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Upper West Side 1



Fairway Market

MAY

What advice have you taken to heart?

What advice would you give to a future generation?

- “Only Connect.” (Quote from Howard’s End) This member recently visited The Rubin Museum. It was a moving experience for her. She suggested the following books: When Things Fall Apart by Pema Chodron; Living Beautifully which offers three commitments:
 - Committing to not cause harm;
 - Committing to take care of one another;
 - Committing to embrace the world as it is.
- The 7 Principles for Making Marriage Work Dr. John M. Gottman writes of getting rid of obstacles: Ignorance; anger; greed; envy; lust; Acquiring self-cherishing.
- A reference was made to the play, A Doll’s House Two, where Nora had left her marriage to find herself and then returns after 15 years.
- Marie Kondo’s The Life Changing Magic of Tidying Up; Gretchen Rubin’s Better Than Before; Rachel Remen’s Kitchen Table Wisdom. These books question what is life about; what should you know? This member does not offer advice to her children. Advice is hard to take; so many currents; what drives people; changes occur.
- The Senior Center run by Dorot was mentioned; it enhances the lives of older people
- Try to die without regrets;
- Social contact is very important;
- Make peace with your past Success differs for everybody;
- Don’t worry about the small things.
- A member said we have freedom and space now to gain wisdom
- Another said that her kids have not accepted much of her advice; she believes people should ask for advice before it’s given.
- A member spoke about her ongoing renovation drama; she followed a good friend’s advice to forget about being right and think about what she needed to bring peace into her life. She was so right as this whole experience was tapping into some ancient anger and rage within. It became important to stop or die trying. Great advice!

- Sharing humor is worthwhile. This member also spoke of plays as did others: Church and State; Building a Wall; Sweat, Oslo, Indecent, which she said was spectacular.

JUNE

The Functions of Humor

- A member introduced the topic by referring to a number of Websites that she discovered: A Joke a Day.Com (<https://www.ajokeaday.com/>), *Humor and Laughter: Health Benefits for Seniors and Resources* (<https://www.seniorhomes.com/p/humor-and-laughter-health-benefits-for-seniors-resources/>). She mentioned the HBO special with Carl Reiner that she recently saw: “*If I don’t see myself in the Obit, I eat breakfast*,” featuring nonagenarians who are going strong and filled with humor and positivity. Highly recommend.
- Another member spoke about how humor can play a part in our work: Working at the American Federation for the Blind, she edited a newsletter, and included some humorous typos: Jaws, the software for blind people was misspelled at Jews; Macular degeneration became Immaculate Conception. She wanted to make the point that one can find something funny in everything.
- We asked the question whether when someone pushes the envelope or offends someone is it still humor. Examples given: Archie Bunker, Bill Maher
- a member talked about English humor being different from American; English humor, very broad, dry wit and sometimes tasteless
- There is a form of sensitivity to language, also called Semantic therapy—how terms like chairman became chairperson, etc. Someone mentioned the extreme sensitivity today on college campuses to name calling; new term: micro-aggression
Often groups appropriate terms: Disability group calls itself “Crips.”
- Humor changes as we age, according to an article Linda found. Older people appreciate a less aggressive style of humor
- Some books by humorists:
 - Tina Fey’s Bossy Pants is a very funny book.
 - Trevor Noah – Born a Crime
- We talked about political humor: Samantha Bee is funny; Kathy Griffith’s humor is tasteless according to those present.
- Political cartoons and New Yorker cartoons are very much appreciated
- We reminisced about favorite funny TV shows: Andy Griffith, I Love Lucy; Curb Your Enthusiasm – Larry David is always politically incorrect: in one bit he goes on a date with a woman in a wheelchair.... A member remembers her dad laughing at 3 Stooges.
- We talked about favorite comedians of the past: Johnny Carson, Steve Allen, Sid Caesar, Milton Berle, Mel Brooks and Carl Reiner, especially their 2,000 year old man bit.
- Humor is important in a relationship and in families: family humor and funny stories can be important even at a funeral; giggling babies make most people feel

happy. A member relied on her sister's humor to get her through life. To this day when near her sister or even over the phone, she laughs

- Someone said she feels humor is so essential; she wouldn't be alive without it.
- Being comfortable allows silly exchanges
- She couldn't remember the funny lines in the play Oslo but said there were at least 5. Here are two:

“Sometimes you're the statue; sometimes the pigeon.”

“Well, after all, what is a throne but a stool covered in velvet?”

Napoleon Bonaparte

JULY

Invisibility and how we as women are affected, especially as we age.

- N. said she hasn't experienced much; in fact, sometimes she feels “too visible” (her striking hair?). J2. felt the same, although she did comment about being somewhat excluded when in the presence of her then husband and his cronies when they spoke of science and medicine.
- F. said she does feel ignored in the education workplace. She feels she doesn't get as many jobs in her part-time tutoring work.
- L. mentioned that as an academic serving on many committees, men often interrupted the women and took credit for women's insights.
- J. spoke about Rebecca Solnit's book: Men Explain Things to Me about “Mansplaining” -- gender issues and misogyny. She experienced invisibility with young people who seem to turn away: Makes her question what is wrong with me?
- Aging: Young people act with horror. Question raised: Is it different for men?
- Some say in technology industry, men and women age out at 50.
- H. noted Gloria Steinem's book: Outrageous Acts and Everyday Rebellion: She writes about the invisibility of being female and black.
- A Psychology Today article makes the point that invisibility as we age may lead to more freedom; we have gained wisdom and can make better choices.
- S. said she censors herself less. We have strong opinions and higher self-esteem
- J2. Said, “Men my age don't see me, but with younger men I can easily make eye contact.”
- J3. experienced a distinct sense of isolation and invisibility at the age of 50. It was almost overnight: attention one day and then a dearth of it afterward. While she always thought males look at any- and everything and never really put much stock in it, she acutely felt the absence.
- H. brought up her doctor, wondering about his reactions to her medically. She thought, and we agreed, that it would be a good idea for someone else to be present at an appointment.

- We discussed having a face lift to avoid invisibility. Would that resolve anything? The consensus: OF COURSE NOT .
- We spoke about organizing an intergenerational meeting with young women to learn about their ideas regarding aging and invisibility and to express our ideas

Upper West Side 2



116th St. Subway Station

APRIL

Asking for Help

Most agreed that it is not easy to seek help, although many had done so successfully – usually for a serious matter.

The group shared stories of how and when they had done so after it was pointed out that everyone was telling experiences of friends not themselves.

If one has a medical question, it is possible to elicit answers from within the Caring Collaborative membership. Email Shawndra, the Caring Collaborative Coordinator, to put out a query.

Everyone agreed that it's fine to call a friend or a member of our group for non-medical help. And there is always the CC Coordinator.

JUNE

Moving Out of Your Comfort Zone - Advantages and Disadvantages

Much of the discussion revolved around travelling alone. The positives are that one doesn't have to accommodate someone else's agenda. The negative is loneliness, especially at dinner, although some people are fine with eating alone.

- Some members have enjoyed group travel, which has its own discomforts.
- Others feel that being older and being in a new place alone has its risks.
- Since 9/11 one doesn't want to go anywhere and is comfortable staying close to home

Other areas of discomfort:

- Joining a group for the first time
- Leading a discussion
- Getting up in front of a group

JULY

What topics do we tend to avoid and/or deny? What is difficult to face as we age?

- Health issues and fear of declining health
- Financial concerns
- Fears of becoming dependent on others
- Anger and confrontational situations
- Dealing with people who are toxic in our lives.

We discussed the difference between denial and avoidance. Denial is more an unconscious refusal to confront something, while avoidance is more of a conscious decision to not deal with something. Avoidance may come from a fear of change.

Upper West Side 3



West End Avenue

MAY

“Learning to Ask Others for Help” by Claire Berman in **NYCitywoman.com**,
<http://www.nycitywoman.com/learning-to-ask-others-for-help/>

We shared personal experiences/views about asking for help:

Fear of being viewed as vulnerable

- Why do you need help? Transient vs permanent physical needs make a difference.
- An ankle or back sprain can happen to anyone – it’s easier to ask for help.

- Physical stamina may be diminishing because of age. If you're strong things are easy, when you lose physical strength it is really hard to accept your new limitations. Don't want to appear helpless.

Fear of loss of control

- Having to arrange for someone to come to help you.
- Unable to come and go whenever you please.
- Will the helper understand how you like things done?

Fear of rejection

- Not everyone has family nearby-or wants to ask them –they are very busy.
- Some members have a longstanding habit of looking out for the neighbors in their building. Others moved recently, or live in a building with high turnover, and it takes time to develop a friendship with neighbors who could help.

Ways to give and accept help

- If you notice that someone needs help do it in a friendly, low key manner.
- Wonderful to have your help accepted - it makes you feel good.
- Give (money or volunteer time) to organizations that help women to remain independent.
- Little kids and young people in general, are very willing to help if asked.
- Graciously accept subway & bus seats, especially when they are given by a young person - it rewards their thoughtful offer.
- One member emphasized “I’m OK asking for help- people’s views of me are “their problem” “. It is remarkable how many people are willing to help.

What do you want your older years to be like?

- We also discussed some of the health conditions that contribute to our evolving views of our need for **help**. Preserving mobility and addressing pain are common concerns. Members’ strategies include massage, meditation, walking in Riverside Park, and appreciating nature.
- The **Conversation Project** <http://theconversationproject.org/> which developed free guides to help discuss choices for future healthcare with loved ones was recommended, along with the book *Being Mortal - Medicine and What Matters in the End* by Atul Gawande.

JULY

The starting point for our discussion was a TED talk by Bryan Stevenson:
We need to talk about an injustice <https://youtu.be/c2tOp7OxyQ8>.

One of the central ideas of Bryan Stevenson’s talk - ***the importance of really recognizing and valuing every person as an individual*** - is very relevant to the purpose of the Caring Collaborative.

As we face new health issues and need to identify specialized health care providers, it can be difficult to find doctors who are willing to see us as a unique person-not a collection of abnormal test results:

- Less experienced doctors are more likely to rely on tests rather than a comprehensive physical exam and detailed discussion with the patient, *but* the younger doctors are more likely to accept Medicare plans.
- All doctors are expected to spend less time with each patient. Costs of practice-office space, staff, and electronic records, are increasing much faster than insurance payments. Unless you request a longer appointment, an established patient will only be scheduled for 10 minutes with the doctor.

How can the Caring Collaborative members assist each other to address this issue?

- Ask fellow NG members to share their positive experiences with medical providers, or e-mail the CC Coordinator for information from CC members throughout the city. This is especially helpful if you have to find a new primary care MD, or are facing a new diagnosis and would like a second opinion.
- Utilize a CC member to accompany you to an MD visit. They will be an extra pair of ears, and can help you ensure that all your questions and concerns have been answered by the doctor.

Several members described their experiences as educators and mentors who strove to identify the unique qualities in each young person they worked with, to try to *really make a difference* in their life. We also heard about the 20+ year pro-bono efforts of a member's husband and law firm colleagues to overturn the conviction and death sentence of a Louisiana man. Members resolved to re-focus energy on activities that support causes they really care about, and limit the time spent reading/viewing political news.

Upper West Side 4



Soldiers and Sailors Monument

JUNE

“Learning to Ask Others for Help” by Claire Berman,
<http://www.nycitywoman.com/learning-to-ask-others-for-help/>.

We shared personal views/experiences about the reasons women resist asking for help:

Fear of rejection

- A rebuffed request for assistance from an early career colleague led one member to no longer assume that co-workers would always be happy to help her. Thereafter she often viewed co-workers as competitors, rather than resources for mutual assistance. For someone who experienced a competitive workplace, it could be difficult to reach out to others now.
- On the other hand, if we want to be helpful, how can we ensure that offers will not be interpreted as interfering?

Fear of being viewed as vulnerable

- Everyone expected me to be perfect, and came to me for advice and help - co-workers, family members, and friends. If I ask for help now, I will be diminished in that person's eyes. If I need help who will help me?
- When someone offers their seat on the subway or bus most members said they are willing to accept it. A few decline, not ready to acknowledge that others see them as "old" or more in need of the seat.
- Emotional support is the most difficult type of help to request. We want to take charge of our own emotions. It's easier to ask someone for concrete, physical assistance.

Fear of loss of control

- I have always been a control freak. It's hard to dismiss a volunteer – I'm reluctant to ask for help from one.
- It makes people feel important to give assistance. It's not always a generous impulse - more about the giver of help than the "givee."

Our group member who uses a service dog offered these suggestions:

- Always ask first if you can help – don't assume that assistance is required. She often says "May I help you to help me?"
- If your offer of help is declined, you have to know when to not take responsibility for another person.
- "Over-helping" is frequent.

Holding doors open - courtesy or show of control?

- Is it patronizing for a man to say "you go first?" or is it a kind gesture for either a man or woman to hold the door for the person who comes after them? The group members' views were divided.

When someone pays for dinner, or brings a gift is it always about control?

- Most members thought yes if it is a dating situation.

Can an unexpected offer of help ever be welcome- yes!

- A young man visiting from England sharing his umbrella during a thunderstorm
- A hand extended when crossing a corner snowbank

JULY

The Conversation Project - Starter Kit, <http://theconversationproject.org/> a free downloadable guide to help you talk with loved ones about your wishes for end of life care.

The group members have a variety of personal situations- married, widowed, divorced, never married; children/grandchildren or no kids; many close friends or just a few- but all are concerned about ensuring their health care wishes are carried out. Suggestions to accomplish this included:

- After thinking about exactly what kind of care you'd like, the first step is talking about it with the persons who are closest to you – who may or may not be your legal next of kin. The questions in The Conversation Project will be helpful during those talks.
- Write down exactly what you have decided, in as much detail as necessary.
- Determine who should be your primary and alternate Health Care Proxy-the person(s) who will be able to tell medical personnel what type of treatment/procedures you want-if you can't communicate due to illness.
- The ideal HC Proxy is younger than you, readily available by phone, and able to carry out your wishes - even if your decisions don't coincide with their personal choices about medical care.
- Once the Health Care Proxy form is signed, give a copy to all your MDs, your primary hospital, and your emergency contacts.
- Let family and friends know whom you have selected as your Health Care Proxy- and explain why, if necessary, to avoid family feuds.

It is important to keep your health care information up to date, in the event that you have a sudden illness:

- You can use the *Caring Collaborative Medical & RX Information Card* as a template. Attach the card to your refrigerator or bathroom mirror in case EMS comes to your home. Also keep a photocopy of the information in your handbag.
- Use the In Case of Emergency (ICE) feature if you have a smart phone to enter your Emergency Contact, Health Care Proxy, and Primary MD's name. If your building has a resident website (or rolodex at the doorman's desk), also record the information there.
- Prepare a small "go bag", for an illness or other emergency that requires you to leave your home. Include a few days of medicines, a change of clothes, copies of medical and insurance information, etc.

Having an up-to-date will is essential whether or not you have close family:

- A younger relative or friend is the ideal Executor; an accountant or financial advisor can also handle the role

- Rebecca Eddy, a TTN member, may also be able to help settle an estate or recommend a resource <http://www.eddyandschein.com/>
- Attorneys who have spoken at TTN, or affiliated organizations events include: Jeffrey G. Abrandt <http://www.seniorlaw.com/goldfarb-abrandt-salzman-kutzin-llp/>, specializes in trusts, estates, and senior health law
Celia R. Clark, <http://www.cclarklaw.com/tax-law.php> specializes in estate and tax planning
Elizabeth Forspan <http://www.elderlaw-newyork.com/elizabeth-forspan/> specializes in elder care planning, Medicaid planning, trusts and estates
- Caring Transitions is a firm established by TTN member Adrian Walter-Ginzburg. The current owner, Lidia Doura, will clear out a home/apartment when someone has to move for health reasons, or an executor needs to sell the home. <http://www.caringtransitionsnyc.com/>
- Include a plan for care of your pets in your will.

Funeral and burial/cremation choices should also be considered now, and discussed with family/close friends:

- Decide if you wish a religious or memorial service, and what funeral director to use. Pre-paying for the funeral was not recommended.
- Members strongly recommended choosing a cemetery in advance if you wish to be buried. Cemetery plots close to NYC are rapidly increasing in price due to scarcity.
- If you are thinking of cremation check out the varying religious guidelines and restrictions.
- Write down your decisions so family/friends will know.

AUGUST

FOOD: What we eat, where we buy it, and why we eat/avoid certain foods.

Our first go-around showed us that one of the prime determinants of What We Eat was our health. Many members had restricted diets due to health issues such as diabetes or pre-diabetes, lactose-intolerance, celiac disease, irritable bowel syndrome, a weak immune system, high cholesterol, and insomnia. In fact, of the eleven of us present, only about a third of us had no such dietary restrictions.

We all seemed to have been raised on similar diets which consisted of meats, fish, vegetables, starches, and fruits. While most of us had reduced considerably the red meats and carbs from this childhood base, we all seemed to still enjoy the desserts we liked as children. One member indicated noticing that her taste of specific foods had changed over time, e.g., becoming more tolerant of hot, spicy foods.

As Westsiders, we mentioned the following favorite food shopping spots: Trader Joe's, Fairway, Zabars, Whole Foods, Gary Nulls Uptown Whole Foods, and especially, NYC's Green Markets in the summertime.

A couple of people indicated liking to try different spice blends to give variety to their food, recommending those available from Trader Joe's and Penzy's (on-line).

When the topic turned to food preparation, many women indicated not liking to cook much. The availability of so many prepared foods in the markets these days addressed this issue for some; others had developed for themselves ways to make a one-dish meal that had all the elements they needed, e.g., protein and veggies, often not requiring cooking. Riced broccoli and cauliflower were handy for such mixes, dubbed "food hacks."

Queens



The Unisphere

JULY

Introspection – examining your thoughts, feeling and ideas

The following questions were presented to the group:

- Do you or don't you have a tendency to be introspective?
- What are the advantages and disadvantages of being introspective/reflective about yourself?
- How has being/not being introspective affected your choice of partners, friends, work, activities, etc.?
- What does examining one's life mean to you and how has it changed over time?

What ensued were discussions that at times were lively and at others soul bearing. The group has gotten close and felt very safe and secure revealing their thoughts to each other. Most members of the group agreed that as they got older they became more introspective and cared less about what others thought and more about what made them happy.