



# Aging Matters

New Hampshire State Commission on Aging

## New Hampshire Commission on Aging

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## Aging Well in an Era of Uncertainty

### Four tools to stay grounded, hopeful and functional

By KATHARINE ESTY, PhD

This has been a challenging year for everyone. It has been disheartening, frightening and exhausting. For those of us who are in the older generation we are particularly anxious about the world we are leaving to our children and grandchildren. The rapid pace of climate change and the increasing number of extreme weather events are terrifying. We feel profound sadness by the suffering in Ukraine and the Middle East. And we are scared about what is happening right here in the USA. In short, we feel overwhelmed.

I want to be resilient, engaged, optimistic, and active, but it's difficult not to close my eyes. I've been watching less news lately. Many of us, myself included, are teetering on the edge of what I've come to call *dispairalized*. I read this newly coined term in a letter to the New York Times, and it perfectly captures what many of us are experiencing right now. I am determined not to let myself become *dispairalized*.

In addition to the uncertainty in the world, we must also deal with our personal challenges. Recently, I've faced several setbacks. I contracted COVID-19 again, and this time, I was sicker than before. Then, I had a fall in my apartment, hitting my forehead on a side table. After a visit to the emergency room, tests confirmed that I didn't have a concussion, but I did need stitches on my head. My balance was somewhat off and I developed two huge black eyes.

About ten days later, I was the keynote speaker at the Lowell Community Foundation's annual gathering. My topic for the evening was "Aging Well." As I shuffled up to the platform and looked out at the assembled crowd with my still-black eyes, I couldn't help but find the

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## **AGING WELL, con't**

situation both hilarious and ironic. *Aging well? Really?*

### **The Paradox Of Aging**

Upon reflection, I realized that my slightly off-kilter gait and two black eyes made me the perfect spokesperson for discussing aging well. Aging well does not mean having no setbacks, no loss of mobility, or no medical conditions. Our happiness depends on our attitude and how we handle the inevitable challenges we encounter. Despite the various losses that older individuals experience, **research has shown** that we tend to become happier and happier as we move through our 60s, 70s and 80s. This counterintuitive phenomenon is often referred to as the **paradox of aging**.

However, it isn't all sunshine and cheer. When we are churning and unsettled, we need to attend to our inner life before leaping into action. You might ask, "But how do we do that?"

Here are four strategies I use to calm my inner turbulence during uncertain times. I hope they are helpful to you.

### **Remembering My Team**

When I feel anxious and overwhelmed, I remind myself of the people who have been my most important mentors, role models, and teachers. I imagine them sitting around a table. And then I take a few minutes to reflect on what I learned from each of them. They cared about me, saw me, listened to me, believed in me, and showed me new ways of being. Taking the time to remember my team in detail energizes me and helps me recall insights I have forgotten. It replenishes my wellsprings.

### **Connecting With Others**

When I am struggling and down in the dumps I usually don't feel like socializing, even though I realize that being around people will be beneficial. I find it particularly helpful to spend time with someone calm and grounded. Being with them is both soothing and energizing. As a psychologist, I want us all to understand that emotions are "contagious" and the company we keep will be a major influence how we feel. Of course, it can work in both directions.

I also believe it is important to make time for the groups and organizations I belong to. For me, this includes my retired therapists' group, my church, and a group of nine old friends who have been meeting for 30 years. Being with them helps me regain a sense of well-being and hope. For those of you who feel quite unconnected, it's never too late to reconnect with old groups and find new ones that meet us where we are today.

### **Choosing A Positive Attitude**

When we feel upset, we often tell ourselves, "I

am helpless to change anything," "I am too old to change," or "There's really nothing I can do." I don't agree with these statements. There is always something we can do: we can choose, again and again, a positive attitude about aging and about our lives in general. When I'm stressed, I need to remind myself, "Just for this hour, I will have a positive attitude." This usually works.

If this approach feels very foreign to you, consider trying it as an experiment and see what happens. **I have written about this in more detail** previously if you find this topic of interest.

### **Meditating**

For many years, I tried to learn how to meditate, but I always gave up after a short time. Then, I heard about Jon Kabat-Zinn's course called **Mindfulness-Based Stress Reduction** (MBSR). What impressed me was the research that showed the impact of the MBSR course on the thousands of people who had completed it. Participants reported decreased stress levels, less anxiety and depression, increased feelings of well-being, strengthened immune systems, and improved relationships. It sounded too good to be true, but I decided to sign up for the course, determined to finally learn how to meditate and hopefully experience some of these benefits.

The course met once a week for eight weeks in person and now it is available on Zoom. The homework was demanding. I stuck with it and the payoff for me has been life-changing. I became less anxious. My blood pressure numbers went down permanently. It is my trusted way to deal with despair, depression, and upsetting events. And, now, fifteen years after I took the course, meditation still works to keep me steady and grounded. I've also used **the meditation app Headspace** for several years and find it to be a user-friendly alternative to the course.

As we regain our footing, it's time to turn back to what needs doing in the world, one step at a time.

I'll conclude with a quote from Howard Zinn, an American historian and philosopher who died in 2010. "The future is an infinite succession of presents, and to live now as we think human beings should live, in defiance of all that is bad around us, is itself a marvelous victory."

*Katharine Esty, PhD, 89, is a best-selling author, psychologist, a widow, a mother, a grandmother, and an activist for aging well. She's on a mission to dispel myths about old age and to end ageism, which limits and undermines the most experienced among us. You can subscribe to her monthly newsletter [here](#) or visit her at [www.katharineesty.com](http://www.katharineesty.com).*

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The NH COA's 2024  
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Commission's website  
at <https://www.nhcoa.nh.gov>

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# Rebecca Sky Reflects on Tenure as 1<sup>st</sup> Executive Director of Commission on Aging

Rebecca Sky is stepping down as the first executive director of the New Hampshire Commission on Aging after an action-packed five-year tenure, at first overshadowed and then influenced by the Covid 19 pandemic.

She will continue in the role as the search for her successor continues.

The executive sessions originally scheduled for the January NHCOA meeting will be held at a later date.

Authorized by statute in 2019, the Commission launched in 2020. "Two in-person meetings were held after my hire prior to a state of emergency being called," Sky recalls. Like everything else, it wasn't clear how to proceed without in-person meetings.

"Somehow, we figured out how not to miss a month and kept on going. We were all surprised at how well strategic planning via virtual three-hour meetings worked," she said.

Sky and the commission members persevered, despite the distractions and hardships of the early months of the pandemic. "Everyone was scrambling. Few people had time or attention to help establish a new initiative. Other state agencies and organizations were looking inward at what was needed to change in their organizations in response to the pandemic and how to support their own staff."

The Commission is mandated to advise the governor and General Court on policy and planning related to aging. It is comprised of 26 members, including one state senator, two NH House members, 13 community members and designees of eight state agencies – Health & Human Services, Labor, Employment Security, Safety, Transportation, Justice, the Housing Finance Agency and the Long-Term Care Ombudsman.

The commission's mission touches on a diverse portfolio of issues, Sky says, reaching concerns about housing, transportation, workforce and economic development as well as traditional age-connected issues such as health and long-term care. "Aging impacts so many aspects of life and so many aspects of life impact aging," Sky says.

The pandemic drained attention from organizing the commission but it also helped reveal a key focus for the commission's work: ageism. "We could see its effects in public policy in response to the pandemic so very clearly," Sky said. "Responding to ageism had to be interwoven into all our work. And we set about communicating to decision makers

The Executive Director position has been reposted. Those interested, can find more information at <https://jobsp.nhfirst.nh.gov/lawtaprd/CandidateSelfService/controller.servlet?dataarea=lawtaprd&context.session.key.HROrganization=10&context.session.key.bBoard=EXTERNAL&context.session.key.noheader=true#>  
The application deadline is February 4, 2025.

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## **REFLECTIONS, con't**

approaches that sought to curb the stigma and social isolation experienced by older Granite Staters balanced against the need for vigilance against the spread of the virus.”

Social isolation is an issue the pandemic starkly spotlighted. Sky says the Commission’s Emerging Issues Task Force wrote a brief pointing to the heightened isolation of residents in long-term care facilities, and suggested ways to increase connections between residents and their families and friends. Sky said the brief was widely distributed in the state and, through the NH Long-term Care Ombudsman’s office, was shared with national authorities, including the Centers for Medicaid and Medicare Services (CMS) which not long after changed its recommendations for visitation in long-term care settings.

Sky asserts that the Commission’s accomplishments are shared, and due to the efforts of many people, agencies and organizations. “The commission can be a soapbox and a megaphone for people who care about the opportunity to thrive while aging in our state. Sometimes we lead, sometimes we follow.”

For example, major legislation defining and creating Systems of Care for Healthy Aging, along with funding to increase compensation for those working in home and community-based settings, were the result of coordinated, sustained advocacy by a coalition of organizations. As part of that work the Commission successfully pushed for increased investment in Aging and Disability Resource Centers and helped convene an annual long-term care policy summit.

The Commission, as an independent state agency with representation from many state agencies as well as community members and lawmakers, is well-positioned to investigate issues, provide information and make recommendations. At its public meetings (monthly except for December and July), in testimony on salient legislation, and through its newsletter, website and social media, the Commission shares insights and ideas about the current and future status of aging in New Hampshire. It collaborates with stakeholder organizations, and it has prioritized the launch of a long-range, inclusive planning process.

The Commission’s annual report, mandated by statute, is a major statement each year of the priorities it sees and a look back at progress on

age-friendly policies and practices made by state agencies, or through new legislation and actions by other local government or non-profit entities. “Our recommendations are aimed at making New Hampshire an even better place to age. Our reports encourage leaders to see New Hampshire’s older adults as a valuable natural resource to our state, to be seen as an opportunity that can be amplified.”

The Commission is currently working with a consultant, funded by federal ARPA funds (again, a result of the pandemic) to initiate a community engagement process that would be crucial to the successful creation and implementation of a Multisector Plan for Aging – what will be the AgeWellNH Plan.

“A multisector plan for aging will help our state form consensus on the significant changes needed to our policies, systems, and environments in response to the transformative demographic shifts our state – and the country – are experiencing,” Sky said. Fostering wide community involvement in its development, is crucial, she believes. “The public and policy makers will be more willing to support the implementation of changes if they are part of the study of the issues and the creation of the agenda for change.”

“The Commission needs to engage the public to see the value in moving toward creating a society that values people of all ages,” Sky says. “More than just changing attitudes, there must be visible, tangible changes in our communities, such as more housing that is ‘aging ready’ – no barrier entry and first floor bed and bath.”

Another area of special concern in mostly rural New Hampshire is transportation. The Commission, coming alongside the Alliance for Healthy Aging, pushed for a study of transportation needs for older adults. The Governor’s office agreed to use federal ARPA funds to hire a consultant, overseen by the Commission, to conduct such a study. By understanding unmet need for rides and finding ways to better leverage the resources we have, policy makers will have the data they need to make informed decisions.

Frequently deferring to the efforts of others, one set of accomplishments that Sky is willing to own are “the relationships I’ve formed with an amazing group of people who are willing to dive in to improve well-being in our communities.”

**Aging Matters welcomes all points of view and invites your submissions. To send articles or to add your name to our mailing list, email [NHCOAnews@gmail.com](mailto:NHCOAnews@gmail.com)**

# 'Aging-in-Community'

## A New Term for a More Inclusive Approach to Work in Aging

By **MARGARET FRANCKHAUSER**

When we talk about building systems supportive of aging, we often use the term *aging-in-place* to reflect the idea that most people prefer to age in their own homes, a place they have come to know well and are able to navigate with relative ease. As more of us appreciate greater longevity though, the idea of aging in our own homes often means aging alone, isolated in our own home but unable to engage in social and community efforts because of physical limitations.

American communities are not typically designed to bring us together; they are designed to give us privacy. We surround our homes with yards and fences; we share few if any neighborhood resources, and few of us have available sidewalks that support neighborhood engagement. We need automobiles to travel to services like grocery stores, medical offices, libraries, religious services, etc. This is even more pronounced in rural areas where houses are typically greater distances from one another. When we lose our ability to walk or drive without assistance, we also lose our ability to engage with our community, and we can become prisoners of the home we once considered our most valuable asset. Sometimes we even lose the ability to navigate our own homes as stairs and other home features present fall and injury risks. Yet, when we use the language *aging-in-place*,

we inadvertently imply that people have failed if they must relocate to maintain physical and mental health.

As we move forward in building an Age-Friendly state and nation, I propose we substitute the term *aging-in-community* for the term *aging-in-place*. This terminology is inclusive of those who live in their long-time homes as well as those sharing space with adult children or other caregivers, those living in an assisted living community, and those who are transitionally living in rehabilitation centers. By using *aging-in-community*, we are focusing not on the physical place where people live, but on the importance of their overall inclusion in community life - in a location that works for them. A bonus is that we are not assigning a value to a particular location; rather, we are emphasizing the importance of *belonging to* and *engaging with* the community they live in.

Words matter in building social change. Inclusive language broadens the community of interest and respects the diversity of those at the core of the work. How many more people might see their interests reflected in the language aging-in-community?

*Margaret Franckhauser is the director of aging services at JSI. She has more than 35 years of experience in the fields of aging and community health. She is a member of the New Hampshire State Commission on Aging.*

## Is There an Older Adult Volunteer in Your Community Who Deserves Recognition?

It's time to think about older adults who are making a difference in your community.

The Governor of New Hampshire and the New Hampshire State Commission on Aging celebrate Older Americans Month each May by honoring older adults who through their volunteerism, serve to build strong communities. Their actions demonstrate that any one of us can make a difference at any point in our lives in the lives of others.

Anyone can make a nomination; nominees must be over the age of 60 who have made a significant contribution to their community as a volunteer.

Any type of volunteer work qualifies, from direct service to advocacy to leadership roles and more. The nominee must be someone whose volunteer work is in New Hampshire.

If you know someone who deserves recognition in the program, don't wait to let us know about it!

Send an email to [Karen.t.knowles@nhcoa.nh.gov](mailto:Karen.t.knowles@nhcoa.nh.gov) to

receive information about the 2025 Older Adult Recognition Awards.

The deadline to receive nominations will be in early March, 2025.



# Older Men's Connections Often Wither When They're on Their Own

By JUDITH GRAHAM, KFF Health News

At age 66, South Carolina physician Paul Rousseau decided to retire after tending for decades to the suffering of people who were seriously ill or dying. It was a difficult and emotionally fraught transition.

"I didn't know what I was going to do, where I was going to go," he told me, describing a period of crisis that began in 2017.

Seeking a change of venue, Rousseau moved to the mountains of North Carolina, the start of an extended period of wandering. Soon, a sense of emptiness enveloped him. He had no friends or hobbies — his work as a doctor had been all-consuming. Former colleagues didn't get in touch, nor did he reach out.

His wife had passed away after a painful illness a decade earlier. Rousseau was estranged from one adult daughter and in only occasional contact with another. His isolation mounted as his three dogs, his most reliable companions, died.

Rousseau was completely alone — without friends, family, or a professional identity — and overcome by a sense of loss.

"I was a somewhat distinguished physician with a 60-page resume," Rousseau, now 73, wrote in the *Journal of the American Geriatrics Society* in May. "Now, I'm 'no one,' a retired, forgotten old man who dithers away the days."

In some ways, older men living alone are disadvantaged compared with older women in similar circumstances. Research shows that men tend to have fewer friends than women and be less inclined

to make new friends. Often, they're reluctant to ask for help.

"Men have a harder time being connected and reaching out," said **Robert Waldinger**, a psychiatrist who directs the Harvard Study of Adult Development, which has traced the arc of hundreds of men's lives over a span of more than eight decades. The men in the study who fared the worst, Waldinger said, "didn't have friendships and things they were interested in — and couldn't find them." He recommends that men invest in their "social fitness" in addition to their physical fitness to ensure they have satisfying social interactions.

Slightly more than 1 in every 5 men ages 65 to 74 live alone, according to **2022 Census Bureau data**. That rises to nearly 1 in 4 for those 75 or older. Nearly 40% of these men are divorced, 31% are widowed, and 21% never married.

That's a significant change from 2000, when only 1 in 6 older men lived by themselves. Longer life spans for men and rising **divorce** rates are contributing to the trend. It's difficult to find information about this group — which is dwarfed by the number of women who live alone — because it hasn't been studied in depth. But psychologists and psychiatrists say these older men can be quite vulnerable.

When men are widowed, their health and well-being tend to decline more than women's.

"Older men have a tendency to ruminate, to get into our heads with worries and fears and to feel more lonely and isolated," said Jed Diamond, 80,

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**EDITOR'S NOTE:** KFF Health News' "Navigating Aging" columnist, Judith Graham, spent six months last year talking to older adults who live alone by choice or by circumstance — most commonly, a spouse's death. They shared their hopes and fears, challenges, and strategies for aging solo.

One article in the series was published in *Aging Matters* last month; another is reprinted above.

More than 16 million Americans are living alone while growing old, an unprecedented number. This slice of the older population has significant health issues: Nearly 4 in 10 people age 65 or older who live alone have vision or hearing loss, difficulty caring for themselves and living independently, problems with cognition, or other disabilities. People aging alone are also at higher risk of becoming isolated, depressed, and inactive; experiencing accidents; and neglecting to care for themselves.

Graham moderated a live event on Dec. 11, hosted by KFF Health News and The John A. Hartford Foundation. She invited five seniors ranging in age from 71 to 102 and from across the country — from Seattle; Chicago; Asheville, North Carolina; New York City; and rural Maine — to talk candidly about the ways they are thriving at this stage of life.

Read the complete series and watch the live event at: <https://kffhealthnews.org/news/tag/going-it-alone/>

## **LIVING ALONE, con't**

a therapist and the author of “**Surviving Male Menopause**” and “**The Irritable Male Syndrome**.”

Add in the decline of civic institutions where men used to congregate — think of the Elks or the Shriners — and older men’s reduced ability to participate in athletic activities, and the result is a lack of stimulation and the loss of a sense of belonging.

Depression can ensue, fueling excessive alcohol use, accidents, or, in the most extreme cases, suicide. Of all age groups in the United States, men over age 75 have the **highest suicide rate**, by far.

For this column, I spoke at length to several older men who live alone. All but two (who’d been divorced) were widowed. Their experiences don’t represent all men who live alone. But still, they’re revealing.

The first person I called was Art Koff, 88, of Chicago, a longtime marketing executive I’d known for several years. When I reached out in January, I learned that Koff’s wife, Norma, had died the year before, leaving him hobbled by grief. Uninterested in eating and beset by unrelenting loneliness, Koff lost 45 pounds.

“I’ve had a long and wonderful life, and I have lots of family and lots of friends who are terrific,” Koff told me. But now, he said, “nothing is of interest to me any longer.”

“I’m not happy living this life,” he said.

Nine days later, I learned that Koff had died. His nephew, Alexander Koff, said he had passed out and was gone within a day. The death certificate cited “end stage protein calorie malnutrition” as the cause.

The transition from being coupled to being single can be profoundly disorienting for older men.

Lodovico Balducci, 80, was married to his wife, Claudia, for 52 years before she died in October 2023. Balducci, a renowned physician known as the “patriarch of geriatric oncology,” **wrote about his emotional reaction** in the Journal of the American Geriatrics Society, likening Claudia’s death to an “amputation.”

“I find myself talking to her all the time, most of the time in my head,” Balducci told me in a phone conversation. When I asked him whom he confides in, he admitted, “Maybe I don’t have any close friends.”

Disoriented and disorganized since Claudia died, he said his “anxiety has exploded.”

We spoke in late February. Two weeks later, Balducci moved from Tampa to New Orleans, to be near his son and daughter-in-law and their two teenagers.

“I am planning to help as much as possible with my grandchildren,” he said. “Life has to go on.”

Verne Ostrander, a carpenter in the small town

of Willits, California, about 140 miles north of San Francisco, was reflective when I spoke with him, also in late February. His second wife, Cindy Morninglight, died four years ago after a long battle with cancer.

“Here I am, almost 80 years old — alone,” Ostrander said. “Who would have guessed?”

When Ostrander isn’t painting watercolors, composing music, or playing guitar, “I fall into this lonely state, and I cry quite a bit,” he told me. “I don’t ignore those feelings. I let myself feel them. It’s like therapy.”

Ostrander has lived in Willits for nearly 50 years and belongs to a men’s group and a couples’ group that’s been meeting for 20 years. He’s in remarkably good health and in close touch with his three adult children, who live within easy driving distance.

“The hard part of living alone is missing Cindy,” he told me. “The good part is the freedom to do whatever I want. My goal is to live another 20 to 30 years and become a better artist and get to know my kids when they get older.”

The Rev. Johnny Walker, 76, lives in a low-income apartment building in a financially challenged neighborhood on Chicago’s West Side. Twice divorced, he’s been on his own for five years. He, too, has close family connections. At least one of his several children and grandchildren checks in on him every day.

Walker says he had a life-changing religious conversion in 1993. Since then, he has depended on his faith and his church for a sense of meaning and community.

“It’s not hard being alone,” Walker said when I asked whether he was lonely. “I accept Christ in my life, and he said that he would never leave us or forsake us. When I wake up in the morning, that’s a new blessing. I just thank God that he has brought me this far.”

Waldinger recommended that men “make an effort every day to be in touch with people. Find what you love — golf, gardening, birdwatching, pickleball, working on a political campaign — and pursue it,” he said. “Put yourself in a situation where you’re going to see the same people over and over again. Because that’s the most natural way conversations get struck up and friendships start to develop.”

Rousseau, the retired South Carolina doctor, said he doesn’t think about the future much. After feeling lost for several years, he moved across the country to Jackson, Wyoming, in the summer of 2023. He embraced solitude, choosing a remarkably isolated spot to live — a 150-square-foot cabin with no running water and no bathroom, surrounded by 25,000

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undeveloped acres of public and privately owned land.

"Yes, I'm still lonely, but the nature and the beauty here totally changed me and focused me on what's really important," he told me, describing a feeling of redemption in his solitude.

Rousseau realizes that the death of his parents and a very close friend in his childhood left him with a sense of loss that he kept at bay for most of his life. Now, he said, rather than denying his vulnerability, he's trying to live with it. "There's only so long you can put off dealing with all the things you're trying to escape from."

It's not the life he envisioned, but it's one that fits him, Rousseau said. He stays busy with volunteer activities — cleaning tanks and running tours at

Jackson's fish hatchery, serving as a part-time park ranger, and maintaining trails in nearby national forests. Those activities put him in touch with other people, mostly strangers, only intermittently.

What will happen to him when this way of living is no longer possible?

"I wish I had an answer, but I don't," Rousseau said. "I don't see my daughters taking care of me. As far as someone else, I don't think there's anyone else who's going to help me."

*Navigating Aging is eager to hear from readers about questions you'd like answered, problems you've been having with your care, and advice you need in dealing with the health care system. Visit [kffhealthnews.org/columnists](https://kffhealthnews.org/columnists) to submit your requests or tips.*

Source: <https://kffhealthnews.org/news/article/older-men-connections-isolation-loneliness-navigating-aging/>

## **Save Your New Year's Resolutions For Spring**

**Instead of chasing your holiday cheer with New Year's resolutions, consider waiting a few months.**

People tend to see resolutions as black or white, forgetting that change is incremental; being "happier" is a better resolution than being "happy," for instance, says Tim Bono, lecturer in psychological and brain sciences at Washington University in St. Louis.

A lack of flexibility often means that after one slip-up—skipping a run because it's raining, or only drinking seven glasses of water instead of eight—people give up entirely.

When it comes to the practice of setting new goals for the year ahead, however, there's one problem that Bono can't help with. One that can only be overcome with a cultural shift, a radical change in the way we view this time-honored tradition: Winter can be a **real downer**.

"Maybe we need to disabuse ourselves of the idea that January 1 is the best time to make resolutions," he says, offering up a new tradition: Spring renewal.

### **New Year's Resolutions Vs. Spring Renewal**

"January is probably the hardest month of the year to change behaviors," says Bono, who is also assistant dean for assessment in Student Affairs.

In much of the country, the weather can be prohibiting. "If your goal is, say, to **run five miles** a day in Forest Park," Bono says, "well, there's going to be cold weather and snow to contend with."

The weather also means people are more likely to stay cooped up, missing out on a **support system** to help them stay on top of their goals.

Another obstacle: Coming out of the holiday season leaves many people **exhausted** as they head back to

regular schedules. There's also somewhat of a post-holiday slump, Bono says.

"It's the same thing that people experience the week after their vacation or the week after their wedding or anything else where there's been a lot of anticipation. Anticipation itself is pleasurable," he says. "There's a huge body of psychological research that has shown that half the fun of a vacation is having something to look forward to."

"There's usually not that much planned in the early months of the year. When there's not as much to look forward to, our spirits are usually lower. That can translate to less motivation to stay on task toward new initiatives," he says.

### **Consider That Spring Sunlight**

Even someone living in a warm region with a jam-packed social calendar will find themselves fighting an uphill battle with New Year's resolutions, though. That's because the biggest impediment to a successful resolution may be the short days of winter.

"We tend to underestimate just how much sunlight impacts us," Bono says. "The early days of January are among the shortest of the entire year."

Many studies have looked at the relationship between weather, specifically sunlight, and mood.

"We know that when sunlight enters the visual system, it activates neural circuits that are associated with a number of psychological states," Bono says. "For some people, when they leave home for work it's dark, and when they get home at the end of the day

## **SPRING RESOLUTIONS, con't**

it's dark. Such limited exposure to direct sunlight this time of year can take a heavy toll on our overall well-being and energy levels."

Harsh weather. Fatigue. Post-holiday slump. Lack of sunlight. Not to mention colds, the flu, and other bugs that go around in the winter.

"All of those things affect motivation," Bono says. "And then we say, 'I'm going to make progress toward all of these new goals,' when there are so many forces working against us?"

"Really," Bono says, "the optimal time for resolutions is spring or summer."

Spring has always been a time for new beginnings. Hibernating animals wake; the thawed soil and heavy rains beget sprouting plants. Why not use this time for a self-renewal instead of the dead of winter?

"It's the same reason why you don't plant new seeds in January," Bono says. "It's all about aligning the behavior to the environment most likely to promote those behaviors, and be fertile for them to grow and develop."

**But, then again...**

## **You Can Do It! 4 Tips To Keep Your Resolutions**

In order to keep your resolutions in 2025, consider these tips from Tim Bono, author of *When Likes Aren't Enough: A Crash Course in the Science of Happiness* (Grand Central Life & Style, 2018) and lecturer in psychology at Washington University in St. Louis.

**Find your motivation:** Identify an important reason why you are resolving to change something in your life (e.g., "I'm doing it for my kids" or "This is to improve my overall health"). Research shows that reminding yourself of how your daily behaviors fit into big-picture goals will keep you motivated to stay on track.

**Identify the challenges:** Acknowledge potential barriers that might get in the way of implementing your goals (you might get lazy, tired, forget, or be lured away by another temptation), and then identify contingency plans for how you will respond in those moments: "When I start getting distracted in the middle of a big work project, I'll give myself a quick break and then remind myself how rewarding it will feel to be finished with it." Better yet, select environments that are free from distractions

## **Do What Works For You**

To be sure, any time is a good time to work toward improving yourself, Bono says. "If you've set past New Year's resolutions in January and that has worked for you, go for it."

For some people, January is their preferred time to make resolutions because they find that having fewer events or social engagements provides the time and space they need to focus on themselves. If that's you, there's no reason to hold off.

But a large number of people who aim for such aspirations in January quickly fall off the wagon.

"And if that turns out to be you in 2025, just remember all that's working against you this time of year," Bono says. "There's nothing wrong with postponing a few months and trying again when the environmental circumstances will be a bit more conducive to working toward your goals."

Posted by **BRANDIE JEFFERSON**, Washington University in St. Louis

Source: <https://www.futurity.org/new-years-resolutions-spring-renewal-2239462-2/>

altogether. If you know you're always tempted to surf the web while completing work, take your laptop to a place where there's no wifi and leave your phone behind.

**Make a routine:** Set specific dates and times when you will incorporate the behavior—when you make a schedule for new behaviors you'd like to incorporate into your life, they require less psychological strength to implement. When you get in the habit of running every Tuesday and Thursday morning, the behavior becomes much easier to initiate because it simply becomes part of your routine, like brushing your teeth or taking the dog on a walk.

**Treat yourself:** Make your goals measurable, break them up into smaller sub-goals, and then reward yourself each time you hit a particular milestone. If your goal is to lose 50 pounds in the new year, treat yourself to a movie or other fun outing for each five pounds you lose.

Posted by **GERRY EVERDING**, Washington University in St. Louis. Source: <https://www.futurity.org/4-tips-keep-your-resolutions-1944942-2/>

## **Help Us Spread the Word!**

If you like Aging Matters, please share it with your family, neighbors, friends, and colleagues and encourage them to sign up for their own copy at <https://www.nhcoa.nh.gov/>

# “What We Heard” on Creating a National Plan for Aging

Last spring, the ICC (Interagency Coordinating Committee) released [Aging in the United States: A Strategic Framework for a National Plan on Aging](#) on behalf of the Interagency Coordinating Committee on Healthy Aging and Age-Friendly Communities. The Strategic Framework lays the groundwork for a coordinated effort — across the private and public sectors and in partnership with older adults, family caregivers, the aging services network, and other stakeholders — to create a national set of recommendations for advancing healthy aging and age-friendly communities that value and truly include older adults. The national plan on aging will advance best practices for service delivery, support development and strengthening of partnerships within and across sectors, identify solutions for removing barriers to health and independence for older adults, and more.

Since May, the ICC — with significant support from the National Plan on Aging Community Engagement Collaborative (a partnership between [West Health](#), [The SCAN Foundation](#), and [The John A. Hartford Foundation](#)) — has focused on gathering feedback on the Strategic Framework and other input to ensure the national plan focuses on the most important issues and addresses them in a way that will meet the needs of older adults.

Input has been collected from a wide variety of people and organizations from communities across the country. Most importantly, we have heard from older adults from all walks of life. People have shared their thoughts through in-person and virtual events, a national poll conducted through Gallup, and an online portal.

The Administration for Community Living created “What We Heard,” a report that shares what we have heard so far. It describes some of the common themes that are beginning to emerge from the experiences, insights, and recommendations that have been shared, with a goal of sparking ongoing discussion. It includes input on factors that influence the aging experience, such as affordable and accessible housing, aligned health care and supportive services, accessible communities, age-friendly workplaces, and sufficient, high-quality long-term services and supports.

This report is a snapshot in time — and it is only the beginning. We are continuing to receive comments through [an online portal](#), and we are continuing to create opportunities for people to tell us what they believe are the greatest needs and the actions they think would help address them.

The report can be found at [https://acl.gov/sites/default/files/ICC-Aging/WhatWeHeard-NationalPlanOnAgingFramework\\_ACL.pdf](https://acl.gov/sites/default/files/ICC-Aging/WhatWeHeard-NationalPlanOnAgingFramework_ACL.pdf)

## Multisector Plan for Aging Issue Brief: Paving The Way For Healthy Aging

West Health has authored a new [issue brief](#), “Multisector Plan For Aging Brief: Paving The Way For Healthy Aging.”

The brief examines shared aspects across the nine states with Multisector Plans for Aging (MPAs), along with a typical timeline and process for development. It also features “state spotlights” which emphasize the distinctive characteristics of each state’s plan. These concise, one-page summaries are valuable for individuals seeking to inform others about their state’s MPA or for those in states without MPAs who are interested in learning from examples set by others.

The New Hampshire State Commission on Aging is a member of the current Learning Collaborative and is pursuing the development of a State Plan on Aging.

The issue brief can be found at <https://westhealth.org/resources/multisector-plan-for-aging-paving-the-way-for-healthy-aging/>

The SCAN Foundation and the Center for Health Care Strategies have also published a policy brief on MPAs: How State Plans on Aging and Multisector Plans for Aging Align to Serve Older Adults. The brief can be found at [https://www.thescanfoundation.org/media/2024/11/State-MPAs\\_Policy-Brief\\_Final\\_112024.pdf](https://www.thescanfoundation.org/media/2024/11/State-MPAs_Policy-Brief_Final_112024.pdf)

## Let’s Get Social

Follow the NHCOA Facebook page at <https://www.facebook.com/NHCommissiononAging/> to stay up-to-date on the latest Commission news, as well as insights, resources and information from across the field of aging.



# What's at Stake in the State Budget Process?

You may have read that the legislators convening this month will face a daunting budget picture. What exactly has happened, and what will this mean for various programs that support healthy aging in our state?

Presentations by the NH Fiscal Policy Institute (NHFPI), an independent nonpartisan research group, and New Futures, another nonpartisan organization that advocates for health policy changes, highlight some of the reasons why.

The past budget cycle had been buoyed by several factors, including a rebound in economic activity which helped several of the state's revenue streams, one-time federal infusions that were intended to help states recover from pandemic-related adverse effects, and the state earned significant interest on unspent federal dollars.

In the upcoming budget cycle, there are several identified "headwinds."

In the beginning of December, Phil Sletten, research director of the NHFPI, reviewed the **budget situation** and noted: "Maintaining current services funded by the \$15.17 billion SFYs 2024-2025 budget may be challenging, even without new expenditures. State agencies have already requested a combined \$16.95 billion to meet identified needs for SFYs 2026 and 2027. Eliminating likely one-time expenditures, adjusting for projected inflation, and accounting methods in the current state budget would produce a budget totaling about \$15.35 billion in the next biennium."

Other aspects of the budget situation, which some have dubbed a "crisis" include:

**Limited revenue streams.** The legislature's repeal of the interest & dividends tax takes full effect in the coming budget year; and projections for business profits taxes and other taxes are coming in below projections.

**Unique expenses.** The state is settling with victims of abuse by employees of the Youth Development

Center, with more than \$100 million in claims already committed, and a potential \$469 million in pending claims, with many more cases still in process. The state is also facing litigation regarding the adequacy of funding for local school districts and a NH Supreme Court decision could increase the state's obligations.

Sletten concluded his budget review with the following:

"None of these factors guarantee a significant budget shortfall. State revenues are volatile, particularly when they depend on the national corporate profits that heavily influence business profits tax receipts. The economy will likely enter 2025 in a relatively strong position after two years of growth that defied most expectations. Cost pressures and key large expenditures may not materialize as anticipated, or may be more manageable than forecasted.

"However, the headwinds facing this next state budget appear to be stronger than the tailwinds. Policymakers may have to make difficult choices about revenues and expenditures to balance the budget over the next two years while optimizing investments for the people of New Hampshire."

These financial struggles will possibly affect programs that relate to the identified priorities of the Commission in many areas, including hard-won increases in reimbursements for home- and community-based care services, direct-care workforce initiatives, affordable housing incentives, and other programs that support healthy aging in our state. The Commission on Aging website at [www.nhcoa.nh.gov](http://www.nhcoa.nh.gov) includes a regularly updated feature tracking the bills that relate to the identified priorities of the Commission.

In an accompanying article on the following page, Judith Jones of NH Futures describes the process and the timeline for the development of this challenging budget.

## Contact Information for National, State and Local NH Elected Officials

U.S. Senator Maggie Hassan,  
(202) 224-3324

<https://www.hassan.senate.gov/content/contact-senator>

U.S. Senator Jeanne Shaheen,  
(202) 224-2841

[www.shaheen.senate.gov/contact/contact-jeanne](http://www.shaheen.senate.gov/contact/contact-jeanne)

U.S. Rep Maggie Goodlander  
(202) 225-5206

U.S. Rep. Chris Pappas,  
(202) 225-5456

<https://pappas.house.gov/>

### Who is My Legislator?

Use these links to find and contact your

- **State Representative:**  
<https://www.gencourt.state.nh.us/house/members/>

- **State Senator:**  
<https://www.gencourt.state.nh.us/senate/members/wml.aspx>

Visit your town or city's website to find contact information for your local elected officials.

# Active Legislative Session on Tap for 2025

By **JUDITH JONES**, New Futures / NH Alliance for Healthy Aging Advocacy

The New Hampshire Alliance for Healthy Aging Advocacy team is preparing for an active legislative session with a significant focus on the July 2026 through June 2027 state budget. The New Hampshire biennial budget process is complex, but each phase offers opportunities for important advocacy to support healthy aging priorities.

In late 2024, state agencies sent recommended budgets to the Department of Administrative Services. The Governor's office is currently synthesizing agency information, and the Governor will present a draft state budget to the legislature in mid-February. The Governor's budget will move through the legislative process as House Bill 1, which provides line-item dollar allocations and House Bill 2, which outlines any needed changes in the law.

From March to early April the House works on the budget and then the process heads to the Senate where work continues from late April to May. Budget hearings that are open to public comment are held in both bodies. This can be an opportunity to voice your opinion through in person or written testimony or remote sign-in, but there are many other ways to advocate including phone calls or emails to lawmakers, letters to the editor, opinion editorials for subject matter experts, and social media.

As the budget process continues, if the House and Senate budgets are not aligned, then House and Senate Finance Committee leadership meet to debate in a process referred to as the Committee

of Conference. The budget from the Committee of Conference must be accepted by both bodies before it goes to the Governor's office. The Governor must either sign, veto, or allow the budget to become law without signature near the end of June.

New Futures is offering a one-hour budget-focused webinar on Friday, February 7 at 1:30 p.m. to help advocates understand the ins and outs of New Hampshire's budget process, including the best times and ways to influence policy discussions. Find out more at <https://new-futures.org/post/New-Futures-Announces-Winter-Advocacy-Training-Series>. If you are interested in supporting healthy aging budget priorities, consider signing up for the NHAHA Advocacy/New Futures email alerts at [https://secure.everyaction.com/\\_Fap3zmlwkuCjhV-mc5YcQ2](https://secure.everyaction.com/_Fap3zmlwkuCjhV-mc5YcQ2).

*This column is a regular feature of Aging Matters. We thank New Futures/NH Alliance for Healthy Aging Advocacy for the information they provide to keep readers informed on age-related issues at the state level. Contact Judith Jones at [jjones@new-futures.org](mailto:jjones@new-futures.org)*



## Annual NHAHA Participant Survey is Now Open

The NH Alliance for Healthy Aging invites you to take part in its Annual Participant Survey. As a key NHAHA stakeholder, your feedback will play a vital role in helping set NHAHA's future course in support of older adults in NH.

All survey information is kept confidential. Importantly, the survey asks if you are interested in learning more or even joining one of our NHAHA workgroups or committees. To maintain your confidentiality, you will be redirected to a different survey to provide your contact information.

The survey takes about 8-10 minutes to complete and will remain open until Friday, January 24, 2025.

Thank you for your feedback and for all you do to help our state be a wonderful place for older adults and their families.

Take the survey at [https://unh.az1.qualtrics.com/jfe/form/SV\\_9Qzrc22DR7piE3Y](https://unh.az1.qualtrics.com/jfe/form/SV_9Qzrc22DR7piE3Y)

## Payment Options Available for Individuals Who Owe Past-Due Medicare Premiums

There are a number of circumstances where a Medicare enrollee may owe back Medicare premiums. A very common example of when an enrollee may face past-due Medicare premiums is when they lose Medicaid coverage that helps pay for Medicare premiums. There are options available to enrollees who owe back Medicare premiums that can help reduce or even eliminate the amount that needs to be paid back. An individual can pursue multiple options at the same time. Read our [Practice Tip](#) for more information.

Read the Tip Sheet here: [https://pfs2.acl.gov/strapib/assets/Payment\\_Plan\\_Tip\\_Sheet\\_598a093b65.pdf](https://pfs2.acl.gov/strapib/assets/Payment_Plan_Tip_Sheet_598a093b65.pdf)

# NH Bureau of Adult & Aging Services Selected For National Caregiver State Policy Learning Collaborative

The New Hampshire Bureau of Adult and Aging Services (NH BAAS) has been selected for the **2025 National Academy for State Health Policy (NASHP) Caregiver State Policy Learning Collaborative**. New Hampshire will join 12 other states, Colorado, Georgia, Illinois, Kentucky, Maryland, Michigan, Massachusetts, New Hampshire, North Dakota, Oklahoma, Rhode Island, South Carolina, Utah, and Wisconsin.

Participating states will share best practices and opportunities to strengthen policies and strategies to improve family caregiver policy, building upon action steps in the **National Strategy to Support Family Caregivers**. States will also learn from subject matter experts from:

- The NASHP **RAISE Act Family Caregiver Implementation and Technical Assistance Center Faculty**, a group of subject matter experts in family caregiving regularly convened by NASHP
- The **ARCH National Respite Network and Resource Center**, **Respite Care Association of Wisconsin**, and **Ujima United**— three organizations with extensive experience in supporting the development of and access to respite networks and respite provider training
- **The National Alliance for Caregiving (NAC)**, a nonprofit coalition of organizations with experience in supporting family caregiving policy through research and grassroots efforts
- **PHI**, a direct care workforce policy research organization drawing on almost 30 years of experience
- **ADvancing States**, a nonprofit national association representing state aging and disability agencies

The collaborative will focus on state family caregiving policy, reform, and/or guidance in alignment with the **five goals of the 2022 National Strategy**, with the aim of improving supports for family caregivers, direct care workers, and the people for whom they provide care. Topics may include but are not limited to:

- Enhancing family caregiver training, outreach, and awareness of services
- Paying family caregivers through self-direction
- Assessing and deciding whether to make pandemic-related policies permanent
- Increasing access to home- and community-based services such as respite care, respite recruitment, retention, and training
- Understanding the array of family caregiving assessment tools and evidence-informed programs, particularly for dementia caregivers
- Exploring Structured Family Caregiving programs
- Addressing state policies of the recruitment, training, and retention of the direct care workforce
- Strengthening federal and state partnerships to support family caregivers

Best practices and lessons learned from the collaborative will be published as part of an implementation guide for states.

## Biggest Social Security Changes for 2025

Monthly payments are going up, and drop-in service at SSA offices is largely going away

The **cost-of-living adjustment** (COLA) may be the most widely anticipated way Social Security changes from year to year, but it's far from the only one. Inflation, wage trends and new policies directly affect not just the more than 68 million people receiving Social Security benefits but also the estimated 184 million workers (and future beneficiaries) paying into the system. Andy Markowitz, AARP senior writer and editor covering Social Security and retirement, outlines seven changes coming to Social Security in 2025 in an article located at <https://www.aarp.org/retirement/social-security/info-2024/social-security-changes-2025.html>

## Prefer a Printed Copy of Aging Matters?

The Commission on Aging has a limited ability to provide printed copies of Aging Matters to individuals who are unable to connect to the Internet to read a copy online or download it from the Commission's website. Email your request to [NHCOAnews@gmail.com](mailto:NHCOAnews@gmail.com) or send it to NHCOA Newsletter, NH Commission on Aging, 117 Pleasant St., Dolloff Building, 4th Floor, Concord 03301

# Raising Awareness of Glaucoma, 'Silent Thief of Sight'

By REGAN THEBERGE, Program Assistant

Did you know that glaucoma, often called the 'silent thief of sight,' is one of the leading causes of blindness in the U.S.? This January, as we celebrate Glaucoma Awareness Month, it is important to understand how early detection can save lives. More than 3 million Americans have glaucoma, but only half of them know it. It is hard to know if you have glaucoma without an eye exam, as there are no early symptoms. There is currently no cure for it, but taking early action can prevent vision loss and preserve your eye sight.

Anyone can get glaucoma, but there are certain risk factors that can make you more susceptible. If you are over the age of 60, Black and over the age of 40, have a family history of glaucoma, or have diabetes, you are at higher risk. If you have increased risk, you should get a dilated eye exam to test for glaucoma and start early treatment if necessary. Talk to your family about their eye health history to protect their health and yours. Your doctor will recommend how often you should get tested when you are in elevated risk demographics. Glaucoma tests are covered yearly by Medicaid for high-risk individuals. Even without increased risk, comprehensive eye exams can protect eye health and catch eye disease early.

Glaucoma is pressure and fluid building up inside your eyeball, which can damage critical parts at the back of the eye. This disease gradually gets worse, often having no early symptoms to warn the individual. Severe damage can cause vision loss and blindness, it is the second leading cause of blindness worldwide. There are two major types of glaucoma, the most common open-angle glaucoma and angle-closure glaucoma. Open-angle is painless and causes no vision loss at first. Angle-closure glaucoma can cause a drainage block, leading to an acute attack including blurry vision, eye pain, headaches, nausea, or rainbow-colored lights. If this happens, see the doctor right away as it can quickly cause blindness.

Glaucoma is permanent, but with proper treatment vision loss can be stopped and prevent further damage. Treatments include daily eye drops or laser surgery to drain the eye of extra fluids. Your doctor will tell you which or if both of the treatments are necessary. Getting treatment is critical to maintaining your vision and can only be prescribed after a conclusive eye exam. Make sure to get eye exams regularly for early detection.

Preventative measures to protect eye health include getting regular eye exams even without symptoms, maintaining a healthy lifestyle through good diet and exercise and using protective eye wear to avoid injuries. Talk with your doctor immediately if you have any vision changes.

Share this information with friends and family to increase awareness about glaucoma and the importance of regular eye exams. This January, let's prioritize eye health—schedule an eye exam and help spread the word about glaucoma awareness.

*The information in this article was provided by the Southern New Hampshire Health Education Center. SNHAHEC programs are crafted using the latest research to ensure participants receive effective strategies for growth and development. Learn about programs at <https://www.snhahec.org/>*

## Report: Mortgage Companies Create Obstacles For Homeowners After Death Or Divorce

The Consumer Financial Protection Bureau (CFPB) issued a report on the experiences of homeowners dealing with their mortgage company after divorce or the death of an original borrower.

Many homeowners report that their servicers push them to take on new, higher-interest loans instead of keeping their existing mortgage. Homeowners also report recurring requests from servicers for the same or updated documents extending over months and sometimes years, at the same time they are dealing with the death of a loved one or a divorce. Domestic violence survivors face additional challenges, including mortgage companies continuing to send critical mortgage information to the abuser and thus putting the survivor's safety at risk.

Servicers generally blame investor requirements, processing volumes, or "systems issues," rather than taking responsibility for their shoddy customer service.

Learn more at <https://www.consumerfinance.gov/about-us/newsroom/cfpb-report-finds-mortgage-companies-create-obstacles-for-homeowners-after-death-or-divorce>

### RAISE YOUR VOICE!

Let us know what's on your mind and what's important to you.

Email us today!

[NHCOAnews@gmail.com](mailto:NHCOAnews@gmail.com)

# Keep Cyber Safe This Month

## NH Residents Warned of Blackmail Scam

Concord, NH – Attorney General John M. Formella issues an alert warning of a blackmail scam targeting New Hampshire residents, including New Hampshire's older adult population.

The New Hampshire Attorney General's Office has received several reports from residents who have received similar e-mails from senders who are unfamiliar to them. The e-mail subject line contained the recipient's name. The body of the e-mail contained the recipient's name and home address. A similarly worded, threatening letter was attached to each e-mail. The letter contained the recipient's name, telephone number, home address, and a picture of the recipient's home. The letter claimed that a virus was placed on the recipient's electronic device, allowing the sender to track the recipient's browsing history, e-mails, and social media accounts.

The letter warns that the sender has extracted embarrassing information about the recipient. The sender threatens that the embarrassing information will be sent to the recipient's e-mail and/or telephone contacts unless the recipient pays a "privacy fee" using cryptocurrency. The letter lists the amount of the "privacy fee" and cryptocurrency account information for deposit.

A sample of the letter can be found at <https://www.doj.nh.gov/sites/g/files/ehbemt721/files/inline-documents/sonh/blackmail-letter-redacted.pdf>

An e-mail containing this type of letter as an attachment is known as a "blackmail scam." Residents should understand that the senders

of these e-mails have not actually been to the recipient's home. They have obtained personal identifying information from publicly available sources and included photos of the recipient's home obtained online in the letter. Further, the sender has not gained access to the recipient's electronic device. Instead, the sender threatens the recipient to create a sense of fear and urgency so that the recipient will pay money.

The Attorney General urges New Hampshire residents to be vigilant. Do not reply to or open any attachments in electronic messages from senders with whom you are unfamiliar. Anyone who opens one of these letters attached to an e-mail should take the following steps:

- Do not panic;
- Do not send money, including cryptocurrency, in response to the letter;
- Contact your local police department, especially if you have lost money;

If you are concerned about whether your computer or other device has been compromised, contact a reputable computer company you can verify to inspect your device;

Report the scam to the Office of the Attorney General – Consumer Protection Hotline:

1-888-468-4454

E-mail: [Doj-CPB@doj.nh.gov](mailto:Doj-CPB@doj.nh.gov)

[www.doj.nh.gov/consumer/complaints](http://www.doj.nh.gov/consumer/complaints)

Anyone with knowledge that a vulnerable adult has been scammed or financially exploited should also contact the New Hampshire Bureau of Adult and Aging Services, at 1-800-949-0470.

## National Registry Helps Locate Unclaimed Retirement Benefits

The National Registry is a nationwide, secure database listing of retirement plan account balances that have been left unclaimed by former participants of retirement plans. It is powered by PenChecks Trust, a leader in retirement plan distributions.

The site helps reunite America's workers with their rightfully earned retirement assets by providing a safe, secure and completely free search engine to locate lost or forgotten retirement funds. Former employees can perform a secure database search to determine if they may be entitled to any unpaid retirement account money. Employers can register participants with unclaimed benefits at no cost to the Plan Sponsor. Third-party service providers can perform searches for their clients who may have unclaimed benefits accounts.

Learn more at <https://unclaimedretirementbenefits.com/>

# Fuel Assistance Applications Continue For Eligible NH Households

If you expect to have trouble paying for your heat this winter season, the New Hampshire Fuel Assistance Program (FAP) may be able to provide you with some relief.

The NH Department of Energy distributes federal Low Income Home Energy Assistance Program (LIHEAP) funds to New Hampshire's five Community Action Agencies (CAAs), which in turn take applications, determine benefits, and distribute FAP payments to vendors on behalf of eligible New Hampshire households throughout the state.

The Fuel Assistance Program provides benefits to qualified New Hampshire households to assist with heating costs. FAP benefits are a grant; they do not have to be paid back and they are not counted as income when applying for other assistance programs. Both renters and homeowners may qualify for the Fuel Assistance Program.

Benefits for this coming winter range from \$100 to \$2,177 depending on the household income and heating costs. New this year, the full benefit amount will be provided as a credit to the household account (oil or propane vendor, natural gas or electric company, or property manager if heat is included in rent). Funds for certified eligible households began to be distributed at the start of December 2024.

Applications for Fuel Assistance will be accepted through April 30, 2025.

FAP benefits may also be used to help households in a heating emergency by securing an emergency delivery of fuel or by delaying a utility disconnection or eviction notice if heat is included in the rent and the rent is not subsidized.

## Am I Eligible?

Eligibility for the Fuel Assistance Program is determined by gross household income (i.e. total before taxes), the number of people in the household, the type of fuel used, and the energy burden on the household. Income limits are surprisingly high (i.e.: \$59,805 annually for a 2-person household).

## How Do I Apply?

Contact your local CAA office to learn how to apply for FAP. The CAA staff will tell you what information you will need to supply to process your application. To prevent delays in processing, be sure to provide all requested documents.

If you are homebound or unable to visit a Community Action Agency office, it may be possible to arrange a home or telephone interview.

Learn more details, including contact information for your local Community Action Agency and other available resource at <https://www.energy.nh.gov/consumers/help-energy-and-utility-bills/fuel-assistance-program>



## NH Electric Assistance Program Offers Help on Paying Utility Bills

The NH Electric Assistance Program provides eligible households with a discount on their electric bill each month, with discounts ranging from 5% to 86% depending on the household's income. The income eligibility guidelines are the same as the Fuel Assistance Program. Applications for Electric Assistance are accepted year-round.

Learn more at <https://www.energy.nh.gov/consumers/help-energy-and-utility-bills/electric-assistance-program>

## Your Local Resources



Not sure what resources exist in your community to help with an age- or disability-related issue? Contact your local Aging & Disability Resource Center (ServiceLink) Office at (866) 634-9412, [servicelink.nh.gov](https://www.servicelink.nh.gov)



2-1-1 NH is the connection for NH residents to the most up-to-date resources they need from specially trained Information and Referral Specialists. <https://www.211nh.org>

# Veterans/Military Families Agency Celebrates 5 Year Anniversary

This past fall, the five-year anniversary of the creation and establishment of the New Hampshire Department of Military Affairs and Veterans Services (DMAVS) was recognized in an event hosted by the NH State Veterans Council in Manchester. Governor Christopher T. Sununu and Major General David Mikolaities, NH State Adjutant General and NH DMAVS Commissioner made remarks to honored guests and recognized key leaders in the creation of the department.

The Department of Military Affairs and Veterans Services was legislated by Senate Bill 208 which was passed into law in July 2019 and became effective in September 2019. This bill consolidated military and Veteran Services previously provided by other state departments into one Department of Military Affairs and Veterans Services.

Its mission is to enable NH's military and Veteran communities as they protect the homeland, forge enduring partnerships, and provide a support system for Service Members, Veterans and their Families. Currently, there are about 90,000 Veterans living in the Granite State, 1,123 Active Duty Service Members and 5,751 National Guard Soldiers and Reservists.

There are four divisions of NH DMAVS: Wellness Division, Veterans Services, NH State Veterans Cemetery, and Community-Based Military Programs. The Wellness Division provides Chaplain Services, Care Coordination, Medical and Behavioral Health, resiliency and fitness, and more, in support of our National Guard Soldiers. The Division of Veterans Services assists Veterans or their dependents in securing all benefits or preferences to which they may be entitled to under any state or federal laws or regulations to include coordination of U.S. Veterans Affairs benefits and Survivors and Veterans Pension. The State Veterans Cemetery provides and maintains a dignified final resting place to honor all Veterans and eligible dependents, ceremonies to honor Veterans, and education and outreach through its Heritage Learning Center, Memorial Walkway and Monuments. Community-Based Military Programs collaborates with military and civilian provider groups, Veteran service and support organizations, federal, state and regional stakeholders across all domains to facilitate quality service and support for Service Members, Veterans, and their Families.

Community-Based Military Programs continues efforts towards the development of Veteran well-being, gainful employment opportunities, ending

Veteran homelessness, utilizing military skills towards licensing, and acting as the NH state approving agency for U.S. Veterans Affairs educational benefits. Initiatives include: NH Veteran-Friendly Business Network (co-sponsored by NH Employment Security), NH "Ask The Question" campaign (identifying Service Members, Veterans and their Families through asking "Have you or a family member ever served in the military?"), support towards NH Suicide Prevention efforts, Veterans access to Oral Health Care through the NH Veterans Freedom to Smile initiative, and in coordination with NH Department of Health and Human Services, implementation of the Ending Veteran Homelessness Project in NH.

NH DMAVS collaborates with federal, state and local partners to prevent suicide among Veterans and improve well-being for Service Members, Veterans and their families through contracting efforts. This past year, DMAVS contracted with the Partnership for Public Health NH and was supported by the Manchester VA Medical Center in the establishment of eight regional coalitions to combat suicide among Veterans. The coalitions continue to grow across the Granite State with over 100 engagements addressing suicide prevention, behavioral health, emergency preparedness and response, substance misuse, immunization programs, and public health councils. In addition,

DMAVS continues its contract with Easterseals NH Veterans Count providing funding to enhance clinical capacity to improve access to and use of mental/behavioral health services by NH's Service Members, Veterans, and families for a lifelong journey to health, well-being and self-sufficiency, and lessen Veteran social isolation. Since the collaboration began in September 2022 and continuing to this day, ESNH Veterans Counts has made 2,832 external linkages highlighted by 140 for Medical/Health Care, 211 for Mental Health Services, 556 towards Benefits determinations, 488 for Housing Services, 280 for Aging/Senior Services, and a range of other support activities.

The NH Division of Veterans Services represents 9,825 of NH Veterans in accessing federal and state benefits. Their advocacy allows for engagement with many more Veterans across the state through presentations and attendance at various venues at farmer's markets, state fairs, Seacoast Veterans Conference, Cheshire County Veterans Expo and

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many more. There are approximately 90,997 Veterans in New Hampshire, comprising about 8.2% of the adult population. Of the 90,000+ Veterans, 52.2% (47,518) are 65 or older and 8.8% (8,362) are women. Representing every conflict since World War II, our Veterans live in each county with the majority residing in Hillsborough, Merrimack, and Rockingham Counties, with their population per county: Belknap 5,441; Carroll 4,070; Cheshire 5,746; Coos 2,564; Grafton 5,806; Hillsborough 24,971; Merrimack 10,351; Rockingham 20,607; Strafford 8,167; Sullivan 3,274.

The NH State Veterans Cemetery continues to provide and maintain a dignified final-resting place to honor all veterans and eligible dependents which expresses the State's gratitude for their service to the country. The Cemetery hosts a number of events throughout the year including a memorial day ceremony, "wreaths across Boscawen" sponsored by the Blue Star mothers of NH, Memorial walk way and headstone cleaning, a Korean War remembrance ceremony, and hosts numerous visitors throughout

the year at their Veterans Heritage Learning Center. Addressing the needs of future Veterans, the cemetery is working to develop a \$6.2 million grant from the Veterans Cemetery Grants program adding 3,280 columbarium niches and 3,780 in-ground cremation plots.

NH Department of Military Affairs and Veterans Services is honored to serve and support Granite State's Service Members, Veterans and their families these past five years, and strives to continue its mission to support Granite State's heroes.

For further information and resources: [Welcome | Department of Military Affairs and Veterans Services](#).

## **Help Us Spread the Word!**

If you like Aging Matters, please share it with your family, neighbors, friends, and colleagues and encourage them to sign up for their own copy at <https://www.nhcoa.nh.gov/>

**AGING IS LIVING**  
**THERE'S NO SUCH THING AS "TOO EXPERIENCED"**  
**EVERY AGE IS THE RIGHT AGE**  
**RETIREMENT IS NOT A REQUIREMENT**  
**LONGEVITY IS THE BEST THING TO HAPPEN IN AGES**  
**AGE IS NOT THE PROBLEM;**  
**AGEISM IS THE PROBLEM**

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