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Safe Driving As We Age

Decisions about someone's ability to drive should not be based only on their age. However, age-related changes in vision, physical fitness and reflexes may cause safety concerns. Some adults recognize that driving at night, on the highway, or in bad weather has become a problem for them as they have gotten older. They find they may have difficulties when yielding the right of way, turning (especially making left turns), changing lanes, passing, and using expressway ramps. Accurately assessing changes and adjusting driving habits can help a person remain safe on the road for as long as possible.

Following are some good driving habits and tips to stay safe.

Before you leave home:

- Practice good vehicle maintenance.
- Plan to drive on streets you know.
- Only drive to places that are easy to get to and close to home.
- Avoid risky spots like ramps and left turns.
- Add extra time for travel if you must drive when conditions are poor.
- Limit how much you drive at night.
- Don't drive when you are stressed or tired.

While you are driving:

- Always wear your seat belt.
- Wear your glasses and/or hearing aid if you use them.
- Stay off your cell phone.
- Avoid distractions such as eating, listening to the radio, or chatting with passengers.
- Use your window defrosters to keep both the front and back windows clear.

Other tips:

- Have your driving skills checked by a driving specialist, occupational therapist, or other trained professional.
- Take a defensive driving course. Some car insurance companies may lower your bill when you pass this type of class. Organizations like AARP, American Automobile Association (AAA), or your car insurance company can help you find a class near you.
- When in doubt, don't go out. Bad weather like rain, ice, or snow can make it hard for anyone to drive. Wait for better weather or use buses, taxis, or other transportation services.
- Avoid areas where driving can be a problem. For example, choose a route that avoids highways or other high-speed roadways
- Discuss with your doctor if your health issues or medications might make it unsafe for you to drive.



Conditions That Impact Driving

Following are some conditions associated with aging that can impair driving abilities and tips on how to manage them. It is always advised that you talk to your medical providers about your health and how it may be impacting your ability to be a safe driver.

Stiff Joints and Muscle Weakness: Medical conditions such as arthritis can make it harder to turn your head to check lanes, more difficult to hold and/or turn a steering wheel quickly, or brake safely.

- If possible, drive a car with automatic transmission, power steering, power brakes, and large mirrors.
- Be physically active or exercise to keep and/or improve your strength and flexibility.
- If you have leg problems, think about getting hand controls in your car for both the gas and brake pedals.

Hearing: Hearing loss can make it harder to notice horns, sirens, or even noises coming from your own car.

- Have your hearing checked at least every 3 years after age 50.
- If you wear a hearing aid, be careful opening car windows, as some people find drafts can impair the aid's effectiveness.
- Try to keep the inside of the car as quiet as possible while driving by minimizing music and chatting.
- Keep alert to sounds outside your car. Watch for flashing lights of emergency vehicles since you may not be able to hear the siren at a distance.

Conditions That Impact Driving (continued)

Vision: Glaucoma, cataracts, and macular degeneration, as well as some medicines, can cause vision problems. It might be harder to see people, things, and movement outside your direct line of sight. It may take longer to read street and traffic signs or even recognize familiar places. Sunlight might be blinding at times. At night, you may have trouble seeing things clearly due to glare from oncoming headlights or streetlights.



- If you need glasses or contact lenses, make sure your prescription is up-to-date and correct. Always wear them when you are driving.
- If you lose or break your glasses, don't rely on an old pair; replace them right away with your newest prescription.
- Avoid eyewear with side pieces that may block your vision and do not wear sunglasses or tinted lenses at night.
- Don't drive at night if you have trouble seeing in the dark, and avoid driving during sunrise and sunset when the sun can be directly in your line of vision.
- Choose a car with larger dials and easy-to-read symbols. Turn the brightness up on the instrument panel.
- Keep your windshield, mirrors and headlights clean, and make sure your headlight aim is checked when your car is inspected. Some vehicles have rearview mirrors that automatically filter out glare.
- Be aware of blind spots in your mirror use. If you use a wide-angle mirror, get lots of practice judging distances to other cars before using it in traffic.
- Sit high enough in your seat so that you can see the road for at least 10 feet in front of your car. This will make a difference in reducing the amount of glare you experience from opposing headlights at night.

Dementia: People with dementia often do not know they are having driving problems. Family and friends can help monitor someone who is displaying symptoms of memory impairment which also impacts their decision-making skills. Some cues to watch for include:



- Forgetting how to locate familiar places like the store.
- Having trouble finding where they parked their car.
- Failing to observe traffic signs.
- Making slow or poor decisions in traffic.
- Driving at an inappropriate speed.
- Making errors at intersections.
- Confusing the brake and gas pedals.
- Forgetting their destination during a trip.



It is important to intervene with someone displaying these symptoms to be sure they get evaluated to determine if they should continue to drive. And although this can be a difficult situation to manage, it is necessary for the safety of both the person who is driving and other drivers sharing the road.

Slower Reaction Time and Reflexes: As we age our reflexes might get slower and we might not react as quickly as we could in the past. We may also experience a shorter attention span, making it harder to do multiple things at once.

- Leave more space between you and the car in front of you.
- Start braking early when you need to stop.
- Avoid heavy traffic areas or rush-hour driving when you can.
- If you must drive on a fast-moving highway, drive in the slower moving right-hand lane.
- Plan your route. Drive where you are familiar with the road conditions and traffic patterns. Try to make left turns at intersections where green arrow signals provide protected turns.
- When approaching intersections, remind yourself to look to the sides of the roads, as well as directly ahead.
- Scan far down the road continuously so that you can anticipate future problems and plan your actions. A passenger can serve as a "second pair of eyes." But don't get distracted in conversation.

Medications / Sleep Apnea: Some medicines, as well as the condition of sleep apnea, can make you feel drowsy, lightheaded, or less alert than usual. Many medicines have side effects that can make driving unsafe.

- Read medicine labels carefully. Look for any warnings.
- Make a list of all your medicines and talk with your doctor or pharmacist about how they can affect your driving.
- Don't drive if you feel lightheaded or drowsy.
- If you have symptoms of sleep apnea (i.e. loud snoring, episodes in which you stop breathing during sleep, gasping for air during sleep, excessive daytime sleepiness, etc.) get evaluation and treatment for this.

Information included in this article was taken from a resource developed by the USAA Educational Foundation, AARP and the National Highway Traffic Safety Administration which can be found at <https://www.nhtsa.gov/older-drivers/driving-safely-while-aging-gracefully>



January

- 05 - Charles Grove
- 06 - Raymond Kemp Jr.
- 08 - William Benson III
- 08 - Barbara Grove
- 09 - Willard Rozier
- 12 - Dolly Grissinger
- 14 - Margaret Fields
- 14 - James Gatehouse
- 19 - Wilford Park
- 22 - Joanne Garber
- 23 - Eric Glover
- 24 - Philip Conlin
- 25 - Benjamin Kreidler
- 27 - Barbara Stapleton
- 29 - Carolyn Parks
- 30 - Andrea Reffner



February

- 03 - Cathie Yingling
- 11 - William Scott
- 16 - Virginia Kelley
- 17 - Pearl Jackson
- 19 - Mildred Foust
- 22 - Constance Angeski
- 25 - Kathryn Lucas
- 29 - Patricia Kough

Birthday wishes to all of you for a happy, healthy year!

Is It Time to Give Up the Car Keys?

Driving gives a sense of independence and control. Making the decision to drive less or stop driving altogether can be a difficult and emotional one.



To help decide if it might be time to stop driving, ask yourself:

- Do other drivers often honk at me?
- Have I had some accidents, even if they were only "fender benders"?
- Do I get lost, even on roads I know?
- Do cars or people walking seem to appear out of nowhere?
- Do I get distracted while driving?
- Have family, friends, or my doctor said they're worried about my driving?
- Am I driving less these days because I'm not as sure about my driving as I used to be?
- Do I have trouble staying in my lane?
- Do I have trouble moving my foot between the gas and the brake pedals, or do I sometimes confuse the two?
- Have I been pulled over by a police officer about my driving?

If you answered "yes" to any of these questions, it may be time to evaluate whether to continue driving. A self-assessment tool for driving provided by AAA Foundation for Traffic Safety may also be helpful. It can be found at <https://exchange.aaa.com/wp-content/uploads/2021/03/Driver-65-Plus.pdf>. If you are unsure about continued driving, having a conversation with family, caregivers and/or your doctor may help in making the decision.

There are upsides to not driving. In addition to keeping yourself and other drivers on the road safer, you will be minimizing your expenses. You will no longer need to buy car insurance or pay for car registration, license and maintenance. And no more filling up the gas tank! You may decide to sell your car which could give you some extra cash. Additionally, if you have a garage that was used for a car, it can provide more space to store items for easier access.

Making the decision to no longer drive may be easier if you are aware of alternative transportation options. Do you have other people you can rely on to go shopping or get to appointments? Does your community have public transportation (i.e. bus, taxi, Uber, train). Both Blair and Huntingdon counties have low-cost transportation for seniors through their local Area Agency on Aging. Call for details: Blair Senior Services, Inc. transportation office toll free at 800-458-5552 or 814-695-3500; Huntingdon/Bedford/Fulton Area Agency on Aging transportation office toll free at 800-333-9004 or 814-635-3653. Additionally, there is a medical transportation service for veterans in both counties through the James E. Van Zandt VA Medical Center: Blair County 814-943-8164, ext. 7383; Huntingdon County 814-643-4202.

RSVP Mileage Reimbursement Benefit



RSVP provides a travel reimbursement benefit at a rate of 20 cents per mile, with a maximum \$50 per month, to AmeriCorps Seniors enrolled in our program. It can be claimed for:

- mileage from the volunteer's residence to the RSVP station where they serve
- mileage accrued from service activities that require driving, such as delivery of meals to homebound individuals
- mileage from the volunteer's residence to locations of RSVP events they attend

AmeriCorps Seniors do not have to claim this benefit. But if they choose to, they must include details of their travel destinations and daily miles accrued on their RSVP monthly logs. The logs must be turned into their RSVP station supervisor for review and approval. The station supervisor then submits the information to the RSVP office to process for reimbursement. Reimbursements are paid on a quarterly basis for amounts of \$10.00 or more. If less than \$10.00, the amount is carried over to the next quarter. A final payment is made for all outstanding amounts of \$5.00 or more after the end of the fiscal year (June).

The second quarter reimbursements will include travel in October, November and December. All volunteer logs for these months should be submitted as soon as possible at the beginning of January. Reimbursement checks will be mailed January 31. Any volunteer who is expecting a reimbursement check who doesn't receive one by the end of the second week of February should contact Dorcey Cuzzolina, RSVP Project Coordinator at 814-506-5267.

PA Dutch Foods Quiz

Our region has many foods associated with the Pennsylvania Dutch who immigrated from Germany and settled locally. How many of those foods can you identify from the following descriptions:

1. Pie that has a rich filling made with brown sugar and molasses.
2. A baked doughy snack item characterized by a chewy bread texture and bow-like shape.
3. Pickled relish containing green beans, kidney beans, carrots and cauliflower with vinegar and sugar.
4. A meat dish typically made from ground ham and pork, formed into a loaf (or meatball size balls) then topped with a sweet glaze of brown sugar, apple cider vinegar and dry mustard.
5. A dessert sandwich of two small round cakes (usually chocolate) having a creamy filling between them.
6. Strings of fried dough covered in powdered sugar, typically a favorite at local fairs.
7. A mush of pork trimmings, cornmeal, wheat flour and spices formed into a block. It is usually sliced and pan fried as a breakfast item.
8. A soft drink made from herbal extracts and birch bark.
9. This pig and cabbage combination is a local traditional meal for New Year's Day.
10. A food item commonly found at picnics that is made with vinegar and sugar to produce a sweet and sour taste. It takes on a purple color from added beets.
11. A cured, smoked and fermented semidry beef sausage that is usually served as lunch meat.
12. This food is produced by long, slow cooking of a specific fruit with cider or water to a point where the sugar in the fruit caramelizes giving it a deep brown color. It is often spread on bread/toast.
13. This stew includes chunks of meat (usually chicken or ham), large square egg noodles and vegetables such as potatoes and/or carrots.
14. A thick, sweet dressing that is usually served warm over fresh salad greens, often dandelion greens to offset their tart taste.
15. This is a whole peeled piece of fruit that is sprinkled with cinnamon, butter and sugar, wrapped in dough and baked. It is usually served as a dessert or breakfast dish.



If you have not had the opportunity to try these products, there are stores and restaurants in both Blair and Huntingdon counties that offer them!

Answers to this quiz will be posted on the RSVP Facebook page and in the next newsletter.

Answers to Animal Idioms Quiz

Following are the idioms from the last newsletter quiz that are related to the animals: hornet, goose, ants, horses, worms, pony, lion, turkey, weasel, clam, beaver, bee, crow, pig and rat.

1. Being extremely angry: Mad as a hornet.
2. Look everywhere for something that can't be found: Wild goose chase.
3. Inability to sit still: Ants in pants.
4. Wait: Hold your horses.
5. Create a situation that will cause problems: Open a can of worms.
6. Have only one good ability: One trick pony.
7. The biggest portion: Lion's share.
8. Suddenly stop a habit: Quit cold turkey.
9. Get out of responsibility in a sneaky way: Weasel out of it.
10. Become quiet suddenly: Clam up.
11. Excited about doing something: Eager beaver.
12. Go straight for something: Make a bee line.
13. Admit to being wrong: Eat crow.
14. Being very stubborn: Being pig-headed.
15. Begin to suspect trickery: Smell a rat.

