

"We are all here on earth to help others; what on earth the others are here for I don't know."

W. H. Auden

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New Members

DCV warmly welcomes its newest members:

Emmylou Daly
Michelle and Glenn Engelmann
Susan Bonfield Herschkowitz
Betsy Stewart

DUPONT
CIRCLE
VILLAGE

President's Letter

---Lois Berlin

I am still basking in the afterglow of this year's DCV Gala, **Politics, Taxes and All That Jazz!** It was a night to remember: beautiful weather, yummy food and drink and, most important, rooms full of DCV members and guests enjoying each other's company. I saw people I have known for years and met others who are new to our organization or involved with us in some way. I think I can confidently say that a good time was had by all.

Of course, such events don't just happen. I am deeply grateful to my Gala Co-Chair, **Iris Molotsky**, who really did all the heavy lifting to make our Gala such a success. Since her return in mid-February from her around the world adventure with Irv, she has spent countless hours gathering destinations and sponsor support, selling ads and generally just "making it all happen."

I'm grateful to a number of other people who were instrumental in the Gala's success. **Eva Lucero**, our Executive Director, was invaluable in planning and executing the many tasks and details that are involved in such an event, including cooking the delicious rice that was served at dinner. **Abigail Wiebenson** was my partner in food for yet another year and took on the additional task of assigning tables and seats. **Carol Galaty** was the mastermind behind the festive and joyous table decorations, and **Linda Harsh** produced the name badges and table cards that kept us all in our places.

And just when we thought the Celeb Salons couldn't get any better, **Peg Simpson** and **Jane Pierson** and their very determined committee members produced a line-up of celebrities who many of us look forward to meeting. All the many folks who worked very hard to produce our Gala are listed in this issue of the Newsletter. Thank you all from the bottom of my heart.

During the last days of planning for the Gala, we were deeply saddened by the

death of longtime neighborhood activist, ANC commissioner, DCV member, and friend to anyone he ever met, **Mike Feldstein**. Mike was a true mensch (good soul), and he will be sorely missed. Our 2016 Gala was dedicated to him, and we were happy to celebrate him through the words of Mike Kain, and the presence of his brother, Lew Feldstein.



The Board of Directors has been busy on a number of issues. First and foremost, I want to thank **Brad Edwards** for his service to the Board and to DCV for the past four years. Brad stepped down from the Board in March, and, in keeping with our bylaws, the Board appointed **Steve Kittrell** to fill Brad's term. Being a Board member is a commitment of time and work, and I am grateful to Brad for his myriad contributions and to Steve for his willingness to serve.

A major focus of the Board is to increase our funds for subsidized memberships (M+). At our April meeting, we unanimously agreed to initiate an incentive for donations to our subsidized membership fund by designating \$10,000 of unspent grant funds for matching funds. All donations made to the M+ fund, up to \$10,000, will be matched dollar for dollar. As you consider donations to DCV, please consider designating them for the M+ Fund.

So, politics will continue to be a focus or distraction for the next few months, our taxes are done or extensions filed, and the music plays on, be it jazz or something else. I look forward to seeing you again on May 19 at the Chastleton as we welcome spring in our typical way -- food, drink and good company. ■



MONTHLY Calendar

Dining in Dupont

Saturday, May 7, 2:00 pm

Texas de Brazil Restaurant
455 Massachusetts Ave, NW
Enjoy a Brazilian-style lunch (salad bar, followed by meats served tableside) with fellow Villagers. \$24.99/person, or \$19.99/person for salad bar only (tax/tip/beverages extra). Pay individually by method of choice. RSVP by May 2 to Lucy Cooney at lucy1030@starpower.net. Closest Metro stops are Gallery Place or Judiciary Square.

TED Time

**Thursday, May 12,
6:00-8:00 pm**

1954 Columbia Road, NW (the Hobans' home)
The video "What Makes a Good Life?" features Robert Waldinger talking about the results of the landmark Harvard Study of Adult Development and its insights into physical and cognitive health as we age. Limit of 15. RSVP to Lucy Cooney at lucy1030@starpower.net. Let her know if you can bring a dessert or snack.

Sycamore Island

Friday, May 13, 12:00-2:00 pm

Abigail Wiebensohn has invited 11 Villagers for a visit to this Potomac River island retreat. Picnic tables and canoes are available. Enjoy Abigail's egg salad sandwiches or bring your own lunch. Also bring a drink (water there is not potable). Getting to the Island from the parking lot requires physical fitness. See the Eblast for driving directions. RSVP to Lucy Cooney at lucy1030@starpower.net, and also let her know if you need or can provide a ride.

Soup Salon

Sunday, May 15, 6:00-8:00 pm

1954 Columbia Road, NW (the Hobans' home)
Dr. Mark Bergel founded A Wider Circle in 2001 to help those in poverty through a novel team

continues on page 3

Partnership with Georgetown Medical Students-

--Eva M. Lucero, Executive Director

By 2025, the number of Americans over the age of 65 will nearly double, making older adults the fastest-growing age group in the country. According to the American Geriatrics Society (AGS), 25,000 certified geriatricians will be required to provide quality medical care for these older adults. Yet, as of 2014, there were fewer than 7,500 geriatricians in the United States.

The demand for geriatricians exists, but why are so few medical students going into the field? According to Carol Goodwin, AGS Vice President of Communications, "geriatrics is one of the lowest-paid medical specialties, in part because virtually all its patients are on Medicare, which pays doctors less than commercial insurers."

She added that geriatrics is usually a calling. Many geriatricians go into the field because of personal experience with an older family member. An eye-opening fact is that only eight of the country's 145 academic medical centers have full geriatrics departments. None of the medical schools in the DC metropolitan area has a full geriatrics department, although George Washington University sponsors an accredited fellowship training program.

DCV is doing its part to help improve the situation. Five years ago, Dr. Pamela Saunders, an associate professor at Georgetown University, asked us to participate in a mentorship program with first-year medical students. Georgetown's Senior Mentor Program aims to improve prospective doctors' care for older patients by developing effective communication between a medical student and an older "mentor" from the community. Mentors share their medical issues, and students use the information to build a medical case and understand the effects of health, medical, mental, family and social issues on the elderly.

Over the course of four years, the curriculum includes meeting three times a year to assess medical history, nutrition, chronic illnesses, daily activity patterns, sleep disorders, depression, fall risks, care planning, cognitive abilities and clinical life review. Students also accompany the Villagers to their doctors as observers.

The program began with four Villagers participating, and this year has 17. **Peg Simpson** was one of the first Villagers to participate, and her mentee is graduating from med school this May. Peg has been pleased with her experience and has forged a bond with her student, another benefit of the program.

Peggy Siegel, who is participating this year, emphasized the importance of the program in enabling med students, regardless of their future specializations, to understand aging issues holistically from the perspectives of those who are aging and to see more directly how medicine and the medical "system" is changing. She too has forged a friendly bond with her student and feels that when two people are equally curious about life and organizational transformation, the huge age difference becomes irrelevant.

Our Village plans to continue this win-win partnership with Georgetown and reap the important benefits that Peggy fittingly anticipates: "More active engagement at the program level would likely yield valuable strategic insights for the Village movement, particularly in preparing Village volunteers to help medically needy members, as well as in forging stronger partnerships with local medical professionals." ■

Calendar, continued from page 2

approach that addresses all facets of poverty simultaneously. Now serving thousands of individuals, the organization has been twice named "one of the best" by the Catalogue for Philanthropy. RSVP to Linda Harsh 202/234-2567 or lindajkh@mac.com. Let her know if you can bring soup. Limit of 15.

Informational Happy Hour at Abigail's

Wednesday, May 18, 5:30-7:00 pm
1916 S Street, NW

Please forward names and contact information for prospective DCV members to Abigail at abigailwieben-son@gmail.com by May 5.

IONA Senior Services: Special Tour and Q&A

Thursday, May 19, 1:00 pm

4125 Albemarle Street, NW
Iona is one of the best-known resources for older adults in DC. Join DCV for a tour and learn about Iona's powerful programs and impact. Following the tour, you may stay for a private Q&A session with Iona's staff. Limit of 15. RSVP to Beth Merricks at bmerricks@msn.com by May 12. Closest Metro stop is Tenleytown on the Red Line.

DCV Spring General Meeting and Potluck Dinner (details on Eblast)

Thursday, May 19, 6:30-8:30 pm
The Chastleton
1701 16th Street, NW

Hillwood Museum and Garden Tour

Friday, May 20, 11:30 am-2:30 pm
4155 Linnean Avenue, NW
The museum tour of Marjorie Merriweather Post's former residence, known for its French and Russian decorative art, will begin at 11:30 am, followed by a garden tour at 12:30 pm and lunch at 1:30 pm. Suggested donation is \$10.00/person. Lunch to be ordered and paid for individually. RSVP to Beth Merricks at bmerricks@msn.com, and let her know if you can provide or need a ride. ■

Here's to Your Health!

---Mike Gould, Volunteers Chair and Coordinator

Our work on encouraging members to feel comfortable requesting the services of our volunteers and on improving the quality of those services, particularly in home handyman needs and computer technology, is paying off. I'm confident that we'll soon be able to reap benefits from the work we're doing to strengthen volunteer support for members with health problems.

To address this issue, I organized a Medical and Health Support sub-committee of six very smart people: Executive Director **Eva Lucero**, **Michaela Buhler**, **Carol Galaty**, **Joan Ludlow**, **Roberta Milman** and **Peggy Siegel**. We're also getting invaluable support from Bob McDonald, Executive Director of Foggy Bottom/West End Village. Here's what they have to tell us so far:

"Care Groups" for Members with Serious Medical Problems: As our members age, we will have more and more people whose capacities are limited by medical problems. They will need intensive help from volunteers for transport, errands, friendly visits and other services. Our Village has developed the concept of "care groups," and we now have five in operation. Each group is led by a person who is responsible for maintaining a personal relationship with the person in need, monitoring progress and informing me of special needs as they arise.

To perform this role effectively, our volunteers need training. They need to learn more about listening and talking to members, looking for "red flags" that suggest problems, identifying third-party assistance when needed and understanding the rudiments of medical advocacy. **In collaboration with Foggy Bottom/West End Village, we plan to offer a training program on these topics for six of our volunteers later this Spring. It will be a challenge to recruit, train and deploy a dedicated core group of trained volunteers for our Care Groups, but doing so will allow us to take much better care of members who may develop severe medical problems.**

Volunteer Guidelines, Personal Injury Waivers and Confidentiality Agreements:

Currently, our Village has no authoritative guidelines for volunteers. Eva has gathered materials from other Villages on confidentiality agreements, personal injury waivers for volunteers and general volunteer policies.

Our challenge is to prepare DCV documents for our volunteers to sign, which is an opportunity to create a much better informed group of volunteers, limit legal liability for DCV and protect the privacy of the people we serve.

Papers on Health-Related Issues: Roberta, who has extensive experience in the field of health administration, has written papers for us on the following subjects: Keeping a Personal Health Record; Being a Partner in Your Health Care; Resources for Being a Partner in Your Health Care; and Advance Directives. And Joan provided a paper on Medical Note Taking.

We are now creating an effective system of dissemination of health-related information that our members can easily access. To this end, we will create a special portal on our website for health-related documents, starting with the resources listed above and adding additional relevant works as recommended by the Health and Wellness Committee.

Emergency Contact Information: Under the direction of Carol, the sub-committee collected emergency contact information for 108 members. **Our challenge now is to create an emergency contact system for all Village members. A possible result will be wallet-sized, emergency contact cards for our members that contain their personal information and lists DCV as an additional contact point.**

Our next step in strengthening our volunteer program is to build an *esprit de corps* among our volunteers. In the coming months, we hope to organize a volunteer social event to get to know one another, a general training program for all volunteers and a way of recognizing the outstanding work of our volunteers. ■

volunteer@dupontcirclevillage.net

A Gala to Remember!

(Photos by Phil Carney, with our thanks)





DCV 2016 Gala Sponsors, Committees and Supporters

Thanks to all of you who made this year's Gala such a great success.

Sponsors

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 Luis Doderó

Volunteers

Kim Kelley
 Ed and Carol Myers
 Peggy Siegel
 Jacky Spindler
 Carmela Vetri
 Tawana Warren



Getting to know people in the know.

Monday, May 2 at 7 p.m.

How do restaurants earn all those stars? This "Best of..." award winner will share his secrets.

Ashok Bajaj, Restaurateur



Friday, May 6 at 7 p.m.

Journalist, editor and publisher, Goldberg brings decades of business experience to the iconic magazine.

Susan Goldberg, Editor of the National Geographic Magazine



Monday, May 9 at 7 p.m.

With 34 years at WashPo, he knows the lowdown on key regional controversies.

Robert McCartney D.C. Metro columnist and commentator for the Washington Post



Tuesday, May 10 at 7 p.m.

Ask this famed health economist about Obamacare versus single-payer systems.

Henry Aaron Brookings Senior Fellow and chair, Social Security Advisory Board



Tuesday, May 17 at 7 p.m.

Join journalist, author and DC insider for all the news that's fit to print.

Elisabeth Bumiller, Washington Bureau Chief of The New York Times



Monday, May 23 at 7 p.m.

Hear her inspiring stories about working with low-income women and the homeless.

Schroeder Stripling, Executive Director N Street Village



Wednesday, May 25 at 7 p.m.

These Texans came to Washington decades ago and forged careers of distinction.

Jim Lehrer, legendary PBS NewsHour anchor and his author-wife Kate.

Wednesday, June 1 at 7 pm

It takes a producer, playwright, director and educator to make award- winning theatre, and Roth does it all.

Ari Roth, Founding Artistic Director of Mosaic Theater Company

Tuesday, June 7 at 7 p.m.

Got election news blues? Change the subject with questions to a true international and terrorism expert.

Steven Clemons, Washington Editor for The Atlantic

Monday, June 13 at 5 p.m.

Award winning actress and director, Twyford has been thrilling audiences for decades.

Holly Twyford four-time Helen Hayes Award winner

Thursday, June 23 at 7 p.m.

She uses her political acumen to advocate for women and children – and to promote global growth.

Connie Morella, ex-congresswoman and ambassador to the OECD

Monday, September 19 at 7:00 p.m.

The music thrills our hearts and ears, and the staging lets us live it. Come be enthralled.

Francesca Zambello, Artistic Director of the Washington National Opera

CelebSalons

For more information: 202-436-5252 | www.dupontcirclevillage.net

Out & About

Focus on India. This spring the Village sponsored two events highlighting the pleasures of Indian culture. Dinner at Rasika on March 29 gave us an opportunity to taste many flavors of modern Indian cuisine in the elegant setting of the Library Room at Rasika's West End venue, one of the nine restaurants owned by Ashok Bajaj, who will kick off DCV's Celeb Salons on May 2.



DCV's Dance Program's latest presentation was Kalanidhi Dance, a classical Indian dance company celebrated for combining innovation and tradition within the rigors of the Vempati style. Founder/choreographer Anuradha Nehru and

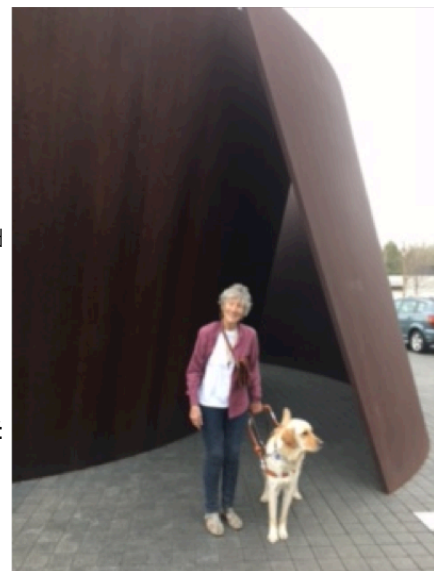


one of her students performed several pieces that showcased the Kuchipudi style of classical Indian dance. She also demonstrated her work in new genres with a short piece from her recent collaboration with the La Fayette Opera Company's production of *Lalla Roukh*, a 19th century French opera set in India. The result was a lovely and effective blending of classical Indian dance with western classical music. Many thanks to the organizers of the DCV Dance Program for bringing us this little gem.

Glenstone. March went out like the proverbial

lamb for the Villagers who ventured to Potomac, MD, on the 31st to visit the Glenstone Museum and Sculpture Garden. The walk through the bucolic grounds revealed the sculptures of several of today's finest artists, including Richard

Serra, Ellsworth Kelly and Jeff Koons. Next came a tour of the museum designed by New York architect Charles Gwathmey. The current exhibit featured works by Fred Sandback, best known for his installations made from simple store-bought yarn. An unexpected comment from the museum staff: "You made history for us. Our first seeing-eye dog!"



Passover Seder. On April 22, the first night of Passover, Carol Galaty and Ken Shuck welcomed an interfaith group of Villagers into their home to partake in the holiday's rituals and meal at their Seder, which commemorates the Israelites' redemption from slavery in Egypt and emphasizes the continuing duty to root out oppression. The Seder was a marvelous blend of tradition and originality, starting with Carol's own adaptation of the ancient text that tells the Passover story (the Haggada). Everyone participated in the readings and singing and feasted to oblivion on an occasion that was as warm and elegant as it was meaningful. ■ SL & BR



Inside TED

Wonder what goes on at a DCV TED Talk? Here's a sample.

Mission Results: Help for Haiti.

Ted Bracken hosted and facilitated the March DCV TED talk describing the work of his neighbor, Doug Jeffreys, in Haiti after the ravaging earthquake of 2010. In the video, Doug described his journey from a two-car garage in a Dupont Circle alley where he gave personal training sessions; to Results the Gym, an upscale chain with 10,000 members and 250 employees; to Mission Results, a non-profit organization he founded in Haiti to help relieve the plight of its people after the earthquake.

Doug recalled, "The devastation was overwhelming, and I almost gave up when I came upon 27 children living in an open field." Instead, he built two shelters with his own hands, even though he had no idea how to construct a building of any kind.

The empowering act of creating something out of nothing inspired Doug to believe he really could make a difference. So, much like his DC garage-to-gym chain story, in Haiti he went from constructing two rough sheds to building multi-service community centers with water and electricity; gyms, swimming pools and showers; movie theaters and internet cafes; English, math and computer classes; after-school programs; and community meeting space. And with an all Haitian-based staff, he was also a jobs creator.

After the video, Doug recounted several personal experiences, including a fall from a ladder that left him incapacitated and partially paralyzed for some time, an experience that further drove home to him Haiti's lack of health care and infrastructure. Nonetheless, he believes that Haiti's profound poverty and squalor can be overcome through his five-point program involving agriculture, infrastructure, tourism, manufacturing and export. Hats off to Doug! **Sheila Lopez**

Strut Your Stuff? Should you strut your stuff in order to make yourself feel and act more confidently? Yes, claims social psychologist Amy Cuddy in her TED Talk video, "How Body Language Shapes Who We Are."

In one of her experiments, Cuddy had subjects assume a high-power pose or a low-power pose. She found that those who assumed the former were more likely to take risks than the latter group. She also found that a high-power pose increased subjects' levels of testosterone (the aggression hormone) and decreased their cortisol (the stress hormone). So, if you stand in a powerful pose before you have to do something stressful, it will bolster your efforts, she concludes.

On April 5, some 15 Villagers gathered in the home of **Alaire** and **Lex Rieffel** to view the Cuddy video and discuss it, with **Brad Edwards** moderating. The general consensus was that, while Cuddy's advice to puff yourself up

into greater self-confidence might help people in certain situations, it also could have pitfalls.

For example, it might turn people off rather than on. Ted Bracken said that he still recalled with distaste the time a general marched into his office, sat down and put his feet up on his desk. Brad reported that in training people to conduct surveys, he found that women were generally better at it than men, perhaps because men tend to be more aggressive than women. Strutting your stuff is also inauthentic, which is a turn-off for many people, other Villagers noted.

Brad offered additional reasons to think twice before practicing Cuddy's advice. Some researchers have attempted to replicate her findings, yet have failed to do so. Also, she did her research on Harvard Business School students, who are already quite self-confident. What would she find if she did the same research on people with less self-confidence to start with?

The question of whether people can change their minds and behavior by intentionally changing their body language appears to be of great public interest. Since Cuddy's video was released in 2012, it has been viewed some 39 million times, Brad said, making it one of the most popular TED Talks ever.

■ **Joan Treichel**



Belmont Mansion Tours: Villagers Glimpse Dupont High Society

--Joan Treichel

The Belmont mansion, at the confluence of New Hampshire Avenue and 18th and Corcoran Streets, is arguably the most exquisite example of Beaux Arts architecture in the Dupont Circle area. And during February and March, **Sheila Lopez** worked her magic so that some 30 Village members could tour the inside of the mansion.

The tours offered a glimpse of life during the early years of the 20th century when Dupont Circle was the hub of high society in the Capital. The Belmont mansion, which was built between 1906 and 1909, is composed of five floors and 54 rooms.

The fourth floor, with its long French windows, is the most stunning. It contains a music room in front, followed by a staircase, a ballroom with a skylight, a room used by Perry Belmont, a formal dining room and a kitchen.

The rooms are full of treasures, such as gilded walls, Ming dynasty vases and glistening Italian crystal chandeliers. It took 25 year-round servants to maintain the home and its occupants.

Perry Belmont and his wife Jessie used the mansion only three months out of the year, during the social season. They owned five other residences, including a horse farm in Kentucky. The Belmont Stakes, one of the three horse races comprising the Triple Crown, was named after Perry Belmont.

The Belmonts were initially shunned by Washington society since Jessie was a divorcee. But after President Taft came to one of their parties, society became more accepting of them. The White House sometimes even used the mansion to entertain dignitaries, including Edward, Prince of Wales.

The Belmonts used their Dupont mansion until 1925. It was purchased by the international Order of the Eastern Star, an arm of the Masons that accepts women as well as men, and has been its headquarters ever since. ■

Your Newsletter is taking a break. See you in July!



DCV on the Radio

If you missed Executive Director **Eva Lucero**'s interview about Dupont Circle Village with WPFW (89.3 FM) "Community Watch" host Gloria Minott on March 28th, you have a second chance. See the archived interview listing at <http://www.wpfwf.com/radio/program-ming/archived-shows>.

Eva reviewed the birth of the Village movement in Boston and the prevalence of DC-based Villages. She also talked about the myriad activities of our own Village, including the then-upcoming Gala and silent auction featuring global travel destinations and a first opportunity to bid on many Celebrity Salons.



Eva's interview was approximately 15 minutes into the program and runs about 10 minutes. **Pender M. McCarter** said, "Eva was magnificent, as expected." So is Pender for successfully arranging this interview and providing the above information. ■

Health and Wellness Alert

Older Lesbian, Gay, Bisexual & Transgender (LGBT) Health

---Brad Edwards

Older LGBT people have been getting a lot of attention lately. Take Edie Windsor, 86, for instance. She was the plaintiff in *United States v. Windsor*, the June 2013 Supreme Court decision that said denying federal benefits to same-sex couples who were legally married was discriminatory and unconstitutional. That ruling triggered my decision to marry my partner of 25 years, **Alan Lopez** (in a ceremony presided over by DCV's own **Stephen Williams**), and inspired many others throughout the District to do the same. DCV has welcomed LGBT people into its ranks from its beginning, while Dupont Circle has long been the heart of DC's LGBT community in DC. We embrace this as important parts of who we are.

Policy makers have realized for some time that older LGBT people were more likely to be in poorer physical and mental health than the general population, but it's only been in the past decade that we've been able to document these health disparities. In the 20th century, most government-sponsored surveys did not even ask about sexual orientation; the entire LGBT population was statistically invisible. Now, study after study is finding that gays and lesbians are more likely to have high blood pressure, heart disease and diabetes, to be depressed or disabled, to smoke or drink excessively and, in general, to have poor physical and mental health compared to others. These problems tend to get worse as LGBT people age.

Why is LGBT health so bad? First, there's a history of discrimination. The stigma we felt as children and youths often became internalized and led some of us to engage in unhealthy behaviors, denying our self-worth. Second, we have been a marginalized population – the social support from family and community-of-birth was often denied us. Third, the impact of AIDS on the generation of older LGBT people has been incalculable – so many losses, and many survivors with HIV are now at greater risk of stroke and other cardiovascular events because of the combined impact of drug side effects and lingering infections.

One striking fact is that older LGBT people are more than twice as likely to live alone and three to four times as likely to be childless compared to the general population of older adults. This has many consequences. Living alone is a primary risk factor for many poor physical and mental health

outcomes. People who live alone are more likely to be socially isolated. People without children are more dependent on their partners and others in their social circle when they need care.

It is interesting to note that among the older population in general, women are more likely to live alone than men (in large part because women outlive their husbands), whereas in the LGBT population, gay men are more likely to live alone. Older lesbians also are more likely to live alone than their straight counterparts, but not nearly as much as gay men.

Unlike race and gender, the characteristics that define LGBT people as a group are often not apparent to the outside world. I came out in my teens to everyone – family, classmates, childhood friends – but it was a calculated risk. I decided that the benefits for my mental health in the long run were significant enough to risk being ostracized and kicked out. I've never regretted that decision, and many good things sprang from it.

But it's not the right decision for everyone; much depends on the circumstances. And identity is only one part of being LGBT; there's also desire and behavior. Little did I realize as a 17-year-old that coming out would be a never-ending process. Just yesterday, in a conversation about scheduling a heating system check-up, I did a quick mental check before saying "my husband will be home" – it doesn't quite come easily, even when that's the right word in context.

Imagine the challenge an LGBT person who has been out for decades might confront upon entry into a long-term-care place like a nursing home or assisted living facility: Will it be ok to let them know this is an important aspect of who I am? My future health could depend on the reactions of the staff. The Affordable Care Act (Obamacare) requires cultural competency training for nursing and caregiving staff and says long-term-care places must display signs that clearly welcome LGBT people, but current practice falls largely short of compliance.

I'm glad to say that DCV embraces the older LGBT members of our community and celebrates the wonderfulness of our diversity. All of our programs promote connectedness, doing things we enjoy, things that enrich our lives and those of others. I think that's the best antidote for social isolation as we all get older, together. ■

Live and Learn

End Time: Understanding Hospice

Does hospice mean giving up? Is it only for cancer patients? Is it limited to six months of care? Does it hasten the end of life? At the March 28 Live and Learn, Philip Carpenter from Community Hospices, along with Susan Messina and Carol Kaplun from Iona Senior Services, dispelled some of the myths generated by these questions and provided Villagers with practical information on services hospice can offer patients and their families.

Hospice began as a grass-roots volunteer movement and has evolved into a network of interdisciplinary professionals and volunteers who provide high-quality, compassionate care to patients with a life-limiting illness and resulting life expectancy of about six months. Hospice helps patients and their families live as well as possible for as long as possible and considers the needs of the entire circle of people who are important to the patient, including a close friend or partner.

Hospice is not giving up. It is not euthanasia or assisted suicide; nor is it time limited. Patients are initially admitted for a period of 90 days and then may be recertified for an additional 90 days, followed by recertification periods of 60 days, as long as the patient continues to be hospice appropriate.

A recent Gallup poll showed that 88 percent of adults prefer to die in their homes free of pain and surrounded by loved ones. Hospice can help by providing an interdisciplinary team that is focused on caring for – not curing – patients with life-limiting health conditions. It provides services to 1.65 million Americans every year. Medicare and Medicaid cover most services provided by licensed hospices, as do many private insurers. Long-term-care insurance covers home health-care workers but not hospice.



Carpenter stressed that, “Hospice is not a place, and it does not take over all patient care. Licensed hospices have administrative offices, but their role is to provide coordinated, interdisciplinary services in private homes, assisted living or nursing care facilities or at in-patient facilities that some hospices operate to provide symptom management.”

While there are a few residential hospices, in-patient units may also be used to provide respite for family caregivers, usually for up to five days, although patients and their families may make use of respite care more than once.

Hospice services often begin when recommended by a physician who certifies that the patient has about a six-month life expectancy if the disease follows a typical course. A patient may continue with his/her private physician or use a hospice physician. The patient's private physician may decide to remain part of the team or choose to allow the hospice physician to provide oversight.

Hospice is a nursing-centered model involving scheduled visits by nurses, social workers, chaplains, home health-aides and others, as well as on-call nurses who answer questions over the phone or visit the patient after regular business hours. Nurses coordinate with home health-care workers, who handle patients' non-medical needs, like bathing or feeding. Nurses can also make death pronouncement visits, eliminating the need for police, medical examiners, etc.

Doctors (either private or hospice) must provide prescriptions, and medications must be taken by the patient or administered by a family member or a nurse. Home health-care workers cannot administer medications. “Hospices are

known for pain management,” Carpenter noted. “It is something they do every single day, and doctors who work with hospices are not afraid of that issue.”

Nurses also coordinate closely with social workers, who provide services for patients and families. When requested, hospice will connect patients to chaplains, but they are not there to pursue a particular religious agenda. A minimum of five percent of hospice's overall care must be provided by volunteers who work in hospice administrative offices. They may also serve as companions to patients but cannot provide hands-on care.

Hospice encourages people to begin talking with them earlier rather than later. There is no charge for a visit by a hospice liaison to initiate advance-care planning, discuss end-of-life wishes or plan for services that may be needed either immediately or later.

Iona assists with pre-hospice discussions and ensuring that patients have necessary end-of-life documents. They can also help with funeral and after-death issues. Iona often works with the DC Office of Aging on patients' food, safety and other needs, even without a hospice diagnosis.

Both hospice and Iona conduct training sessions and provide speakers on care for the aging. Iona has a Take Charge of Your Aging 101 class, as well as a Take Charge/Age Well Academy, which is a six-week course designed for baby boomers planning their next stage of life. Hospice has organized very popular Death Cafés where people can gather for coffee and sweets to discuss aging and death-related issues. ■ SL



--- Sheila Lopez

A quick and easy *hors d'oeuvre* that can be prepared in advance and frozen.

Green Pea Pesto on Crostini

Pesto

1 lb package frozen peas,
defrosted
1 garlic clove
½ cup grated Parmesan
1 tsp kosher salt
¼ tsp freshly ground black pepper
1/3 cup olive oil

Crostini

1 ciabatta bread or whole-grain
baguette, thinly sliced
1/2 cup olive oil
Several halved cherry tomatoes

For the pesto: Pulse together the peas,
garlic, parmesan, salt and pepper in

a food processor. With the machine running, slowly add the olive oil until well combined (1-2 minutes). Pesto may be frozen for several months.

For the crostini: Preheat oven to 350. Slice baguette thinly, spread out on baking sheet and brush liberally with olive oil. Bake for 10-15 minutes or until lightly browned. Remove from baking sheet and allow to cool. Crostini can be stored in plastic bags for several weeks.

When ready to serve, spread pea pesto on crostini, and top each with a tomato half. ■



---Judy Silberman,
Yoga Master



Remember how important it is to drink water. As you start to feel a headache approaching, drink eight ounces of water. Wait 10 minutes, and then decide if you really need medicine. Often, the water you drink to swallow a pill helps more than the pill does.

Dehydration can lead to many negative symptoms, such as foggy thinking, moodiness and poor balance. Drinking a cup of water before a meal can make you feel more full and help control the quantity of food you eat. Drinking water before you have blood drawn will plump up your veins and make the process flow better-literally! ■

Be Well and Watch for Your Newsletter in July!

The Dupont Circle Village is a non-profit volunteer organization that connects neighbors to services and educational, cultural/social and health and wellness activities. Please consider a donation now or remember us in your will.



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