



## Aging With Dignity

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Life expectancy has increased dramatically in the past 100 years: 1 in every 8 Americans is age 65 or older. For most, this means an increase in the number of healthy years.

Chronological age differs from biological age. How will you age? What do you know about care options? Will you be responsible for others as they age?

### Aging might affect:

- Communication.
- Memory.
- Physical abilities.
- Hearing, vision, teeth.
- Health and wellness, digestion, body mass.
- Sleep or mood.
- Balance.
- Happiness and attitude.

### Planning for Late Life

We have no way of knowing how long we will live, what our health will be, or what type of family or financial support we will have. The transition from work to free time can be daunting and can bring many difficult decisions.

Planning ahead, however, is important so that if we are unable to care for ourselves, others will know our wishes.

- Young adults should develop a broad set of interests and activities as sources of enjoyment so that later in life, those can be revisited.
- Even with sensory or mobility problems (e.g., walking with a cane) or memory, vision, or hearing problems, there are many interests that can be tapped.
- Aging is a lifelong process. Physical and psychological changes are inevitable but not necessarily detrimental.
- To begin planning, consider the areas of medical, legal, financial, family, and social relationships and personal preferences.

### Have you considered:

- How you will support yourself after you retire or late in life?
- What will you do to stay active when you retire? Are there volunteer activities in your community that interest you?
- What hobbies, volunteer activities, later-life careers, or companionship will sustain you?
- If you will need assistance, do you prefer to be at home or in a care facility? How will you pay for such care or does your insurance pay for it?
- Where will you live? Is there friend, family, or affiliate support nearby? Will your home need adaptations for reaching, pathways, railings, or toileting?
- If you have memory issues, who knows your interests and skills in order to suggest appropriate activities?
- Where are your important papers, and who else knows where they are?

- Have you designated a power of attorney?
- Have you written a will?
- Do you want to be buried or cremated? Have you made any advance arrangements?
- Is there a particular way you wish to be honored after you die?

## Stay Active and Eat Well

Studies show that a good diet in your later years reduces your risk of osteoporosis, high blood pressure, heart diseases, and certain cancers. Diets designed for older people should contain more high-quality proteins, vitamins, minerals, antioxidants, phytonutrients, and dietary fiber than the diet of younger adults. Limit foods with trans and saturated fats, salt, and added sugars. Add whole grains.

Keep physically and mentally active to help preserve cognition. Maintaining good cardiovascular health and a healthy weight and eating a balanced diet can have many short- and long-term benefits.

This life is your life. Make sure you are doing the best you can with it.

## Terms to Know

**Assisted living** – Housing for elderly or disabled people that provides nursing care, housekeeping, and prepared meals as needed.

**Dementia** – A general term that describes a group of symptoms affecting thinking, reasoning, and

memory that are severe enough to interfere with daily functioning. Alzheimer's disease is the most common case of progressive dementia.

**Elder caregiving** – Fulfilling special needs and requirements for aging individuals.

**Executor** – A person or institution assigned to carry out the terms of a will.

**Hospice** – Professionally coordinated support services, including pain and symptom management, social services, and emotional and spiritual support for terminally ill people and their families. The care is provided at home and in other settings.

**Living will** – A legal document that communicates a person's wishes about lifesaving and medical treatments should he or she become unable to communicate health care wishes.

**Medicaid** – The federal- and state-funded health and long-term care program for people with limited income and assets.

**Medicare** – A national social insurance program, administered by the U.S. federal government since 1966, that guarantees access to health insurance for Americans age 65 and older who have worked and paid into the system, as well as for younger people with disabilities.

**Person-centered care** – The assurance of individuality, choice, privacy, dignity, respect, independence, a sense of being part of a community and connected to the larger community, and a home environment in which to reside.

**Power of attorney** – One acting on legal and financial authority for another.

## Planning Resources

**"A Guide for Making Housing Decisions: Housing Options for Older Adults," National Association of Area Agencies on Aging –**

[www.eldercare.gov/eldercare.net/public/Resources/Brochures/docs/Housing\\_Options\\_Booklet.pdf](http://www.eldercare.gov/eldercare.net/public/Resources/Brochures/docs/Housing_Options_Booklet.pdf)

**"Life Plan for the Life Span," American Psychological Association Committee on Aging –**

[www.apa.org/pi/aging/lifespan.pdf](http://www.apa.org/pi/aging/lifespan.pdf)

**"Putting Legal and Financial Affairs in Order," University of Maine Cooperative Extension, Bulletin 4211 –**

<http://umaine.edu/publications/4211e/>

**Respite Care Program, Virginia Division for the Aging website –**

[www.vda.virginia.gov/respite.asp](http://www.vda.virginia.gov/respite.asp)

**Work & Retirement Tools, AARP –**

[www.aarp.org/work/work\\_tools.html/](http://www.aarp.org/work/work_tools.html/)