan and covers the time period October 1, 2020 – September 30, 2021.

Funding Sources

Senior Connections receives funding from the federal Older Americans Act and the Virginia General Assembly through the Virginia Department for Aging and Rehabilitation Services (DARS). The Corporation for National and Community Service provides funding for volunteer initiatives—the Foster Grandparent Program and RSVP Ride Connection for trips to and from medical appointments is funded by the Virginia Department for Rail and Public Transportation. Other federal and state funds support the Agency’s Programs and local funds are provided by city and county governments. All the local governments support special initiatives for planning, services and recognition in support of older adults and caregivers. They also support the Longevity Project and the No Wrong Door Service Coordination Program.

Senior Connections also receives contributions from citizens in the communities it serves in addition to grants from the United Way of Greater Richmond & Petersburg, local corporations and foundations. Corporate sponsors include Dominion Energy, Bank of America, Genworth, Bon Secours, and Trust. Local foundations include the Richmond Memorial Health Foundation, The Community Foundation, and The Pawley Family Foundation, The Herndon Foundation, and the Registrer Foundation. The Agency also receives grants from Aflria’s Employee Community Fund. Local fundraising efforts include the Empty Plate Campaign which provides money to help meet critical needs and service gaps.

Needs Assessment Impact of Demographics

The Area Plan reflects important population trends in our region, Planning and Service Area (PSA) 15. The number of older adults in PSA 15 is increasing, with an estimated 206,200 individuals age 60 and over according to the 2012-2016 American Community Survey, 5-Year Estimates. The number of persons age 85 and over is the fastest growing group. The population is also becoming more diverse and there is a growing minority population of older Asian Americans and Hispanics. By the year 2030, we will see a doubling of our older population, with the Baby Boomers continuing to retire. At-risk groups include older adults with low incomes, older adults living with disabilities, individuals aged 85 and older, older adults living alone, and older adults who are geographically isolated. Advanced age, disability, poverty, and geographic isolation are risk factors in and of themselves and the combination of two or more of these risk factors is likely to have significant impacts on the independence and well-being of older adults, putting them at-risk for decreased quality of life, social isolation, loss of independence, poor health outcomes, and shortened lifespan. Living alone is another factor that can put individuals at risk for social isolation and reduced quality of life. In our region, approximately 28.9% of older adults aged 65+ live alone.

Community Input

Public Comment Sessions:

For the four year Area Plan cycle, Senior Connections conducted five Public Comment Sessions at the Hanover Council on Aging meeting at the Department of Social Services on 6/10/2019, at Senior Connections on 6/12/2019, at the New Kent Friendship Café on 6/13/2019, at the Powhatan Friendship Café on 6/17/2019, and the Chesterfield Council on Aging meeting at Lucy Corr on 6/27/2019 to gain public input and make the community aware of the Area Plan Update.

Key issues/needs identified at the comment sessions are:
• Affordable, accessible transportation for medical appointments and personal business
• Information about services and resources to older adults and their families using a variety of means to disseminate information
• Need to partner with localities to address local issues and develop programs and services to meet local needs
• Affordable and accessible housing, housing stability and livable communities
• Need more health and wellness classes and recreational activities for older adults
• Reaching individuals who are vulnerable/isolated
• Education on use of technology

Public Comment Survey

A Public Comment Survey was posted on the Senior Connections website during the month of June, 2019. The five greatest needs identified by survey participants in the greater Richmond area are:
• Affordable housing
• Knowing what services are available and how to access them
• Available and affordable transportation for shopping and errands
• Available and affordable transportation for medical trips
• Health insurance information and counseling

According to Public Comment survey participants, the most important services provided by Senior Connections to help older adults remain in their communities are:
• Transportation
• Medicare and Insurance Counseling
• Information on and assistance with services
• Home Delivered Meals
• Care Coordination

Community Partner Survey

Senior Connections did an electronic survey of 110 community partners in April 2020 to obtain feedback on services and programs. Fifty-nine partners responded. One survey question asked which service areas should be expanded and the top responses were:
• Behavioral health issues
• Transportation Coordination
• Care Coordination
• Care Transitions
• Benefit Enrollment Center
• Housing related issues

Priorities for the Four-Year Plan for Aging Services

Continue Older Americans Act core programs including Access and Supportive Services, Health and Wellness, Caregiver, and the Elder Rights Programs. Programs and services need to be defined individually based on local needs. Increase access to Mobility Management Services to help residents find and use accessible and affordable transportation services, especially for medical needs. Expand Care Transitions and Evidence-based Programs, including Chronic Disease Self-Management and Fall Prevention.

Provide person-centered planning for older adults and their caregivers across the spectrum of long-term care services, including home, community and institutional settings.

Work with other community stakeholders to develop “Risk” Index / Social Network Scale (rubric) to identify and connect clients at-risk and to provide data necessary to support interventions and service strategies to address isolation.

Expand the No Wrong Door System to add additional community partners in order to capture information for referral networks that can both inform regional dashboard of community health for our aging demographic and lead to pre-emptive interventions that improve access to services and reduce risks of social isolation.

Expand volunteer opportunities within and outside of the Agency by integrating internal Agency volunteer programs and coordinating a forum on volunteering in the Greater Richmond area.

Continue to participate in Age Wave implementation which promotes engagement and connectedness of older adults in our community.

Promote use of advance planning through assistance with legal documents such as wills, powers of attorney and advance medical directives and through education concerning other end of life issues.

Develop strategies to reach and serve culturally diverse older individuals and caregivers.

Provide information, referral and assistance to Veterans and Military Dependents and family members.

Work with local governments to ensure that information about resources and services...
Senior Connections Public Comment Survey

Senior Connections is designated as the Area Agency on Aging for the development and enhancement of comprehensive, coordinated home and community based services for older adults and caregivers. We serve the City of Richmond and Counties of Charles City, Chesterfield, Goochland, Hanover, Henrico, New Kent and Powhatan.

Senior Connections is conducting an assessment of the needs of older adults and caregivers in the Greater Richmond Area for our Four Year Plan for Aging Services. This Plan started October 1, 2019 and runs through September 30, 2023. The Plan serves as the blueprint for the work of Senior Connections and is the official funding application to the Virginia Department for Aging and Rehabilitative Services. This Plan will be updated annually.

Please help us plan and prioritize services for older adults and caregivers in your community by answering our survey.

1. Where do you live? County or City of Residence
   - Charles City
   - Chesterfield
   - Goochland
   - Hanover
   - Henrico
   - New Kent
   - Powhatan
   - City of Richmond
   - Other

2. Please tell us your age range.
   - Under 60
   - 60-64
   - 65-69
   - 70-74
   - 75-79
   - 80-84
   - 85 or older

3. Please tell us your gender.
   - Male
   - Female
   - Transgender
   - Prefer not to answer

4. Please tell us your Race/Ethnicity.
   - White or Caucasian
   - Black or African American
   - Hispanic or Latin
   - Asian or Asian American
   - American Indian or Alaska Native
   - Native Hawaiian or other Pacific Islander
   - Two or more races
   - Some other race
   - Prefer not to answer

5. Are you a veteran?
   - Yes
   - No

6. What are the greatest needs of older adults in the Greater Richmond Area?

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<th>Moderate Need</th>
<th>Little Need</th>
<th>I Don’t Know</th>
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<td>Help Making Choices about Future Medical Care and End of Life Decisions</td>
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<td>Job Training and Referral Services</td>
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<td>Knowing Services are Available and How to Access Them</td>
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<td>Legal Assistance</td>
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<td>Maintaining a Healthy Diet</td>
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<td>Someone to Call and Check on Older Adults in the Community</td>
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<td>Other (please specify)</td>
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7. Please tell us how important the following Senior Connections Services are for helping older adults remain in their communities.

<table>
<thead>
<tr>
<th>Service</th>
<th>Very Important</th>
<th>Somewhat Important</th>
<th>Not Important</th>
<th>I don't know</th>
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<tr>
<td>Adult Day Care</td>
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<td>Care Coordination</td>
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<td>Care Transitions</td>
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<td>Caregiver Education, Support and Training</td>
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<td>Chore Services (heavy cleaning, yard clean-up)</td>
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<td>Congregate Meals and Activities through Friendship Cafes</td>
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<td>Employment Services</td>
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<td>Health and Wellness Classes</td>
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<td>Home Delivered Meals</td>
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<td>Homemaker and Personal Care Services</td>
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<td>Information On and Assistance with Services and Resources</td>
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<td>Medicare and Insurance Counseling</td>
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<td>Legal Assistance Services</td>
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<tr>
<td>Respite Services (Caregivers break from day-to-day responsibilities)</td>
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<td>Telephone Reassurance</td>
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<td>Transportation</td>
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<tr>
<td>Volunteer Programs</td>
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</tbody>
</table>

8. What services do older adults need but are not currently available?

9. What three sources do you use most often to obtain information about services and program for older adults?

- Newspaper
- Television
- Word of Mouth
- Social Media
- The Internet
- Health Care Provider
- Faith Community/Clergy
- Area Agency on Aging
- Community Organization
- Community Groups
- Radio
- Other (please specify)

10. Do you currently or have you ever received services from Senior Connections?

- Yes
- No

11. Do you have any additional comments?

12. How have these needs changed since the start of the COVID-19 crisis?

- Not at all
- Somewhat
- Quite a bit
- A great deal

Please mail this survey to:
Ms. Marge Boynton
Senior Connections
24 East Cary Street
Richmond, VA 23219

You may also fill out this survey online at:
seniorconnections-va.org

Please submit comments and questions by Wednesday, July 1, 2020 to:
Marge Boynton,
Senior Connections,
24 E. Cary Street,
Richmond, VA 23219;
or email to mboynton@youraaa.org; or call (804) 343-3054.
How to ask your bank or lender for help

By Liz Weston

Many banks, credit card issuers and other lenders have promised to help those impacted by the coronavirus pandemic. They're offering to defer or reduce payments and waive interest charges and late fees for those who have lost jobs, had their hours reduced or otherwise lost income due to the COVID-19 crisis.

The help usually isn't automatic, however. You have to ask for it — and ask the right way.

"In many cases, you only get the help if you contact your creditor and mention that you need relief due to the coronavirus situation," said Lauren Saunders, associate director of the National Consumer Law Center. "And that’s very frustrating because it’s very difficult to get through to your bank or lender."

Many financial institutions are encouraging people to reach out digitally — through live chats or messaging on the companies’ sites or in their mobile apps. However you connect, there are important questions that need to be answered, including:

What steps do I need to take to qualify?

You can start your research on the financial institution’s site to see what kinds of help may be available and how to apply. Generally, you’ll want to confirm the details with a human being, including the steps you must take to apply, said Saunders, who advises keeping a record of the conversation and what you were told.

You can take written notes of phone calls, including the time, date and name of the company representative, or take screenshots of electronic communications.

"Some people assume that (a hardship program) will automatically kick in if they just miss a payment, which is very dangerous to assume," said Bruce McClary, a spokesman for the National Foundation for Credit Counseling.

Skipped payments can lead to credit score damage and collection calls, and could limit the hardship options available.

There’s one forbearance program that is automatic, but it pertains only to student loans held by the federal government. Payments on those loans are suspended until Sept. 30, and interest has been waived.

Exactly how does it work?

Companies take different approaches to their hardship programs. One lender may allow you to skip payments but charge you late fees; another may waive the fees but report skipped payments to the credit bureaus.

Most will continue to charge interest, and some will expect you to make a lump sum payment of the amount you skipped.

"This is not free money," Saunders said. "It's just putting off a debt that you’ll have to repay along with your other debts later."

Even if your financial hardship is over, you may not be able to cough up several months’ worth of payments at once, McClary noted. "The last thing you want is to have to drop some big lump sum of money on somebody when you’re in a financially fragile state," McClary said.

"It’s important to try to negotiate different terms," he said. Ask if the payments can be tacked on to the end of the loan or paid off over time, McClary suggested.

Also request that the account be reported “paid as agreed” to the credit bureaus to avoid a potentially large hit to your credit scores.

How long will the help last?

A hardship program may last three to six months, but you could have the option to extend the relief if you ask.

If you can’t make the payments on your federally backed mortgage because of the coronavirus pandemic, for example, you have the right to skip payments for nearly a year. The CARES Act requires lenders to give affected borrowers forbearance of up to 180 days, with the option to request an additional 180 days after that.

Lenders may not make that clear, however. Some borrowers who asked for mortgage forbearance in recent days were told they would owe a lump sum after three months, with no mention of the potential extensions.

These rules apply only to mortgages.

Coronavirus relief act waives 2020 RMDs

The recent coronavirus relief legislation, or CARES Act, made several important changes affecting charitable deductions as well as Required Minimum Distributions (RMDs).

It increased the charitable contribution deduction that a taxpayer is entitled to claim for cash contributions made to most public charities during the 2020 calendar year.

Prior to the CARES Act, contributing to public charities was limited to 60% of individuals adjusted gross income (AGI). Now, if you itemize, the limit has been increased to 100% of AGI. If you contribute more than your AGI, you can carry forward your deduction for five years.

The CARES Act also added a new deduction for taxpayers who do not itemize. For 2020, individuals who make a charitable contribution can take a $300 ($600 for joint returns) “above the line” adjustment. This adjustment reduces the AGI, and accordingly reduces your tax liability.

The law also changed the rules associated with RMDs for 2020. You no longer need to make any RMD withdrawals in 2020.

This is very helpful because of the significant drop in equity prices this year. (Now, that money can remain in your account, potentially allowing you to recoup some of the investment losses from March and April.)

These rules are applicable not only to individual retirement accounts but also to defined-benefit plans and 457 plans.

Because there is no need to take unnecessary RMDs this year, which would raise your taxable income, taxpayers who normally make qualified charitable distributions (QCDs) directly from their IRA custodians may find it to their advantage to postpone charitable contributions to 2021 and make larger charitable contributions then. For the charity to be qualified, it must be eligible to receive tax-deductible donations.

Main advantage

The advantage of the QCD is that these contributions reduce your adjusted gross income (AGI), and accordingly reduce your tax liability.

By doing this, you may also minimize income-based Medicare Part B and D premiums, and even avoid a 3.8% surtax applicable to net investment income for taxpayers filing joint returns with AGIs above $250,000.

The QCD rules apply only to traditional IRAs and not to distributions from SIMPLE IRAs, qualified employer plans, 403(b) plans or SEPs.

What if you’ve already taken your RMD?

Many individuals have already taken their required minimum distributions (RMDs) prior to the CARES Act being passed. Fortunately, the IRS allows (see Notice 2020-27) any distribution taken between Feb. 1, 2020 and May 31, 2020 to be rolled over back into your retirement account if it is done by July 15, 2020.

If you have had income tax withheld, you will not receive that back immediately. However, when you file your tax return for 2020, if you are entitled to a refund, you will receive back the income tax that was withheld.

If you took an RMD in January 2020, you have another option: The CARES Act allows those impacted by the coronavirus to take a loan from their retirement account up to $100,000, or the vested amount in their retirement account, whichever is lower, without penalty, and to repay it over a three-year period. The withdrawal is not taxable if you repay the loan within that period.

Regardless of distribution requirements, many taxpayers make QCDs to reduce tax liability. Even though minimum distributions are not required for 2020, the QCD remains a valuable tool to minimize your tax liability if you do not itemize, and plan on making charitable contributions in 2020.

Elliot Raphaelson welcomes your questions and comments at raphelliot@gmail.com. © 2020 Elliot Raphaelson. Distributed by Tribune Content Agency, LLC.
Steps you should take to protect your car

By David Muhlbaum

If you’re sheltering at home during the coronavirus pandemic, your car is likely spending a lot of time sitting in your driveway. But, much like people, cars need exercise and don’t do well if they sit for too long. How long is too long? Well, that varies, but with lockdowns in many places running into three months now, that’s too long for a car to go with little or no use.

The first sign is often a dead battery, though other problems can crop up as well. Here are a number of ways you can head them off:

Give it a spin. The first one is so straightforward that if you do it, you might not need most of the others: Drive the darn thing.

Don’t just start it and let it idle or take a lap of the driveway or the block. You want to drive long enough (and fast enough) that the battery gets fully recharged, and the car’s various fluids get up to temperature.

Twenty minutes should do the trick, and highway driving helps. Turn on the air conditioning while you’re at it so that system gets some exercise too. Its lubricant is suspended in the freon.

My VW Golf lets me monitor the oil temperature, and I drive until it’s above 212 degrees Fahrenheit so that contaminants like water and gasoline get cooked out of the oil.

If there’s some reason you can’t drive the car on the street (the insurance lapsed?), then turn it on and let it run long enough that you hear the engine’s electric cooling fan kick on.

Check the fuel. The next issue for keeping your car in good health during COVID-19 is the condition of the fuel. People who use gas-powered tools, have a boat or other recreational vehicle probably already know that gasoline, particularly gasoline that’s mixed with ethanol, has a shelf life. That’s why a lawn mower needs to be “run dry” at the end of the season, or have a stabilizer chemical mixed into the fuel.

How long will the gas in your car’s tank last before chemical degradation causes it to gum something up? It’s very hard to get a clear answer on this. For one thing, there are oodles of variables. (Is your weather humid? How old was the gas when you bought it? What’s the ethanol percentage?) Another is that the people who actually make fuel, i.e., refiners, have little interest in discussing how long it will last. Here’s what one refiner had to say:

But most mortgage lenders have some type of hardship program or loan modification options. Don’t put off asking for help if you’re struggling, since it’s not clear when coronavirus-related economic disruptions will end. It’s better to have more help than you need than to need more help than you have.

—AP/NerdWallet

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—AP/NerdWallet

Wow! A Simple to Use Computer
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There is finally a computer that’s designed for simplicity and ease of use. It’s the WOW Computer, and it was designed with you in mind. This computer is easy-to-use, worry-free and literally puts the world at your fingertips. From the moment you open the box, you’ll realize how different the WOW Computer is. The components are all connected; all you do is plug it into an outlet and your high-speed Internet connection. Then you’ll see the screen. This is a completely new touch screen system, without the cluttered look of the normal computer screen. The “buttons” on the screen are easy to see and easy to understand. All you do is touch one of them, from the Web, Email, Calendar to Games– you name it... and a new screen opens up. It’s so easy to use you won’t have to ask your children or grandchildren for help. Until now, the very people who could benefit most from E-mail and the Internet are the ones that have had the hardest time accessing it. Now, thanks to the WOW Computer, countless older Americans are discovering the wonderful world of the Internet every day. Isn’t it time you took part? Call now, and you’ll find out why tens of thousands of satisfied seniors are now enjoying their WOW Computers, emailing their grandchildren, and experiencing everything the Internet has to offer.Call today!

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Mention promotional code 113052 for special introductory pricing.
It’s smart to make end-of-life plans now

By Sarah Skidmore Sell

The coronavirus pandemic has more people addressing their end-of-life planning. For those who haven’t done so yet, it’s a great time to take it on.

People are traditionally rather hesitant to take the steps that experts suggest — creating an advance directive, writing a will and more — in part because they don’t want to ponder their own mortality.

But the pandemic has sharpened awareness and focused concern on this front.

Consider the advice of Jenni Neahring, a kidney specialist and palliative care doctor, who works daily with patients with chronic and serious illnesses. She said it’s better to make these decisions before an emergency in order to avoid putting extra stress and urgency on loved ones if something should happen.

If a patient is unconscious, healthcare professionals must spend critical time hunting down relatives or friends to help determine their preferred next steps.

Things have gotten harder with COVID-19, Neahring said, as no one is allowed to enter hospitals with these patients, and those on ventilators cannot speak for themselves.

“It has brought into sharp relief how necessary these conversations are, and how much worse it is to have to do them at the end,” she said.

Here are a few things you can do now to help you and your loved ones later:

**Choose your point people**

Who will make medical decisions for you if you cannot speak for yourself? This person is known as your healthcare proxy. They will be named in a legal document known as the durable power of attorney for healthcare.

Then choose someone who can oversee your financial affairs, such as paying your mortgage or other bills, if you are incapacitated. This person would be given financial power of attorney. It doesn’t have to be the same person as your healthcare proxy.

Choose someone you know well and trust for these roles. Pick a backup as well, in case your first choice is unavailable.

**Write it down**

After you’ve addressed the healthcare and financial representatives, consider writing a living will, or “advance directive.” An advance directive says exactly what medical care you do and do not want. Each state has its own advance directive form. They can be found at the Medicare.gov website.

If you are having trouble getting started, check out online resources such as the Conversation Project, Prepare for Your Care or AARP’s website.

**Consider a lawyer**

It’s not a great time to meet with people in person. But estate attorney Matthew D’Emilio said that most lawyers are able to arrange phone, video or other consultations during the pandemic.

Many people look at end-of-life planning, including wills, estates and trusts, as an issue for the wealthy, but that’s untrue, said Chas Rampenthal, general counsel at LegalZoom.

“It’s not about how much you have; it’s about making your wishes known,” he said.

And while life insurance isn’t always considered part of end-of-life planning, it can be an important step to protect your family financially. Term life insurance, a policy in place for a limited period of time, works best for most families, versus whole life, which is much more expensive and complex (but also has long-term value).

**Share your wishes**

Let your friends and family know what to do with your assets after you die. Without a will, your estate could end up in probate, potentially causing more headaches and costs for those you leave behind.

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If the idea or cost of seeing an attorney is too daunting, there are many online options for legal documents, some of which provide direct consultation.

Share your wishes

Let your friends and family know what you want, who is in charge and what documents you have. Provide a copy of critical paperwork to your loved ones. Share your advance directive with your physician as well.

Neahring recommends keeping the name and number of your medical decision maker in your wallet for emergencies.

And while most details will be addressed in the legal documents, some experts suggest writing a short letter reiterating your preferences and reasoning to help provide clarity and comfort to your loved ones later on.

—AP
Protect your car
From page 16
my best guess: months, not years.
When did you fill your tank last? And when do you think you will again, based on how much you’re driving now? Most people will be fine, but if you think it could be, well, months, then an easy and cheap bit of insurance is to add fuel stabilizer to your tank.
A popular brand with a memorable name is Sta-Bil, but there are others. Because fuel stabilizers won’t “fix” fuel that’s already gone bad, sooner is better than later for using one of these, and if you have room in the tank to add some fresh fuel when you pour in the stabilizer, do so.
A few other considerations for a car less used:
The battery. Conventional car batteries (we’re not talking about the drive batteries in EVs or hybrids) like to be regularly charged up. Regular driving does that, obviously. Car batteries also don’t like to be stored without charge.
So, if you have let one go dead, get on that quickly with a jump start. If you can’t give the car its proper exercise, consider buying a trickle charger.
Tires. Keep your pressure up, but also be aware that a car that isn’t moved regularly can get flat spots on its tires. When you finally drive off, you’ll hear a speed-dependent “whomp-whomp-whomp.” If you’re lucky, it will go away when the tire warms up, but it might not.
Following our “just drive it” advice will head this off, but if you can’t drive a car, at least try to move it forward and back a bit while it’s idling. The only certain way to avoid flat spotting is to put the car on stands, but that’s more trouble than most will want to take.
Brakes. Depending on the conditions where the car is stored, brakes may corrode when the car sits. This is normal; brake rotors on all but the most expensive cars are made of cast iron, and corrode quickly.
Simply braking while you drive cleans them right up as the pads scrape away the corrosion. If you’re using your car less, you might notice a “graunch” sound the first few times you apply the brakes. It should go away.
If you park somewhere that’s damp and can’t use the car for a while, consider NOT applying the parking brake so that it doesn’t corrode in place. Make sure the car is in gear and safely situated, though.
Critters. Animals can make short work of an automobile. Their usual target is wiring, which in many cars has a soy-based insulation that’s attractive to rodents. (The little buggers took out my Toyota Highlander!)
A car that’s less frequently driven can be prime wildlife habitat. Potential solutions: Parking it farther away from landscape features (rock walls, say) that are already animal friendly. Putting the cat on patrol, possibly even with a visit INSIDE the car. A variety of repellents are available. And, of course, traps.
Cosmetics. Garaging is best, of course. If that’s not an option, consider using sunshades to keep damaging UV rays from the interior. If you’re considering covering your car, remember to buy something car-specific. Plastic tarps from the hardware store don’t cut it and will damage your paint.
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Nebraska, from corn fields to fine art

By Glenda C. Booth

To avoid the coronavirus and the fact that COVID-19 cases are still rising in Nebraska, this is not the time to travel there, or anywhere, for enjoyment.

Please enjoy this article as armchair entertainment and for planning your future travel in healthier times.

In the Cornhusker State, corn may be at almost every turn, but there’s much more to explore.

Want to drift down a placid river in a steel tank? Watch birds strutting in a colorful courtship dance? Visit a sod house or study fine art? Nebraska’s got it.

The crane spectacular

The Platte River in Central Nebraska is nature’s stage for one of the planet’s greatest spectacles. From mid-February to mid-April, half a million sandhill cranes migrating north rest on the Platte’s sandbars and feed in the cornfields.

“I’ve traveled far and wide,” Jane Goodall once said, “and coming to Nebraska and seeing and hearing the cranes always restores my soul.”

Even non-birders are captivated by these gangly birds. From viewing blinds at sunrise, eco-tourists can watch the cranes awaken from sandbar roosts and jump like big whoosh, thousands ascend to the skies in one of the greatest migrations on Earth.

Paths of progress

The Great Platte River that snakes across the state was a formative influence for human civilization, too. Indigenous people lived along the river long before Europeans arrived.

It was a major route for pioneers going West and later for the Pony Express, Union Pacific Railroad and today’s Interstate 80. The Lincoln Highway, America’s first coast-to-coast paved roadway, tracked the river.

Archway Monument over Interstate 80 in Kearney (locally pronounced “Car-knee”) honors the past with life-sized figures and exhibits. Listen to an audio guide about the personal stories of pioneers, watch a rider switch horses at a Pony Express station, and experience a thundering buffalo stampede.

Classic art and classic cars

The Museum of Nebraska Art in Kearney is housed in a 100-year-old former post office. Inside are 5,000 works by artists who were born, lived, trained or worked in Nebraska or who created art reflecting the state.

The museum displays paintings and photographs of cornfields, of course, along with sandhill cranes, prairies, buffalo hunts and scenes from rolling away.

Nebraskans enjoy a tranquil day of “tanking” downstream. Floating in repurposed livestock watering tanks can be a leisurely way to get a closer look at the state’s wildlife and scenery.

During a vast annual migration, 80% of the world’s cranes gather on the banks of Nebraska’s Platte River on their way to Arctic nesting grounds. Tourists and wildlife photographers also flock to Nebraska every February to April to admire the sights and sounds of hundreds of thousands of sandhill cranes.

The Sandhills

The late television journalist Charles Kuralt called Nebraska’s Sandhills “one of the most beautiful areas of nothingness.”

Don’t take his term “nothingness” literally, though. The region’s 13 million acres of soothing, rolling grasslands are home to Buffalo Bill’s ranch and the largest rail-
Souvenirs evoke fine vacation memories

By Victor Block

My body is home these days, but my mind is roaming the globe. I’m stalking endangered mountain gorillas in Uganda, interacting with animals and people in the Amazon, and clinging to a tiny saddle on a camel strolling through the Sahara Desert.

These are among countless memories that remain alive in souvenirs brought back from the more than 70 countries, including ours, that I have visited. This is a good time to relive travel experiences through mementos you’ve purchased.

Amazonia

As intriguing to me as the jungles and wildlife of the Amazon region are the people who live in tiny villages strung out along the mighty river. Most consist of a few to several dozen to several dozen houses made of crudely cut wood planks covered by a metal roof. Small gardens provide vegetables, and the surrounding forest provides fruits, nuts and medicinal plants.

Most houses rest on rickety stilts that keep them high enough to avoid being inundated during the rainy season, when the rivers can rise 40 feet or more. A few are floating houses that rise and fall with the water.

As the small motorboat in which I rode pulled up to each village, a few people, mostly children, came to the river’s edge to greet us. They were followed by women who shyly offered to sell seed and shell necklaces, woven items and other handicrafts. Among my purchases was a woven decorative plate, simple in design but exquisitely crafted.

China

It’s challenging to choose from among the many items I have brought back from “the Middle Kingdom,” as that country was known historically, but one stands out. While following the ancient Silk Roads years ago, I spotted a man in the distance on horseback. He brandished an interesting, hand-made whip with which he occasionally tapped the animal if it slowed its pace.

That scene — a horseman riding bareback along the fabled route using what elsewhere would be manufactured — spoke to me of much that makes China such a fascinating place. I asked my guide to call the rider over and ask if he would sell the whip. He agreed, and after discussing the price, which was so low that offered I bit more, the worn but treasured object now rests on a shelf in my home.

Russia

Going into (what then was) the Soviet Union on a bus tour from Finland, Russian guards found a small decorative knife I had purchased in Helsinki and said I couldn’t bring it into their country. I guess they thought I might use it to overthrow the government.

They told me to leave it at the customs hut on the Finnish side of the border. To do so, I had to walk back through a high, barbed-wire-topped double fence and gates, past snarling guard dogs, and under the watchful eyes of Soviet guards who kept their rifles trained on me as I made the round trip.

When my tour group returned through the same check point days later, I was able to retrieve the memento from the Finnish sentries. As they handed it over, one explained, with a twinkle in his eyes, “The Soviets always do things like that just to hassle Americans.”

Tunisia

During my visit to Tunisia, I was able to experience its surprising variety of landscapes. The north is characterized by mountains that give way to its dry central plain, then to a semi-arid region.

Much of the extreme south is blanketed by the dry sands of the Sahara Desert — the largest stretch of sand in the world, covering one-quarter of Africa.

This enthralling setting is characterized by small settlements clustered round oases and people astride camels that provide a sense of times past.

My memorable camel ride began with a brief lesson that included details about how to maintain my mount as the dromedary went through its ungainly exercise of standing, and advice about how to overcome any efforts it might make to head off in a direction other than where I, and my fellow riders, wished to go.

A fairly realistic carved wooden camel, wearing the traditional saddle and exhibiting the usual rather haughty expression, serves as a reminder of that experience.

Uganda

One of my most challenging travel experiences was following the footsteps of endangered mountain gorillas in Uganda. Those majestic beasts live in the aptly named Bwindi Impenetrable Forest.

My group was accompanied by guides who had scoped out the location of our prey early that morning. However, after traipsing and climbing for hours through the thick forest, we discovered the uncooporative creatures had moved.

We eventually found them and settled down to watch the youngsters swinging from limbs and wrestling on the ground under the watchful eyes of their mothers.

Suddenly the mammoth silverback who ruled the band began advancing menacingly toward us. One guide waved the AK-47 assault rifle that he carried specifically for that purpose, the alpha male gorilla retreated — and we hiked back to our tent camp with great memories and photos.

The Hopi people were first to create Kachina dolls, as a way to teach their children about them. Later, other tribes began making their own Kachina dolls to sell, adding beads, turquoise and other decorations.

The Kachina that I bought at an Indian market in Arizona reminds me of the rich and ongoing role of Native Americans in our country’s history and culture.

What memories do your souvenirs bring back?

Nebraska

From page 19

road servicing yard in the world.

You can experience the placid beauty by “tanking,” a local term for floating down a river in a steel water tank for farm animals.

Buffalo Bill's Wild West and Congress of Rough Riders of the World was anything but boring. At William Cody’s former ranch, now a historic park in North Platte, visitors can return to the Old West as if an invisible giant is playing with toy trains in the vast flatlands.

At the Transcontinental Railroad was completed. Wasting trains connect, disconnect and connect again is mesmerizing: it’s as if an invisible giant is playing with toy trains in the vast flatlands.

And for a bit of wacky Nebraska, there’s Carhenge in Alliance, a full-scale replica of England’s Stonehenge, but the Nebraska version is a series of 38 old cars painted gray.

Or try Grain Bin Antique Town near North Platte, with its 20 historic octagonal buildings known as Kachi-kas.

The Joslyn Art Museum, an art deco building of pink Georgia marble, has an outdoor sculpture garden and artworks by El Greco, Titian, Degas and Monet.

At the Durham Museum in a former train station, visitors can explore the Cornhusker Club car, which President Harry Truman used for his 30,000-mile whistle-stop tour in 1948. Exhibits highlight Native American, Omaha and ranching history. After your tour, enjoy a chocolate malt at its authentic soda fountain.

If you go

Check cdc.gov for current travel notices. Most travelers fly to Omaha and then drive west along I-80 and deviate off the interstate to various sites.

Omaha is a 19-hour drive from Richmond, from Omaha, on the state’s eastern border, to the western border is about 455 miles. Amtrak’s California Zephyr (a daily train connecting Chicago and San Francisco) stops at five stations.

The Nebraska State Fair in Grand Island, showcasing agriculture, industry, commerce, arts, sciences and more is the state’s largest event. It’s scheduled for Aug. 28 through Sept. 7. Visit statefair.org.

For planning information, visit visitebraska.com; westnebraska.com; visitomaha.com; LincolnHighwayNebraskaByway.com or cranetrust.org.
Letters to editor

Stronger every day. I follow the gluten-free diet and get plenty of rest and sunshine. And I am still drug-free.

I would encourage anyone who has been diagnosed with an autoimmune disease, or who has unexplained symptoms, to start a gluten-free diet immediately.

If all we do is take medicine and ignore our diet and lifestyle, we are wasting our doctors’ time, wasting money and jeopardizing our recovery.

Debbie McGrann
Via email

TRAVEL TIPS

By Ed Perkins

We’re getting conflicting information about the COVID-19 outlook for the rest of the year. On one side, some of the medical folks are saying that the pandemic won’t be over until 2021, and we should keep isolating for the foreseeable future. Others are saying we might have a vaccine within a few months. And some political leaders were “reopening” in May.

Don’t ask me which of these is the most likely — extended lockdown or quick recovery. In some ways, they all might be. In any case, however, you can expect some coronavirus-related travel requirements that will last at least through the end of the year and maybe longer.

**Masks.** Get used to the idea of wearing a face mask in almost all travel situations. Already, the biggest U.S. airlines, and several foreign ones, have announced that you won’t be able to travel unless you wear a mask. Most others will adopt the policy, fairly quickly.

Railroads, hotels, theme parks, malls, museums, auditoriums — most such venues are also likely to require masks when they reopen.

Disposable or renewable, ordinary or chic, figure out which type you prefer and add it to the list of “don’t leave home without” items. My guess is that mask requirements will remain well after the country sets back to normal or at least sort of normal.

**“Passports.”** Suggestions are flying around that some agency should issue safe-travel “passports,” certifying that the bearer (1) is immune to coronavirus, (2) has tested negative, (3) has recovered from COVID-19, (4) has been vaccinated — after there really is a vaccine — or (5) some combination of those.

To date, the World Health Organization (WHO) has come out against the passport idea, mainly because currently available tests are not adequate to offer the requisite degree of assurance: They provide too many of both false positives and false negatives to be reliable indicators of safety.

My guess is that the WHO view will prevail, at least for the next several months. That could change, however, if the pharmaceutical labs can come up with an effective vaccine.

In that case, a vaccination certificate might well become important, just as we old timers remember those yellow certifications of various vaccinations and inoculations we carried decades ago.

**Vouchers.** At present, when you make a supposedly “refundable” payment to a travel supplier, you’ll likely have a tough time getting your money back if you cancel. Instead, the supplier will try to fob you off with a voucher for credit you can apply to a future trip — often with gotchas.

Some airlines are doing that today, despite hard government rules in the U.S. and Europe that they must refund your ticket. That is absurd. In that case, a vaccination certificate might well become important, just as we old timers remember those yellow certifications of various vaccinations and inoculations we carried decades ago.

In a related development, trip-cancellation insurance policies are likely to include fine print that future-credit vouchers specifically satisfy the requirement for recovery from a supplier.

**Airports.** Even after they nominally reopen, airports will remain different places for a long time — in some cases, indefinitely. First, public access will be more strictly limited than it was before the shutdown. That means, at some airports, that nobody but air travelers will get past the front doors.

Although moving the security process to different locations may not be feasible, airports will likely go to boarding-pass-only access screening. I’ve already experienced this at some airports overseas, and it’s likely to arrive here. Travelers in an airport might have to wear masks.

Also possible is some sort of health screening, such as fever checks, that may be added to the TSA process. It will probably be more theatrical than effective, but don’t be surprised to encounter it — maybe on arrival from international flights, too.

Email Ed Perkins at eperkins@mind.net or visit his website at rail-guru.com.

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Leigh Partington
Second Place
Barbara Frey
Third Place
Janet Mazor
Honorable Mention
Leigh Partington

Mixed Media/Textile
First Place
Young Ae Yi
Second Place
Bevadine Zoma Terrell
Third Place
Lisa Trevino

Honorable Mentions
Marylou Bono
Nancy Carlin
Thomas S. Corbit
Jerry Harvey
Catherine Hart Kervan
Frances P. Laughlin
Martha Mihaly Black
Sarah Lee Province
Clare Wilson
Young Ae Yi

Photography/Digital Art
First Place
David Allen Corbell
Second Place
Raymond Finkleman
Third Place
Beth Altman

Honorable Mentions
Keith Denise Brace
Howard Evans Clark
Richard Isaacman
Vella Kendall
Harvey Jerome Kupferberg
Stephen Eugene Robinson
Lynn V Schmitt
Alan Harvey Simmons
Warren Eugene Wilson

Sculpture/Carving
First Place
Pearl B. Chang
Second Place
A. Barry Belman
Third Place
Addison Newton Likins

Honorable Mentions
Nico Ambush
Pearl B. Chang
Manny Eisner
Sandra Valeria Franklin
Don Herman
Addison Newton Likins
Nathalie Poulisouen
Patrick JamesRowland
Christopher Ruch
Elizabeth Steel
Jo-Ann Marshburn Wilson

Drawing
First Place
Ruth Sentelle
Second Place
Angela White
Third Place
Patricia Grimes

Honorable Mentions
Susan Anchors
Sandra Cohen
Denise Dallatore
Chester Hall
Barbara Katz
Julianne Mueller
Ruth Sentelle
Angela White
Gretchen Whitney
Helen Wood

Painting
First Place
Ellen Yahuda
Second Place
Ray Goodrow
Third Place
Gillian Collins

Honorable Mentions
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Phylis Brent
Christine Fendley Greenland
Jacquelyn Diane Harris
Gayle Magruder
Michael Thomas Mohr

Stained Glass/Jewelry
First Place
Lori Ann Grant
Second Place
Meredith Anne Weiser
Third Place
Jeff Bulman

Honorable Mentions
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Clarice Burrell
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Plant detective solves yard mysteries

By Lela Martin

With the enthusiasm of a schoolboy, County Agent T. Michael Likins, 67, snapped a green leaf from a plant growing in the Chesterfield County Extension office’s demonstration garden and placed it under his microscope.

“Aha,” he exclaimed as he viewed the slide, “not only are there aphids on this leaf, but one of them is pregnant!”

Likins serves dual roles as both director of the Chesterfield County Extension office and as the Chesterfield County agent in Agriculture, Natural Resources and Environmental Horticulture. As a result, he spends much of his time in meetings and performing administrative tasks.

But most of the time, he’s in his element: the lab. “I visit alien worlds every day through the microscope,” he said.

As director since 2002, Likins has been on the forefront of diagnosing and developing best management practices for plant pests and diseases in the Richmond area.

For example, in 2013, Likins detected boxwood blight in a fungus in shrubbery in Chesterfield County. As an original member of a state taskforce, he worked to develop a tracing system and to locate other diseased plants.

With plant pathologists at Virginia Tech, Likins published a paper on the first boxwood blight discovered in the ground-cover pachysandra and sweet box shrubs in Virginia.

These findings and associated protocols have helped others worldwide. Not long ago, a researcher in Vancouver, British Columbia, thanked Likins for establishing definitive disease diagnosis and treatment protocols for boxwood blight.

Even makes house calls

To help solve botanical mysteries, Likins recommends that homeowners and commercial landscapers bring in wrapped plant samples (to reduce disease spread) for testing. If he can’t get enough information by looking at samples under a microscope, Likins makes a house call.

Recently, for instance, when plant samples from a privacy hedge couldn’t explain the decline of the shrubs, Likins visited the site. After he spotted an overhanging branch from a neighbor’s property, he recommended removing the sun-loving shrubs for something that will grow well in shade. Much like an EMT, he’s glad he can make a difference.

Early years

Likins got a master’s degree in plant pathology from West Virginia University, and spent years in the lab before he first started as an associate agent in Chesterfield County almost two decades ago.

He “jumped on a moving train,” he recalled, finding a backlog of plant samples to be tested. He’s been busy ever since, peering at pathogens to look for clues.

When grateful citizens receive trustworthy answers, they often ask Likins about the cost of his diagnosis. Likins simply responds that if the person pays taxes, then the extension’s free services were “prepaid.”

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In addition to providing plant disease diagnostics and gardening advice, the Chesterfield County office of Virginia Cooperative Extension (VCE) provides financial assistance to homeowners and commercial landscapers in the area.

See PLANT DETECTIVE, page 25

Create your vegetable victory garden

By Lela Martin

With extra time for home hobbies and learning opportunities with children and grandchildren, many of us are turning to home vegetable gardens reminiscent of the victory gardens during World Wars I and II.

Plan for success

The first task is to find the perfect location. Typically, this means a full-sun location with six to eight hours of sunlight daily. If you have deer or rabbits, choose a location that can be protected by fencing. It’s helpful if the site is close to a water spigot, and adequate draining is essential.

Consider the size of your garden you need for the food you’d like to grow. Read seed packets for spacing recommendations. Beginners may prefer to start small.

Whether you want to grow a tomato in a patio pot or a full salad in a raised bed, the Virginia Cooperative Extension (VCE) provides plenty of guidance to help. There’s a wealth of VCE publications online at ext.vt.edu as well as face-to-face; local Extension agents and Master Gardeners can answer specific questions virtually.

Pick a container

Your container may be as small and inexpensive as the bottom half of a two-liter soda bottle. Grow bags are trendy, but you don’t have to purchase a pricey one; use a reusable grocery bag. (VCE offers other suggestions in its publication “Vegetable Gardening in Containers.”)

Raised-bed gardening is an ideal way to set up a first-time garden. If you want a raised garden, consider a repurposed dresser drawer, an elevated trug or a raised bed. Online you can find multiple methods of preparing a raised bed as well as premade DIY kits.

Use vertical space by adding a trellis for climbing plants such as beans or peas. Situate your trellis on the outer edge on the north side of your planting bed so its shade doesn’t inhibit the growth of vegetables in other spots. (VCE’s publication “Intensive Gardening Methods” gives tips on raised beds as well as vertical gardening.)

For beginners, square-foot gardening is ideal, and a frame that is 4 feet by 4 feet is a good size for starting out. Determine, by using seed package or plant tag details, how many plants grow in one square foot. For example, if you want to plant peppers, you would plant one seed per square foot. For carrots, on the other hand, you could plant 16. (The publication “Gardening Solutions: Square Foot Gardening” by University of Florida/IFAS gives tips on this technique; visit http://bit.ly/fiftyplusgardening.)

Best vegetables for beginners

Most importantly, choose herbs or vegetables that you would like to eat. Since it’s already June, focus on those that will have time to mature and be harvested before the first frost (typically mid-October).

For example, you still have time to grow green beans, cucumbers, corn, squash, peppers and tomatoes. Green beans and cucumbers are some of the easiest veggies to grow. Select varieties that are the right size for your spot. You may think miniature fruits or veggies would be ideal in a small garden or container; however, cherry tomato plants
Murals
From page 3

communities,” she said. “I like to call murals ‘interventions into the mundane.’ They have the power to change someone’s day.”

Outlaw artists go mainstream

Ed Trask, another VCU grad, has been coloring Richmond’s Fan since 1990. He started as an “outlaw artist,” expressing himself as a punk rock drummer who also did graffiti. Now his work is in constant demand.

One well-known example is “Miss Sidewalk,” cheering up the exterior of the Sidewalk Café on West Main Street. The natural spirit of Ellwood Thompson’s grocery store is expressed in Trask’s breezy mural of pickers in an apple orchard. His more recent work is a spectacular black vulture at Green Gate Shopping Plaza.

Another outlaw, Mickael Broth, also known as the Night Owl, has been painting the town since 2001. In 2004, Broth was sentenced to a 10-month stay in jail for painting without permission. By 2008, however, his work won him a Virginia Museum of Fine Arts Professional Fellowship.

Since 2012, he has painted more than 200 public murals throughout Richmond, the United States and Europe, in addition to helping curate multiple public art festivals.

Some of Broth’s work appears on the water tower of FFV on Broad Street, the exterior (and interior) of the Mellow Mushroom on West Cary Street, and several cartoon-style murals near the Belmont Butchery on Belmont Street.

These are just a small sample of the many artists who can be viewed right now in the city. Take a ride — the sun is out, and the weather is fine for viewing art in the open.

To learn more about mural art in Richmond, read Murals of RVA, co-authored by Ed Trask and Mickael Broth. After quarantine ends, you can also take a guided walking tour from a company like Would I Lie to You Mural Walks or Richmond Mural Tours, LLC.

To see more images of the area’s murals, visit rvamurals.com.
Vegetable garden

From page 23

take up a lot of space — consider planting Roma tomatoes or dwarf plants instead.

Although zucchini can be aggressive in a garden, you will definitely get satisfaction from its exuberant growth. In places with less light, try lettuces, oregano or mint.

You could choose a theme for your garden: herbs for a pizza garden or an herbal tea garden. Enjoy purchasing starter plants and seeds or using seeds that you would otherwise throw away.

Add the medium

If you’re planting in existing soil, the VCE publication called “Soil Preparation” gives suggestions on making amendments to enrich it. You can choose a ready-made potting medium for small containers.

In raised beds, you can use a mix of compost and peat moss or ready-made garden soil. Do not use fill dirt. VCE publications can give you suggestions on producing compost from yard waste for use in your garden.

Don’t compress the medium too much. Roots need room for air and moisture in addition to the nutrients in the medium. Then plant your seeds or seedlings.

Tend your garden

Your garden will need care, especially on our hot summer days. Most plants need one inch of water per week; however, a common mistake made by beginners is overwatering. Container plants need to be watered more often than plants in the ground; container plants also require fertilizer. Tips on mulching, fertilizing and watering are available in VCE publications.

Check your garden weekly for insects and plant disease. VCE has publications about troubleshooting the most common culprits.

Use the least harmful way to deal with pests; often that means ignoring the pest or picking off insects by hand. Always follow labeling directions on pesticides. Remember, you are producing edible food!

Enjoy the fruits of your labor

Think about the money you’re saving by getting 10 bushels of tomatoes from a three-dollar plant. With shortages at the grocery store, growing your own ensures fresh food availability.

Grow what you can use because you may not be able to give away excess food in a COVID-19 world. However, if you have millions of zucchini, VCE also offers instructions on food preservation methods such as dehydrating, freezing and canning.

Lela Martin is a Master Gardener with the Chesterfield County office of the Virginia Cooperative Extension.

Plant detective

From page 23

Sharing his knowledge

Although more comfortable behind the lens (of a microscope) than in front of one, Likins engages the public with his enthusiasm for and expertise on timely subjects. He gives presentations on topics of concern to nursery and landscape professionals among others.

In addition to training volunteer Master Gardeners to identify plant pathogens, he lobbied to establish a laboratory in the new Extension office, which opened in 2018 near the Central Library.

“Dr. Neil deGrasse Tyson said that science is true whether we believe it or not,” Likins said. “I say that science, especially the biological sciences, are also fun.”

Riding into the sunset

Likins plans to retire from his full-time county position in July. But he won’t be backing away from the microscope entirely. He hopes to be the successful candidate for a part-time lab specialist position in the county. After all, he’s having a good time.

CTV uses a犹如 ends with the theme for the Virginia Cooperative Extension.

FROM PAGE 26
ANSWERS TO CROSSWORD

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– Dana S., Texas

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