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Downtown 3



Union Square Green Market

OCTOBER

Cultural events:

Modigliani at the Jewish Museum—highly recommended; Battle of the Sexes—very well done; Dunkirk and The Big Sick—both excellent; Van Gogh's Ear - horrible; Michael Moore's The Terms of My Surrender—highly recommended; looking forward to seeing "Loving Vincent", original oil paintings with animation.

Although a topic—risk-taking—had been agreed upon prior to the meeting it was agreed that we didn't have to stick to a programmed topic if other matters were of immediate concern to member of the group. One member expressed feeling a great deal of distress about the Las Vegas massacre, and we considered whether the second amendment gives permission for extreme violence. 80% of NRA members want more stringent gun laws. We considered why so many mass shootings have occurred recently, what has changed? Some thought that the president and the current political climate add greatly to the atmosphere. A general discussion of politics and how to get involved ensued.

Risk-taking and comfort zones.

One person was frightened to take a trip to France for fear of not being able to do things because of the limits of aging. Another said she, too, experienced being panic-stricken about taking a trip. Another mentioned experiencing anxiety months before having to travel. As for taking a risk, one person in her youth routinely rode her bike fearlessly along Fifth Avenue at 2: a.m. in the morning; another changed her career at mid-life. Comfort zones can be useful as a way to deal with fear.

Upper West Side 1



Fairway Market

SEPTEMBER

The choices we have made regarding career and work.

L began with a quote from the Dalai Lama to the effect that often not getting what we want can be a stroke of luck.

For J that would be that flashy heartthrob of her youth.

L reflected on her post-college career path and how happenstance played as big a role as choice-making, and her own desires were not reliable. Armed with a degree in French, newly married, after a move with her husband to Boston, she first sought a job in publishing. No dice. And so she got a position with Triptix until she was flooded with irate callers after a crisis. It was January, but she decided to go to either library science school at Simmons or enroll in a masters in teaching degree at Harvard. Simmons didn't accept students in January -- and the rest is history. She had never imagined she could be a professor but loved being a student again and hasn't looked back. (She became a Ph.D. in English, a full professor, and later a college Dean at Pace.)

Like R in our previous meeting, F couldn't relate to L's memory of the limits on female professional options. She had had a father who wanted her to become a medical doctor, and she majored in biology, but later worked in publishing at Little Brown.

J, too, worked in publishing -- as a permissions editor where she was in regular contact with the Nabokov's and recalls Vera as the dragon lady who lived to protect her husband.

Continuing the idea that there were avenues not open to us, J remembered that in those days women knew they couldn't live in Europe (without a husband). S lived in London as part of her job for several years when she was 30ish, but recalls those years as lonely. J later lived in Cambridge with her husband, but only socialized with fellow Americans.

J, also, had a "you can do anything" kind of father who encouraged her to pursue medicine, but experienced that vote of confidence as a double-edged sword. She attended Bryn Mawr as a premed student and was taken aside by her biology professor with the query, "Why are you doing this?" She was failing, and the teacher could see she just didn't enjoy it. J2 switched to a political science major, but ultimately dropped out. It was the late '60's, and she returned to New York to be part of the action, later becoming an English lit major.

J did not come from a family that believed in education; she was supposed to major in being a good girl, and many of her siblings did not even graduate from high school. Her mother had had eleven children by the age of forty. Today J feels she did not allow herself to marry because it

would have been a betrayal of her mother to "best" her. Having a functioning marriage would have contrasted so with her mother's own unhappy one. Limits.

F shared the difficulty she had ending a bad marriage and noted that, today, she feels she cannot remarry because she doesn't trust herself to make the right choice. Her podiatrist husband had seemed nice enough -- he was very polite, a gentleman. He showered her in material things and urged her to spend money on herself; but at the same time he was controlling and disparaging in ways that left her in tears for the last 10 years of their marriage. Still, it was hard to leave. Later, her oldest child at the time told her that the decision had been the best she could have made for all of them, but at the time....

Reframing the question of choice, L then asked, "If you could have a do-over -- would you change any of the decisions you made?"

J thought she would have loved to have been an architect, but again, as a woman had never considered that an option. She has a good spatial sense and would have loved to design buildings. K and others reminded her that this profession is a really tough one with most practitioners working far from the artistic design part. Well, maybe an oceanographer?

K talked about her graduate school choice of German Language and Literature at Yale, a PhD program she abandoned at the ABD level (having received an MA and an MPhil). Coming from a somewhat later generation, she lived many years alone in Europe -- in Switzerland and in Munich, and thought of graduate work as a way to support her travel-lust and desire to know. Was it a good decision to spend her 20's in the rich intellectual and political environment of New Haven -- and Munich -- exploring broad based interests (feminism, Freud, Marx, fascism) and participating in a variety of interesting communities? Would any man have allowed himself this luxury in the full knowledge that the career path was probably not going to be realized because it was not viable (there were no jobs to speak of in German literature in the 1970's and 80's)? She thinks today that this was part of her "false consciousness" as a woman -- pursuing feminism as a goal but not being single minded about professional autonomy/identity. She probably thought, deep in her subconscious, she would marry one day and it wouldn't matter. Things worked out in her quest for economic independence; she feels she landed in the perfect job after a second PhD program and another 10 years in the library (which she loved). But -- not to romanticize -- these were also very difficult years, with inappropriate boyfriends, and a great deal of struggle around identity. So, looking back? Who would choose 20 years of "training" and the la vie boheme? It resulted in no husband, no children. Regrets? Probably not.

H reviewed the demoralizing saga of her Kinder-transport experience in England as a result of her parents' fateful decision to save her life by sending her away from Nazi Germany. No, she would not undo that decision today; and it was followed by many other "non-decisions" as people in her family were forced to react to events beyond their control in any way possible. H, too, had few choices except to persist. She was 15 when she was reunited with distraught and depressed parents in Paris; she felt she had little choice but to accompany them to New York. But finally, she was able to choose education -- at Hunter College. She chose her husband at age 20 and put him on a pedestal; but he was absent mentally, and then she chose to divorce him. No regrets there.

OCTOBER

Choices: Future decisions we may need to make.

L presented a *Money Magazine* Survey about what makes retirees happiest:

--Engaging in 3-4 activities, regularly; for example, volunteering, traveling, playing sports; happiest activities are social ones

--Renting brings more joy than buying as there is less home responsibility

--Living within 10 miles of their kids make retirees less happy (this one may seem to some as counterintuitive, but being too accessible for babysitting can be a negative for a number of people)

--Individuals tend to be poor predictors of their future happiness as they make decisions too quickly

--We tend to want to satisfy short term goals at the expense of longer term ones

--We are overly optimistic about outcomes of future events

--Making decisions involves many emotional issues (no surprise)

We spoke about the importance of having a Living Will, Health Care Proxy, and Power of Attorney—in a place where others can find them; for a Health Care Proxy you need someone, other than a physician, to say Do Not Resuscitate.

You can put an ICE (in case of emergency) # in your phone;

B spent some time in Kansas City, visiting her family who want her to move there. She feels her son has been putting pressure on her for 3 years, but now she is more receptive. She spent a night in a Senior Living Space there and enjoyed it; she is considering making the move as she is beginning to feel her life in NYC is not as satisfying; however, it's a huge step.

J spoke of options: to stay in her apartment or go to live near family in Pittsburgh. She wondered what happens “when I can't take care of myself.”

C said that her cleaning lady helps her to be able to stay in her apartment; she is happy to continue her research on famous Sociologist and Feminist, Mara Kamarovsly, who she just found out was a friend of Ruth Bader Ginsburg.

B spoke about Senior Buildings that are slightly subsidized; there is a waiting list. A NORC is a Naturally Occurring Retirement Community. There is a Senior Building on Columbus and 88th ST. As a nurse, B has information about resources that she will share with us.

Coop Housing—is an option; people who agree to live together; there is a TED talk about this.

Department of Aging may have information

Liz Kruger, a NY State Senator is someone who works on these issues

J spoke about possibility of living near her sister who has beautiful property in PA, but she doesn't want to leave NYC

R thinks it's important to think about timing, and that one needs to consider when is the right moment to make a change into some kind of assisted living situation that has continuing care as part of its policy. "These decisions are very important."

J; feels that she is not ready to consider any other options; even if she has to stay home, she feels she can entertain herself

G feels that her aging is forcing her to think about these issues, and her Doctor advised her to make sure she has completed Power of Attorney and Health Care Proxy forms. She is thinking about need for a health care companion, but wants to put off that decision

J said she is trying to improve her health by eating differently, cutting back on wine, and taking better care of herself; she doesn't want to have to take medicine.

We discussed pros and cons of long term health care, medical alerts and other needed steps for safety: no skid rugs, beware of animals you can trip over, take cellphone into bathroom

Upper West Side 2



116th St. Subway Station

SEPTEMBER

Stress: What is it? Does it affect you emotionally or physically?

What do you do to alleviate it?

There are stresses today that we never had before:

- Health as we age
- Other aging issues
- Money
- Family
- Death

Some difficulties related to the list above:

- Dealing with unsolicited advice
- Watching a friend deal with ill health
- Divorce
- Being alone for the first time

- Daily aggravations in the city: Traffic; alternate parking

Some stress can be useful:

- Taking a new job
- Programming many activities in a day - sometimes too many

Ways to alleviate Stress:

- Medication
- Get out of the house
- Exercise
- Vent to friends
- Eliminate toxic people in your life
- Thinking: Why worry about things if you can't do anything about it? (can help if you convince yourself)

There are different levels of stress: We need to distinguish between the short term and the long-term problems

OCTOBER

Behaviors - What are some of the behaviors you have had to unlearn over the years?

Are there still some behaviors you would like to unlearn?

Several categories of behaviors and habits were discussed

Control vs letting go

- Stopped trying to control what other people do
- Used to send letters about another person's behavior and no longer does that. Instead writes the letter and doesn't send it

Habits and Routines

- Repeats herself during a conversation. Has learned, after a long time, to be aware and to stop herself
- After retirement it took a long time to stop feeling rushed. Realized that there aren't deadlines all day long even if one makes one's own agenda
- Forgetting:
- Leaves pan on stove to dry and walks away. How to stay with it.
- Forgets keys when going out to walk the dog

The group offered suggestions on how to stay focused when doing tasks.

- Morning Routines are a problem for some. One person has always had a very structured way of doing things. To deal with a sick pet, she has had to change the order and has found that it's OK to live with a little chaos. Another member is sick of her morning routine. It is always the same and is now boring.

- Procrastinating: It is a common behavior. Agreed that procrastinating causes stress.
- The Computer: Spending too much time online, wastes the day. Has to limit it.

Upper West Side 3



West End Avenue

OCTOBER

Planning For Medical Emergencies

- What are the resources available if you don't have family nearby and/or live alone?
- What facilities have you recently used for Urgent or Emergency care?
- What do you have in your Emergency Go-Bag?

Arranging an Emergency Health Buddy

We discussed our past experiences navigating healthcare facilities alone when an emergency arose. Not having a companion when you are in pain and apprehensive about upcoming treatment is a situation that could happen to any of us, including those with family living in the NYC area.

Several group members then agreed to serve as Health Buddy for each other, and confirmed their respective contact information. These aspects of serving as a Health Buddy were highlighted: The offer to be a buddy is voluntary, and you can change your mind at any time; you can serve as a buddy for more than one person who lives near you; buddies should touch base periodically if they have not seen each other at monthly CC meetings, and must let their buddy know when they will not be available due to vacation.

Recent experience with Urgent Care Facilities

The NorthWell Health location at Amsterdam & 69th Street, where CC members previously reported very good experiences, was noted to have only Physician Assistants on most days now, rather than a MD.

What do you have in your Medical Emergency Go-Bag?

We considered the items suggested in the Caring Collaborative publication, ***What You Need to Know When You Go to the Hospital*** (available on the CC web page [here](#)) and also discussed recommendations by the NYC Office of Emergency Management.



If you don't have a **GO-BAG** yet, this is what we recommend:

Prepare a small tote or backpack with the following items:

Health Information

- Copies of all health insurance cards, a photo ID, your health care proxy, and any special instructions
- Full name and phone number of your primary care MD and all medical specialists you have seen in the past year
- Name/location of your preferred hospital
- Pharmacy name and address; list of the name, dose and frequency of all medicines/vitamins/supplements you take; list of allergies
- Summary of your health history
- User name and password for the patient portal to electronic medical records with your office visit/hospitalization summaries and test results (viewing this information on-line, if your providers use an EMR, is always faster than calling individual doctors)

Communication Tools

- Name/phone number of your Emergency Health Buddy – the person who will be your companion/health advocate during the health emergency - who *may not* be your next of kin
- Names/phone numbers of close relatives/friends to be immediately notified about your illness
- Small writing pad and pen to record the names of medical providers treating you
- Cell phone charger
- Spare eyeglasses - reading glasses are essential to read treatment consents and complete forms
- Spare hearing aid battery

Necessary Items while waiting for care

- Prescription medicines/vitamins (pack several days' supply)
- Water bottle
- Non-perishable snacks
- Cash in small bills for vending machines
- Shawl or sweater

Once you have your Medical Emergency GO BAG ready, be sure to update it at least once a year. Check that your insurance info, medication list, and MDs are still current. Add any new medical conditions.

You should also think about preparing a larger EMERGENCY GO BAG to take in case a fire, power failure, hurricane or other emergency requires you to quickly leave your home.

MY EMERGENCY PLAN is an excellent publication from NYC Department of Emergency Management & Department for the Aging. Download it here:

http://www1.nyc.gov/assets/em/downloads/pdf/myemergencyplan_english.pdf

Upper West Side 4



Soldiers and Sailors Monument

SEPTEMBER

Make up, lotions, what works, what does not and favorites.

One member brought her favorite lipstick (Bobbi Brown Rosebud), blush (Orgasm) and base No.7. The same member told of a way to check the color of your skin and thereby get an exact match by using No.7 products which are sold at Duane Reade. There is a little pamphlet at Duane Reade that explains how to take 3 photos of the skin on your face and download it to the No.7 app. By using the same paint chip matching available at Home Depot, No.7 makeup tells you the color of the makeup that most closely matches your skin. Viola!

Talk veered to thinning hair. Some people use Rogaine and find it helpful. Talk was to continue to coloring hair or not. All agreed that sun tan lotion was important, and different brands were mentioned.

Mascara is always important but on the upper eye lashes only.

OCTOBER

How familial relationships have changed over the years and where are they now?

Thanksgiving being a pivotal holiday offered a jumping off point. One member has a brother who lives too far away and so just celebrates on her own. Another member has 3 children, but they are so spread out that she stays home. Another member used to go to Boston for a large celebration, but now celebrates with her immediate family in NY. Bottom line, whatever you do just make sure that you are happy. Families are dysfunctional to a greater or lesser extent.

Conversations veered to gun control and the 60 Minutes program that featured Opioids.