

# New Horizons



Joe Jordan is a news director/investigative and political reporter for News Channel Nebraska and Telemundo Nebraska. Born and raised in Chicago, Jordan spent 29 years at Omaha's KMTV.

During his 48 years in journalism, Joe has received the Walter Cronkite Award for Political Journalism on Television and Columbia University's duPont Award for Investigative Reporting.

**Nick Schinker chronicles Joe's life and career beginning on page 9.**

## Caregiver support



Debbie Akyurek, a former music teacher and Omaha Symphony Orchestra cellist, gets help caring for her husband, Murat, from ENOA's Caregiver Support Program.

**See page 8.**

## Inside

Find out how to benefit from VAS .....	2
Embracing new transportation modes .....	3
COVID's role creating food problems .....	3
Sleep disorders lead to health issues .....	5
Heartbreak hits hardest in Nebraska .....	7
Social Security data available online .....	7
Regenerating muscle tissue .....	10
Maximizing your home safety .....	11
Preparing a vegetable garden .....	12
Hemesath's 'Conscious Aging' .....	12



# VAS provides free benefits counseling

Thanks to its network of dedicated volunteers, Volunteers Assisting Seniors (VAS) has continued providing benefits counseling for older adults remotely through phone assistance to ensure the health and safety of its clients and volunteers.

While the office is closed to the public, VAS is taking phone calls during office hours at 402-444-6617. VAS will return to in-person assistance through a phased implementation when it's safe to do so.

VAS helped 436 homeowners with their Homestead Exemption applications for an estimated savings of \$1 million in property tax relief, an average savings of \$2,294 per homeowner.

Be sure to file your Homestead application by June 30 each year. If you'd like VAS to help you with your application, call 402-444-6617 to schedule a phone appointment with one of its trained volunteers.

VAS provides Medicare counseling by phone, including

access to important Medicare resources by mail, email, or online. If you'll be turning age 65 or ending your employer insurance soon, please call VAS to speak with a certified SHIP counselor to help you understand your Medicare options.

It's important to review your Medicare Prescription Drug or Advantage plan every year during Medicare's Open Enrollment so you can have the best coverage at the lowest cost. Last year, during the pandemic, VAS helped more than 1,200 people review their Medicare plans over the phone.

VAS will be helping with Medicare Open Enrollment again this fall, keeping its client's health and safety as its primary concern. VAS will begin scheduling Open Enrollment appointments for Drug and Advantage plan reviews in late September.

Please call VAS at 402-444-6617 to schedule an appointment for a plan review.

## ENOA is recruiting Senior Companions, Foster Grandparents

Men and women age 55 and older who want to earn a tax-free stipend while making an impact in their community are encouraged to join the Senior Companion Program and the Foster Grandparent Program.

Sponsored locally by the Eastern Nebraska Office on Aging, the SCP and FGP are national programs of AmeriCorps Seniors, formerly the Senior Service Corps.

Senior Companions help other older adults maintain their independence by visiting them at home to discuss the news, read mail, play cards, run errands, etc.

Foster Grandparents serve as positive role models for children who need special attention with education, healthcare, and social development in schools, Head Start programs, and child development centers.

SCP and FGP volunteers must meet income guidelines and complete an enrollment process that includes references and background checks.

In exchange for volunteering 10 hours or more per week, Foster Grandparents and Senior Companions receive a \$3 an hour tax-free stipend, mileage reimbursement, an annual physical examination, supplemental accident insurance coverage, and other benefits including an annual recognition luncheon.

The stipend does not interfere with rent, disability, Medicaid, or other benefits.

For more information on the FGP and SCP, please call 402-444-6536.

## Metro Women's Club

The Metro Women's Club is hosting a luncheon on Tuesday, Sept. 14 at Gorat's Steakhouse, 4917 Center St. Social time, which begins at 11:30 a.m., will be followed by a noon lunch.

The program will feature a Blues musician who will perform and music and tell stories.

For more information about the luncheon or joining the Metro Women's Club, please call Virginia at 402-419-1121.

# Do you need a third dose of the Covid-19 vaccine?

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Including self-driving vehicles, ride-hailing services

## Survey indicates older Americans believe they'll benefit from alternative transportation options

The National Council on Aging – the national voice for every person's right to age well – and Volkswagen Group of America recently released the results of an online survey of older adults designed to better understand attitudes and perceptions about self-driving and ride hailing (SDRH) services and their perceptions about alternative transportation options. Approximately 70% of respondents said they trust SDRH services, feel confident they could enhance their safety, and believe such services could help them achieve tasks outside the home and do the things they want in life.

"Technology will play a key role in addressing challenges faced by older adults who are no longer able to drive," said NCOA Senior Director Kathleen Cameron. "The five most important aspects of SDRH services for older adults are safety, quality of service, convenience,

traffic, and overall comfort of riding in the vehicle," she added.

Three-quarters of respondents said they expect to use SDRH technologies in the future, and 71% agreed it would help them maintain their independence.

Older adults often outlive their decision to stop driving by about 10 years for women and seven years for men. The decision to stop driving is usually due to declining vision, physical, and cognitive abilities or the use of medications that impair driving.

Non-driving older adults need alternative transportation to go to doctor's appointments, shop, and engage in activities that keep them socially connected like attending religious services, visiting friends and family, and enjoying entertainment. Caregivers most often provide this transportation. In some parts of the country, public transportation, taxis, and ride hailing services like Uber may be options for older adults. However, in many rural areas, these alternatives aren't available.

Technology can play an important role in addressing these challenges. Today, many in-car technologies support the driver by performing parts of the driving task, and soon, cars will become so advanced they'll be able to support the driving task entirely from start to end. Self-driving ride-hailing services such as self-driving taxis, Ubers or Lyfts, or public transit shuttles also could be a solution for older adults.

Almost 2,500 people over age 55 responded to the NCOA survey. The average age of respondents was 60, and 64% were male. Most respondents were white (75%), while 15% were Black/African American, 4.3% American Indian/Alaskan Native, and 30% Hispanic/Latino. Most respondents were from metro areas (88%), while 8% resided in suburban areas and 4% in rural areas.

(NCOA provided this information.)

## Study examines COVID's impact on food insecurity among older adults

The National Council on Aging (NCOA), the national voice for every person's right to age well, and the LeadingAge LTSS Center @ UMass Boston recently unveiled two groundbreaking issue briefs that underscore the long-lasting effects of pandemic-related food insecurity among older adults, especially older women and people of color.

The research suggests that while enhancements to the Supplemental Nutrition Assistance Program (SNAP) were likely effective in temporarily decreasing pandemic-induced food insecurity among vulnerable older adults, the increased SNAP benefits provided by the American Rescue Plan must be made permanent and reflect increased food costs to overtake the growing number of older households expected to face food insecurity.

"The past is prologue and this analysis underscores that after a major socio-economic upheaval such as a recession or pandemic, food insecurity among vulnerable older adults grows and remains higher than before the catastrophic event," said NCOA President and CEO Ramsey Alwin. "We need to take hunger off older adults' tables by making enhanced SNAP benefits permanent."

The first issue brief, *Food Insecurity Among Older Adults and the Role of the Supplemental Nutrition Assistance Program* highlights how the most recent recession in 2008 affected food insecurity among people over age 60 and how those levels of hunger

persisted 10 year later.

"These findings are staggering because the COVID-19 pandemic has already had grave economic and health consequences, and we can reasonably expect that older women and people of color will continue to be the hardest hit in the coming decade," said Susan Silberman, PhD, Senior Director of Research and Evaluation at NCOA and a report author.

The second issue brief, *The Effectiveness and Adequacy of the Supplemental Nutrition Assistance Program in Reducing Food Insecurity During an Economic Downturn*, shows that although SNAP is effective at reducing food insecurity and skipped meals, SNAP benefits haven't kept up with the rising cost of food and there are still a substantial number of older adults skipping meals despite being enrolled in the program.

It also underscores how the roughly \$12 billion in new funding allocated to food assistance programs under the American Rescue Plan should remain in place permanently and be enhanced to reflect rising food prices.

"The findings highlight the positive impact of SNAP in combatting food insecurity, but the key to continued program effectiveness is to assure the program meets the growing demands and rising costs associated with the COVID-19 pandemic, while putting a sharper focus on reducing racial/ethnic inequities," said Marc Cohen, PhD, Co-Director of the LeadingAge LTSS Center @UMass Boston and a report author.

Make a donation to help support the

# "Voice for Older Nebraskans!"

## Join the New Horizons Club today!

Membership includes a subscription to the New Horizons newspaper.

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# New Horizons

New Horizons is the official publication of the Eastern Nebraska Office on Aging. The paper is distributed free to people over age 60 in Douglas, Sarpy, Dodge, Washington, and Cass counties. Those living outside the five-county region may subscribe for \$5 annually. Address all correspondence to: **Jeff Reinhardt, Editor**, 4780 S. 131st Street, Omaha, NE 68137-1822. Phone 402-444-6654. FAX 402-444-3076. E-mail: [jeff.reinhardt@enoa.org](mailto:jeff.reinhardt@enoa.org)

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## Fremont Friendship Center

You're invited to visit the Fremont Friendship Center, 1730 W. 16<sup>th</sup> St. (Christensen Field). The facility is open Monday through Thursday from 9 a.m. to 3 p.m. and Friday from 9 a.m. to 12:30 p.m.

A meal is served weekdays @ 11:30 a.m. Reservations, which are due by noon the business day prior to the meal the participant wishes to enjoy, can be made by calling 402-727-2815. A \$4 contribution is suggested for the meal.

This month's activities will include:

- **Sept. 1:** Music by Don Slavaka @ 10:30 a.m.
- **Sept. 2:** Presentation by Mark Schneck on VA benefits @ 10 a.m.
- **Sept. 8:** Music by Pam Kragt @ 10:30 a.m.
- **Sept. 9:** Coffee social with scones @ 10 a.m.
- **Sept. 14:** Rich Hirshman's presentation on Oklahoma and Texas @ 10:30 a.m.
- **Sept. 14:** Music by Bill Chrastil @ 10 a.m. followed by a 50/50 raffle drawing @ 11:30 a.m.
- **Sept. 22:** Music by Wayne Miller @ 10:30 a.m.
- **Sept. 28:** Board meeting @ 1:30 p.m.
- **Sept. 29:** Music by Billy Troy @ 10 a.m.

The 43<sup>rd</sup> annual Parks & Recreation Craft Show is scheduled for Dec. 4 from 9 a.m. to 3 p.m. Register beginning Sept. 8 by calling 402-727-2630.

For meal reservations and more information, please call Laurie at 402-727-2815.

## Answers to your COVID vaccine questions

COVID-19 has changed how we live and how we feel. Vaccines are now widely available and getting vaccinated is the first step in a process that will get us back to doing what we miss most.

GetVaccineAnswers.org offers five things you and your family should know about COVID-19 vaccines so you can make informed decisions about being vaccinated.

- You won't get COVID-19 from a COVID-19 vaccine. The vaccines are safe and effective. Researchers began developing vaccines for COVID-19 in January 2020 based on decades of understanding immune response and how vaccines work. Thousands of volunteers participated in clinical trials that started that spring, making sure we can trust the vaccines to be safe and effective.

- The federal government is providing the vaccine free of charge to all Americans. Insurance providers will cover the vaccine's cost and the government has set up a system to cover the costs for those without insur-

ance. No one can be denied a vaccine even if they're unable to pay the administration fee.

- Health providers shouldn't discriminate against undocumented individuals from getting the COVID-19 vaccines. Some personal information – which will vary by site – might be requested.

Although fear is a reality for members of the undocumented community when giving out personal information, it's important to seek information from community allies. Speak with a local trusted source about how you can get a COVID-19 vaccine in your state and what personal information will be needed.

- Researchers made sure the trials included adults of diverse backgrounds, races, ethnicities, and geographic areas.

- Continue wearing masks, stay six feet apart from people you don't live with, avoid crowds, and wash your hands frequently.

For more information, go to [getvaccineanswers.org](http://getvaccineanswers.org).

## Outlook Enrichment offers signs your vision may be decreasing

Nearly 3.5 million Americans over age 40 have some degree of vision loss, most commonly from age-related conditions. This number is expected to double in the next few decades as the baby boomers grow older.

Most people with age-related vision loss will not become completely blind. In the beginning, you or your loved one might not even realize a vision problem exists. Most older adults experiencing low vision will be affected by one of four conditions: macular degeneration, glaucoma, cataracts, or diabetic retinopathy.

It's important to see an eye doctor at least once a year. In addition to regular vision exams, here are some signs you or a family member's vision might be decreasing:

- Reading small print

becomes a struggle. You or your loved one has to sit closer to the TV to see the screen or using glasses is no longer enough to read the newspaper.

- Color contrast becomes necessary. For example, maybe you or your loved one can't see a dish sitting on the counter because it blends in with the countertop.

- Transitioning between bright and dark environments presents challenges. It's common for older adults to need more light to navigate or read. However, some eye conditions make it very difficult to navigate environments such as darker restaurants. Diabetic retinopathy makes it harder for the eyes to adjust between bright sunlight and a dark room. A person with this condition will often pause briefly when lighting changes drastically to compensate for this adjustment.

- Seeing things. Sudden loss of vision – such as what sometimes occurs with macular degeneration – can sometimes cause visual hallucinations. You or your loved one might see an imaginary flower or another object.

Minor modifications make living with low vision easier.

Outlook Enrichment can answer your questions and connect you with our partners for things like a low vision evaluation. Call 531-365-5051 to learn more.



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### Are you 60 years of age or older?

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- debt collections
- homestead exemptions
- Medicare/Medicaid
- reverse mortgages
- being a tenant
- POAs

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Legal Aid provides free legal advice and assistance to Nebraska residents 60 years of age and older through our ElderAccessLine.

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Sleep disorders may have a major impact on health

By Jack Huber

Sleep disorders represent a major health issue in the United States, especially for older adults. Age-related sleep changes include fragmented sleep and early awakening which can affect sleep quality and cause insomnia. Older adults can also experience increased stress levels and sleep disorders, an inability to breathe through the nose, sleep deprivation, narcolepsy, and restless legs syndrome.

A recent study found the risk of dementia was higher and associated with adults in their 50s and 60s with a sleep duration of less than six hours per day. This emphasizes the importance for older adults to not only be screened for sleep disorders, but also to maintain and improve their sleep quality with sleep aid devices that increase oxygen supply and contribute to more relaxed sleep.

For healthcare providers wanting to shift away from treating sleep issues among older adults with sedatives due to their addictive nature and side effects such as impaired memory and focus, airway stents may offer an effective alternative.

Sleep Disordered Breathing (SDB) is a potentially serious sleep condition in which breathing repeatedly stops and starts. Symptoms include loud snoring, gasping for air during sleep, waking with a dry mouth, morning headache, insomnia, excessive daytime sleepiness, and poor concentration and mood.

Common among older

men and women, SDB can lead to cognitive impairment, mood changes, compromised quality of life often attributed to reduced social functioning and vitality, and a higher risk of stroke and comorbidities.

Individuals with untreated severe SDB may have an increased incidence of coronary heart disease, myocardial infarction, heart failure, stroke, and mortality after adjusting for established cardiovascular risk factors.

Additional outcomes of particular interest in older people may include glaucoma, falls with fractures, impaired quality of life, decreased pain tolerance, frailty, and mortality. Obstructive Sleep Apnea (OSA) is the repeated collapse or partial collapse of the upper airway. This disorder can lead to high blood pressure, congestive heart failure, atrial fibrillation, stroke, and other cardiovascular problems. It's also associated with Type 2 diabetes and depression and is a factor in a large number of traffic accidents due to persistent drowsiness.

Nonpharmacological approaches to treating sleep issues include relaxation techniques, improving sleep hygiene, and cognitive behavioral therapy (CBT). These options can be effective even for older adults with cognitive impairment.

For proper sleep hygiene, individuals should avoid daytime naps, maintain a regular sleep schedule, limit substances such as caffeinated beverages, nicotine, and alcohol, and exercise at least six hours before bedtime.

CBT may consist of six to 10 sessions with a trained therapist that focuses on cognitive beliefs and counterproductive behaviors that interfere with sleep. Relaxation techniques include progressive muscle tensing and relaxing, guided imagery, paced diaphragmatic breathing, or meditation.

A common treatment for OSA is continuous positive airway pressure (CPAP) therapy, which pushes air into the airways to keep them open with a pump that controls airflow, a tube carrying air from the machine to the user, and a mask that goes over the mouth, nose, or both. Typical problems with CPAP, however, include discomfort, a leaky mask, trouble falling asleep, stuffy nose, and a dry mouth. Other treatments include oral appliances, surgery, and sleep aid devices.

Airway stents may support natural nasal breathing as well as filter, warm, and humidify inhaled air. This protects the lungs, leads to better oxygen supply to the body, stimulates the calming nervous system, and reduces snoring and SDB. All of these factors contribute to a stronger immune system and improve quality of life.

Airway stents may also enhance physical performance, mitigate symptoms of chronic sinusitis, allergies, and many autoimmune diseases.

This medical device can be inserted by the patient into the nose and throat at night and removed in the morning. Airway stents can transform unhealthy sleep patterns and improve nasal breathing to increase oxygen supply and result in more relaxing sleep.

Talk to your healthcare provider about airway stents.  
(Huber is the president of Alaxo Airway Stents.)

Consider becoming an Ombudsman Advocate

The Eastern Nebraska Office on Aging is looking for men and women age 21 and older to join its Long-term Care Ombudsman Program which is co-sponsored by the Nebraska State Ombudsman Program.

ENOA's Long-term Care Ombudsmen volunteer in local long-term care facilities and assisted living communities to protect the residents' rights, well-being, and quality of life.

Long-term Care Ombudsmen must complete 20 hours of initial classroom training and 12 hours of additional training every two years.

During the training, the volunteers learn about the residents' rights, aging issues, Medicare, Medicaid, communication skills, how to investigate the residents' complaints, the importance of confidential-

ity, and about the federal and state rules, regulations, and laws regarding Nebraska's long-term care facilities and assisted living communities.

Before being assigned to a long-term care facility or an assisted living community, new volunteers will make four visits to a site with an experienced Ombudsman Advocate to learn more about what the program entails. After a three-month probationary period, the new volunteers are certified as Ombudsman Advocates.

Certified Ombudsman Advocates will be assigned to a long-term care facility or an assisted living community where they'll visit for two hours a week to meet with administrators, residents, and the residents' family members to address concerns.

For more information about ENOA's Long-term Care Ombudsman Program, please call Beth Nodes at 402-444-6536.

Ralston Senior Center

You're invited to visit the Ralston Senior Center, 7301 Q St., Suite 100 this month for the following:

- Sept. 8: Board meeting @ 10 a.m.
- Sept. 9 & 23: Bingo from 1 to 3 p.m.
- Sept. 13, 20, & 27: Doodlers and Dabblers (paint, draw, etc. or just relax) @ 10:30 a.m.
- Sept. 14: Bus to Winna Vegas Casino in Sloan, Iowa @ 7:30 a.m. The bus will return around 4 p.m. The cost is \$5. Contact Diane @ 402-885-8895 for reservations.
- Sept. 29: The Merrymakers present music by Paul Siebert @ noon.
- Tuesdays and Fridays: Exercise from 9:30 to 10:30 a.m. Exercise at your own pace. Stand-up or sit in a chair.

The center will be closed on Labor Day. Lunch is catered in on Wednesdays. A \$4.50 contribution is normally suggested for the meal. Reservations are due by noon on Tuesday. Play games and bingo after lunch. Contact Molly @ 402-490-5768 for reservations.

Renew or obtain a Ralston Senior Center membership. Persons who renewed for 2021 before the center closed due to the pandemic won't be charged for the rest of 2021. Those who haven't renewed, will be charged \$5 for the rest of 2021. The annual cost will be \$10 in 2022.

For more information, please call Diane West @ 402-339-4926.

Omaha humorist Kirk Estee reminds us:



"Laughter is the best medicine."

Live, love, laugh, and be happy by bringing Estee to your independent living facility, assisted living center, support group, senior center, parent, grandparent, or educator group meeting.



Kirk's down-home style of humor – similar to Will Rogers and Mark Twain – is tailored for a variety of audiences.

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# Caregiver solutions group meetings

Being a family caregiver can be difficult. Challenges may include balancing work and family life with caring for a loved one, feeling isolated, navigating senior care and medical systems, caring for a loved one who isn't the same person as before their disease arrived, and more. You don't have to navigate this alone. Join a free Flaherty Consulting Caregiver Solutions Group.

Upcoming topics will be:

- **Sept. & Oct.:** *Is it Dementia or Something Else?*
- **November:** *Planning for the Holidays For Your Care Receivers.*

While there's no charge, registration is required to attend these sessions which meet approximately every other month. CDC guidelines will be

followed. Masks are mandatory and social distancing will be observed.

There are four active Flaherty Consulting Caregiver Solutions Group sites in Omaha:

- **The Servite Center of Compassion**  
72nd St. & Ames Cr.  
October 7
- **St. Vincent de Paul Church**  
14330 Eagle Run Dr.  
September 14 & November 9
- **St. Timothy Lutheran Church**  
510 N. 93<sup>rd</sup> St.  
October 20
- **Faith Westwood United Methodist Church**  
4814 Oaks Ln.  
September 25 & November 20

Contact Nancy Flaherty at 402-312-9324 to register for a meeting or for more information. Flaherty is also available for private consultations.

Visit [flahertyconsulting.net](http://flahertyconsulting.net) to learn more about available resources and programs.

## Flu shot season arriving soon CDC: Simultaneous administration of non-live vaccines is safe, effective

By Zackery Colgrove, Pharm. D. Candidate, 2022 & David Kohll, Pharm. D.

COVID-19, influenza, shingles, pneumonia, tuberculosis, chickenpox, meningitis, etc. With all the different medical conditions out there, it's easy to feel overwhelmed when the doctor tells us we need to receive vaccinations for all of them. At this point we ask ourselves, "Can we safely get them at the same time?" And if so, "Will they work the same as before?"

Well, you're in luck because the Centers for Disease Control and Prevention (CDC) has that information. Simultaneous administration of non-live vaccines is deemed safe and hasn't been proven to be any less effective than if given one at a time. That includes the COVID-19 vaccine.

While most vaccines are administered when we're very young, various vaccines for pneumonia, shingles, and immunocompromising conditions are more appropriate at ages 18, 50, and 65, respectively.

Annual flu shots and COVID-19 vaccines are approved only for persons ages 12 and older (Pfizer) and ages 18 and older (Moderna and Johnson & Johnson).

The majority of vaccines are non-live or inactive, with the exception of MMR, rotavirus, smallpox, chickenpox, and yellow fever. These non-live vaccines don't contain the live virus or bacteria, and therefore it's impossible to get sick from receiving these vaccines themselves.

The only catches of receiving multiple vaccinations simultaneously are the severity of possible post-vaccine flu-like symptoms ranging from no discomfort to substantial discomfort, and the fact you have to receive each vaccine in different shoulders or at a minimum of one inch apart. While that doubles the potential for sore shoulders, it can be four times as convenient.

This is especially true if you're the type of person to procrastinate or forget getting your vaccines. The simultaneous administration approach provides you with a "four birds with one stone" opportunity rather than getting each vaccination separately and risking missing one of them.

There's another bug out there causing a global pandemic. COVID-19 is brought on by the SARS-CoV-2 virus (a close relative to the notorious SARS and MERS). With the pandemic still ensuing, it's tough to tell where the virus and its mutations (i.e., Delta variant) will take us. More than two hundred million cases of COVID-19 worldwide have left us grieving the loss of more than four million loved ones, with a significant percentage of them having passed away in the United States.

Only 57% of the U.S. population have received at least one dose of the COVID-19 vaccine. However, of those Americans, nearly 50% have been fully vaccinated by receiving their second dose.

A third dose will probably be recommended for everyone at some point. It's likely the third dose will be administered to immunocompromised people eight months after their second dose.

If possible, the third dose should be from the same manufacturer as the first two doses. If the vendor is out of the COVID vaccine you received for your first two doses, however, it may be OK to use a vaccine from another manufacturer. Check with your pharmacist for more information. It hasn't been determined whether a second dose of the Johnson & Johnson vaccine is necessary.

It's not too late to get your first dose of the COVID-19 vaccine from Moderna, Pfizer, or Johnson & Johnson/Janssen.

It's about that time of year to get the influenza vaccine. Each year, a new flu vaccine is developed and distributed to hospitals, clinics, and pharmacies. The effectiveness of that year's vaccine is dependent on how much the virus is mutating. While the vaccine may not effectively prevent infection 100% of the time, it may help reduce the duration and symptoms. Therefore, the CDC recommends all who are eligible receive a dose.

Herpes zoster, more commonly known as shingles, is caused by the same virus as chickenpox. However, while chickenpox is typically milder and more limited to chil-

--Please turn to page 15.

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This plan is not insurance. Discounts are only available at participating pharmacies.

Page 6 • New Horizons • September 2021



Study: Nebraska is nation’s heartbreak capital

A new study by Compare the Market in Australia has revealed the average number of times Americans experience heartbreak, the causes, and how long it takes the heart to heal.

Nebraska is the heartbreak capital of the U.S. with the average person suffering 3.33 times during their lifetime and taking 15.91 months to recover from the heartbreak.

West Virginia, Oregon, Wyoming, and North Dakota make up the top five heartbreak states behind Nebraska.

For those who have had their heart broken and experienced the mental and physical turmoil that often accompanies it, you’re not alone, as new research by comparethemarket.com.au reveals the average American has endured heartbreak 2.55 times in their life, with each heartbreak taking 13.48 months to overcome.

Looking further into the research, Compare the Market found:

- When asked what their heartbreak relates to, Oregon (84%) and Nebraska (83%) residents shared the loss of a loved one has impacted them the most, whereas North Dakota (88%) and Wyoming (79%) have been most affected by romantic relationships. Those in West Virginia have felt both the loss of a loved one and romantic relationships equally (93%).

The impacts of heartbreak can affect people both emotionally and physically. To understand this further, Compare the Market spoke with Dr. Marisa T. Cohen, head of

couple relationships at the Paired Couples app.

“A broken heart is often associated with grief, and the effects of grief can be both physiological and psychological,” she said.

“Takotsubo Cardiomyopathy, also known as Broken Heart Syndrome, often occurs after an emotionally stressful event due to a sudden surge of stress hormones and may result in sensations similar to a heart attack. It is important to note this can be a result of any significant stressors, not just a broken heart.”

“Whether it is from a romantic relationship or the loss of a loved one, most of us will experience heartbreak at some stage of our lives, and you are never alone in your situation. It is important to remember there are ways you can cope with it and that in the end, you will be a stronger person as a result,” said Anthony Fleming, general manager of health insurance at comparethemarket.com.au.

To find out more about the research and Dr. Cohen’s tips on how to deal and cope with heartbreak, please visit [comparethemarket.com.au/health-insurance/heartbreak-states](http://comparethemarket.com.au/health-insurance/heartbreak-states).



Social Security Administration is offering series of online tools

For more than 85 years, the Social Security Administration’s programs have helped provide financial independence to millions of hardworking Americans. The SSA offers a series of useful online tools to help consumers achieve the financial independence they deserve in retirement.

- **my Social Security:** Consumers are in control with the many services available online through my Social Security. Creating a secure account will help you conduct Social Security business from home or on the go. With your personal my Social Security account, you can request a replacement Social Security card, review your earnings history, get personalized retirement benefit estimates, and check the status of your Social Security application or appeal.
- **If you already receive benefits,** you can also request a replacement Social Security card, get a benefit verification letter or proof of income letter, set up or change your direct deposit, change your address, request a replacement Medicare card, and get a Social Security1099 form (SSA-1099).

Consumers can also get answers to questions like: What is your full retirement age? How do you apply for Social Security retirement benefits? Do you have to pay taxes on Social Security benefits? Discover the answers to your Social Security-related questions at our Frequently Asked Questions page at [ssa.gov/faq](http://ssa.gov/faq).

- **Social Security’s official blog:** Stay informed about the SSA’ latest news, retirement planning tips, and other helpful information. Its blog at [blog.ssa.gov](http://blog.ssa.gov) features messages direct from its commissioner as well as information from other experts.

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# Caregiver Support Program helps keep Debbie living in a healthy state

Debbie Akyurek is proud of her life accomplishments. Her resume includes stints as a music teacher, a cellist in the Omaha Symphony Orchestra, a business owner, and a human resources specialist. The role she's most proud to play, however, is caregiver to Murat, her husband for 45 years.

Born in Chicago, and raised in Wisconsin, Debbie graduated from the University of Iowa with a degree in music education. While attending college in Iowa City, she met Murat, a student from Turkey who was getting his graduate degree in environmental engineering.

After college, Murat returned to Turkey for three years to fulfill his military obligation while Debbie taught orchestral music to K through 12 students in Algonquin, Ill. and later, general music to fifth and sixth graders at three elementary schools in Storm Lake, Iowa.

During the 1975 Christmas season, the Akyureks were married. Over the next few years, the couple lived and worked in Chicago and Marshalltown, Iowa before moving to Omaha in 1979 when Murat took a job with Kirkham Michael, an engineering firm.

Debbie went back to school to get her business degree at the University of Nebraska Omaha. Still possessing a love for music, she played the cello in the Omaha Symphony Orchestra in 1980.

Jobs then took the Akyureks to Fort Collins, Colo. and Sheboygan, Wis. before they returned to Omaha to retire in 2012.

As a way to thank Debbie for the couple's frequent relocations, Murat told his wife he'd purchase a business for them to operate in retirement. The Akyureks opened the Savory Spice Shop in Rockbrook Village. Murat did the books,

while Debbie handled the retail sales.

A few years later, Murat developed a brain disorder which today keeps him bedridden and needing assistance around the clock. While a home health aide comes to the Akyureks' home five days a week, Debbie has been her husband's primary caregiver for five years.

The Eastern Nebraska Office on Aging's Caregiver Support Program provides a caregiver for Murat every Friday for six hours, giving Debbie a temporary break.

The Caregiver Support Program offers case management and respite services to caregivers age 18 and older who provide daily care to someone age 60 or older who needs assistance with at least two activities of daily living or who has been diagnosed with Alzheimer's or a similar disorder.

Together the care manager and caregiver discuss the importance respite services can play in maintaining the caregiver's health and well-being. The caregiver works with the case manager to develop a service plan that identifies what types of respite and support best meets the caregiver's needs whether it be in-home or in the community.

Debbie still works at the spice store three days a week managing a five-person staff and offering cooking and seasoning advice to customers.

"Getting away for me is essential," said Debbie who gets a monthly massage and sees a therapist once every three weeks. She also enjoys meditating and has made retreats to Mexico and Indonesia.

Music remains an escape for her. In August, Debbie began taking classical guitar lessons from UNO music professor Hadley Heavin.

While caring for her husband is challenging, Debbie is doing reasonably well in part because she takes care of herself. "The things I do for myself keep me grounded and living in a healthy state."

For more information on ENOA's Caregiver Support Program, please call 402-444-6536.



Debbie at her Omaha home with Jill, a greyhound rescue dog.



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# School strike coverage hooked Jordan on journalism



Jordan came to Omaha’s KMTV after reading a *Des Moines Register* article about the station’s news helicopter.

By Nick Schinker  
Contributing Writer

With nearly 50 years as a journalist to his credit, Joe Jordan has certainly earned the right to his opinions. And he keeps those opinions to himself. Jordan has all the qualities of a seasoned and trusted news reporter – honesty, integrity, professionalism, intelligence, compassion, and the ability to tell the most complicated story in plain English so we all get the point. The one thing he refuses to be is biased.

“I see bias more and more in journalism, and in what passes for journalism today,” Jordan says. “We all have biases. But it’s one thing to have biases and another thing to let them out. I have tried really hard to keep mine to myself, and I think I’ve done well.

“I prefer to call my stories accurate, because what is fair to one person isn’t always fair to another. There have been times I’ve upset conservatives, and times I’ve upset liberals. I like to think that if you’re making both sides unhappy, you must be doing something right.”

Jordan was born in Chicago. His father, Edward, served as a military policeman in World War II, then worked as the bell captain at the Palmer House Hotel in downtown Chicago. That was where Joe’s parents met. His mother, Kathleen, was a supervisor in the telephone shopping department for a retail store across the street from the Palmer House.

His first four or five years, Jordan, his sister, and his parents lived near Wrigley Field, home of baseball’s Chicago Cubs. The family moved to the far South Side of Chicago until he was 11, then moved to the far North Side.

“Chicago is a lot like Omaha in that it’s very neighborhood-centered,” he says. “When you were a kid, you stayed in your neighborhood.”

He also recalls if the Cubs were playing on the weekend, he and his father would be at Wrigley Field. “You could get a ticket in the bleachers for a dollar,” he says. “So, for two bucks, you could watch the Cubs’ games.”

Journalist wasn’t his first career choice. “Ini-

tially, I wanted to be an astronaut. I did OK in math and geometry, but in high school, when it came to algebra and trigonometry, I gave up that idea.”

Being a Cubs fan, he started entertaining the thought of becoming a sports broadcaster. Joe attended Chicago Loyola University, where in 1973, he earned a degree in communication arts, a fancy name for journalism.

His first job in journalism was with a Chicago audio news service. Jordan would record interviews to accompany news stories, then the taped interviews would be sold to various Chicago radio stations.

“I still remember my very first story,” he says. “It was on the Chicago school strike. From that point on, I wanted nothing but news. That was it. I was hooked.”

He had several strong interviews during his six-month stint with the audio service, including Chicago Mayor Richard Daley and New Jersey Congressman Peter Rodino, who served as the chairman of the House Judiciary Committee, where he oversaw the Watergate Hearings and the impeachment process against President Richard Nixon.

“It was at the Palmer House, which I knew like the back of my hand from my father and from working on the loading docks,” Jordan recalls.

“I got into the hotel, and I worked my way onto the elevator with (Rodino). It wasn’t an Earth-shattering interview, but because it was early in the Watergate era, it was really well-received.”

Still, recording interviews for sale wasn’t the same as being on the air. That would be Joe’s next step.

Jordan left Chicago to work for WJOB radio in Hammond, Ind., his first on-air reporting position. Then it was onto his first television work in St. John, Ind. “I was the news department,” he recalls. “I was the anchor, news director, reporter; I even shot video for some stories.”

From Indiana he moved to Dubuque, Iowa, working in news from 1978 to 1980. He started looking for a better position in the Quad Cities, but when that didn’t materialize, he looked a little farther west after reading an article in the *Des Moines Register* newspaper. “They did a feature on KMTV Channel 3 and SkyCam, the only news helicopter in Omaha at the time,” he says.

Jordan applied at the station, got hired, and stayed at KMTV for 29 years.

“I covered the aftermath of the Grand Island tornadoes in 1980 from that helicopter,” he says.

--Please turn to page 16.



As part of his role as a political reporter for News Channel Nebraska and Telemundo Nebraska, Joe covers activities at Omaha Mayor Jean Stothert’s office.



# Using stem cell research to speed the regeneration of muscle tissue

One of the many effects of aging is the loss of muscle mass, which contributes to disability in older people. To counter this loss, scientists at the Salk Institute in California are studying ways to accelerate the regeneration of muscle tissue, using a combination of molecular compounds that are commonly used in stem cell research.

Using these compounds increased the regeneration of muscle cells in mice by activating the precursors of muscle cells called myogenic progenitors. The research provides insight into the underlying mechanisms related to muscle regeneration and growth and could one day help people regenerate tissue more effectively.

Loss of these progenitors has been connected to age-related muscle degeneration, according to Salk Professor Juan Carlos Izpisua Belmonte, the paper’s senior author.

“Our study uncovers specific factors that are able to accelerate muscle regeneration, as well as revealing the mechanism by which this occurred,” he said.

The compounds used in the study are often called Yamanaka factors after the Japanese scientist who discovered them. Yamanaka factors are a combination of proteins (called transcription factors) that control how DNA is copied for translation into other proteins. In lab research, they’re used to convert specialized cells like skin cells, into more stem cell-like cells that are

pluripotent, which means they have the ability to become many different types of cells.

Muscle regeneration is mediated by muscle stem cells, also called satellite cells. Satellite cells are located in a niche between a layer of connective tissue and muscle fibers. In this study, the team used two different mouse models to pinpoint the muscle stem cell-specific or niche-specific changes following addition of Yamanaka factors. They focused on younger mice to study the effects of the factors independent of age.

They found adding the Yamanaka factors accelerated muscle regeneration in mice by reducing the levels of a protein called Wnt4 in the niche, which in turn activated the satellite cells.

According to Izpisua Belmonte, the observations from this study could eventually lead to new treatments by targeting Wnt4.

“Our laboratory has recently developed novel gene-editing technologies that could be used to accelerate muscle recovery after injury and improve muscle function.”

The investigators are also studying other ways to rejuvenate cells, including using mRNA and genetic engineering. These techniques could eventually lead to new approaches to boost tissue and organ regeneration.

*(The Salk Institute provided this information.)*

# Duke University study is examining if humans, primates are slowing death

Everywhere we look there’s something like special diets, exercise programs, and vitamin supplements designed to help us live longer. Maybe those products work as the average life expectancy of humans has gone from roughly age 40 to roughly age 70 since 1850. Does this mean we’re slowing down death?

A new study comparing data from nine human populations and 30 populations of non-human primates said we’re probably not cheating the reaper. The researchers said the increase in human life expectancy is more likely the statistical outcome of improved survival rates for children and young adults, not slowing the aging clock.

“Populations get older mostly because more individuals get through those early stages of life,” said Susan Alberts, professor of Biology and Evolutionary Anthropology at Duke University and the senior author of the paper. “Early life used to be so risky for humans, whereas now we prevent most early deaths.”

The research team, comprising scientists from 14 countries, analyzed patterns of births and deaths in the 39 populations, looking at the relationship between life expectancy and lifespan equality.

Lifespan equality tell us how much the age of death varies in a population. If everyone tends to die at around the same age – for instance, if almost everyone can expect to live a long life and die in their 70s or 80s – lifespan equality is very high. If death could happen at any age – because of disease, for example – lifespan equality is very low. In humans, lifespan equality is closely related to life expectancy. People from populations that live longer also tend to die at a similarly old age, while populations with shorter life expectancies tend to die at a wider range of ages.

To understand if this pattern is uniquely human, the researchers turned to non-human primates. What they found is the tight relationship between life expectancy and lifespan equality is widespread among primates and humans. In most mammals, risk of death is high at young ages and relatively low at adulthood, then increases again after the onset of aging.

Could higher life-expectancy be due to individuals aging slower and living longer? The primate populations tell us the answer is probably no. The main sources of variation in the average age of death in primate populations were infant, juvenile, and young adult deaths. In other words, life expectancy and lifespan equality aren’t driven by the rate at which individuals become old, but by how many kids and young adults die for reasons unrelated to old age.

Using mathematical modeling, the researchers also found small changes in the rate of aging would drastically alter the relationship between life expectancy and lifespan equality.

“When we change the parameters representing early deaths, we can explain almost all of the variation among populations for all of these species,” said Alberts. “Changes in the onset of aging and rate of aging do not explain this variation.

“The rate of aging is relatively fixed for a species,” she continued. “That’s why the relationship between life expectancy and lifespan equality is so tight within each species.”

The researchers point out there’s some individual variation within species in the rate of aging, but this variation is contained to a fairly narrow range, unlike death rates at younger ages.

“We can’t slow down the rate at which we’re going to age,” Alberts said. “What we can do is prevent those babies from dying.”

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- ☐ \$300 = 70 meals or 14.63 hours of in-home homemaker services or 14 bath aide services for frail older adults.
- ☐ Other amount (please designate) \_\_\_\_\_
- ☐ Please contact me. I would like to learn more about how to include the Eastern Nebraska Office on Aging in my estate planning.

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**Omaha Police Department provides welfare checks to help ensure older adults are safe in their homes**

Mary Smith has lived alone in her two-bedroom midtown Omaha home for more than 40 years. While the 75-year-old retired bookkeeper considers herself to be a private person, she knows the names of some of her neighbors, many of whom are much younger.

Earlier this year, Mary – who is single and has no children – had a mild case of COVID-19 and was bedridden and home-bound for a few days. During that time, newspapers piled up in her driveway, the mailbox filled, and neighbors didn’t see Mary’s dog running around in the back yard.

After consulting with Smith’s next-door neighbors, Margaret, who lives across the street from Mary, decided to call the Omaha Police Department’s 911 line to request a welfare check.

A police officer knocked on Mary’s door, found out she was ill, and notified Margaret that while not feeling well, Smith was safe and secure in her home.

While this story is fictitious, it’s typical of a situation which repeats itself frequently, according to Officer Joe Nickerson in the OPD’s Public Information office.

Nickerson said requests for welfare checks also known as “check well-beings” are often made to the OPD when friends, neighbors, or employers observe unusual activity or behavior, hear suicidal comments, or someone is absent from a place they’re supposed to be at a specific time or day and may be in danger.

An OPD officer will visit the home and conduct a “knock and talk” with the resident to check on their condition.

If the resident doesn’t respond to the door knock, the officer will look through windows to further assess the situation. If necessary, and whenever possible, a landlord or someone who has a key to unlock the door is contacted to let the officer into the home.

Nickerson said the officer has the legal authority to enter the residence – knocking down the door if required – and to act accordingly if probable cause is determined.

In some cases, an ambulance is summoned, and medical care provided for the resident.

Because no warrant to enter the home is issued, the officer must be cognizant of the resident’s Fourth Amendment rights under the United States Constitution to be secure in their home. The Fourth Amendment’s goal is to protect people’s right to privacy and freedom from unreasonable intrusions by the government.

In addition to dialing 911, welfare checks can be requested in Omaha by calling the OPD at 402-444-5600 or 402-444-4877.

An estimated 12.5 million older Americans live alone. While many of these men and women live in their own homes with independence and dignity, there may be inherent threats to their safety.

Here are some safety tips:

- Staying in good physical condition by exercising, eating a healthy diet, maintaining an active social life, and drinking plenty of fluids can help prevent falls. Minimize the risk of falling by keeping the home free of exposed chords, slippery stairs, etc., and adding handholds and grab bars around the shower and toilet.

- Avoid isolation by maintaining a close circle of friends and family. Seeing and



communicating with friends and loved ones on a regular basis can help boost well-being and develop a support system to call on if necessary.

- If possible, keep extra medications on hand to avoid frantic trips to the pharmacy.
- Maintain a disaster kit featuring dry foods, blankets, bottled water, flashlights, matches, candles, and medical supplies that can be used during power outages, freezing weather, or natural disasters.
- Keep doors and windows locked, consider adding a peephole in the door, motion-activated lights, and an alarm system.
- Develop a list of emergency contacts (medical professionals, family members, and friends) and keep it in a visible place others can find easily.
- Have someone pick up packages from the doorstep and mail from the mailbox, keep the lawn mowed, and driveways and sidewalks free of snow when the homeowner is away.

It’s important for friends, loved ones, and neighbors to monitor the condition of the older adults in their life. Here are a few suggestions:

- Be subtle when evaluating an older loved one but trust your instincts. If something seems wrong, look into it further. Evaluate their appearance, ability to walk, and communication skills.
- Check the living environment. Does the home need repairs? Is the lawn mowed or the driveway and sidewalks clear of snow? Is the lighting adequate?
- Check the expiration dates on canned goods, spices, cereal, and items in the refrigerator.
- Check dates on medications and make sure the meds are being used properly. Make a list of the medications and take the list to doctors’ visits.
- Are bills being paid properly and on time?
- Are flammable items stored away safely?
- Does the older adult know how to use the new television, computer, or smart-phone?

This information in this article can be summed up by quoting American poet Maya Angelou:

*“As you grow older, you will discover you have two hands. One for helping yourself and one for helping others.”*

*May be covered by insurance*  
**Telehealth offers a convenient way to visit medical providers**

By April Hauf, MA

During the pandemic, telehealth services have provided a much needed and safe way for people to speak with their medical professionals about healthcare issues. Even though communities are opening back up, many places still offer telehealth services upon request.

Telehealth is the use of digital information and communication technologies such as computers and mobile devices to access health care services remotely and to manage healthcare. These may be technologies you can use from home, or your doctor uses to improve or support healthcare services.

Telehealth may be beneficial for people who have limited mobility or problems with transportation to get to their doctors’ appointments and offers the convenience of speaking from home with medical professionals.



Many offices provide a patient portal where you can view test results, refill prescriptions, and communicate with your doctor. These are secure sites which offer a way to look at your history and upcoming appointments. Some portals offer video appointments on the website to make it easier to check in electronically and have your video appointment with a physician.

You’ll be asked a series of questions to help the providers make suggestions, prescribe medications, or make changes. Ask your doctor about telehealth services in your area and find out if they’re covered by your insurance.

The COVID-19 pandemic has devastated the spirits of many people and one of the biggest needs is help with their mental health. Many counselors and psychiatrists offer telehealth medicine as an alternative to in-person sessions.

Although telehealth medicine may be convenient, it poses some differences from traditional face-to-face medicine. If you opt for telehealth services, it may not always be with your primary provider. Since you won’t be face to face with a clinician, they may miss something that may have been seen during an in-person exam.

It’s important to know the benefits and drawbacks to telehealth and then decide what’s right for you and your health. Talk with your healthcare provider for more information.

*(Hauf, MA is the Director of Social Services at Florence Home Health Care Center in Omaha.)*



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# Select disease-resistant varieties when planning a vegetable garden

By Melinda Myers

Homegrown fresh vegetables not only taste better; they're more nutritious. Plus, you can control what products are applied to the plants to control insect pests and disease

The first steps to growing a productive vegetable garden and protecting your harvest begin with proper planning and care.

Select the most disease-resistant varieties available when planning your garden. Plant them in properly prepared soil with the amount of sunlight they require.

Provide the necessary ongoing care and your plants will be healthier and better able to tolerate pest problems.

Even when you do everything right; problems can still arise. It's just a part of gardening.

Further reduce the risk with regular visits to the garden. Check along the stems and under the leaves for any clues insect pests have moved into your garden. It's much easier to manage small populations of harmful pests than after they've had time to rapidly reproduce.

At the same time, look for lady beetles, green lace

wings, and other good guys that eat a variety of garden pests. Leaving a few pests to attract these good guys is often an easy, yet effective way to manage the harmful ones.

Enlist the help of songbirds by attracting them with bird-baths and feeders. Many birds supplement their diets with insect protein. Protect young seedlings as many birds also like fresh greens.

If you need to lend nature a hand, remove small populations of insects by hand or use a strong blast of water to knock aphids and mites off plants. This is often enough to manage the damage and minimize their impact on your garden harvest.

Barriers of floating row covers can keep cabbage worms, onion maggots, Japanese beetles, and some other insects from laying eggs on their favorite plants. Cover the plants with the fabric at planting, anchor the edges, and leave enough slack for plants to grow. Uncover flowering plants as soon as blossoms appear if bees are needed for pollination.

Set out yellow bowls filled with soapy water. The yellow attracts aphids and some other harmful pests. The insects gravitate toward the yellow, then crash into the soapy water and die.

If the problem insects are winning the battle, you may be tempted to reach for chemical controls. Instead, look for the Organic Materials Review Institute (OMRI) certification on product labels. This independent non-profit organization reviews products for use in organic gardens, production, and processing.

Summit Year-Round Spray Oil (SummitResponsibleSolutions.com) is an OMRI-certified product labeled for use on fruits and vegetables as well as ornamentals. It controls mites, aphids, thrips, and other insects and can be applied right up to the day of harvest.

As always, read and follow label directions for any organic, natural, or synthetic chemical used. Heeding label directions ensures safe application and effective control.

By working with nature and investing some time and creativity you can safely minimize insect problems and maximize your garden's harvest.

(Myers has written more than 20 gardening books.)

# The importance of living your life one day at time

Artistic creativity has never been my thing. I admire what artists do with a blank canvas but don't have a clue about how I might paint a picture.

From this I've concluded I'm not a creative person. I wonder how many readers resonate with this conclusion. "I'm not creative either." I've come to believe this is a false statement.

The truth is creativity takes many forms. We're constantly creating—a meal, a conversation, a road trip, a sewing project, a letter, or a garden—the list never ends. Every day is filled with small creations.

## Conscious Aging

By Nancy Hemesath

One way to view our lives is to see each day as a blank canvas. Each day offers possibilities we've never seen before. Each morning when we rise, we're starting a new day unique from every other day of our lives. We know each day has aspects over which we have no control—the weather, health issues, unexpected visitors, and many other surprises. It's our response to all these "givens" that truly shapes our days and it the canvas of our creativity.

As I continue to age, I'm aware future calendars will run out and my time is coming ever closer to its end here. No one knows exactly the number of days we have left. This knowledge behooves us to see each day as one more gift, a gift we can either waste or cherish.

By starting each day mindfully, we decide what we want to create on each new canvas. Do I want to take a trip? Do I want to reach out to a lonely friend? Do I want to host a luncheon? Do I want to create order in my closets? Do I want to try a new recipe? The choices are ours.




A decision that's even more critical to the quality of our day is the disposition and attitude we bring to whatever we're doing. We can host guests out of a sense of obligation, or we can offer them the hospitality of our heart. We can prepare a meal with resentment because "if I don't do this, it won't be done because no one else steps up." Or we can see the meal as a way to nourish and love our families. As Mother Teresa said, "It is not how much we give but how much love we put into the giving." This, more than anything, contributes to the beauty of our daily canvas.

At the end of each day, we look back at the canvas we've painted. What do I like about it? What was left out? What can I do better tomorrow? God willing, we'll have another chance to create a new day.

(Hemesath is the owner of Encore Coaching. She is dedicated to supporting people in their Third Chapter of Life. Nancy is available for presentations. Contact her at nanhemesath@gmail.com.)

# ADRC Nebraska

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In Eastern Nebraska, you can contact **ADRC** at **402-444-6536**, (toll free) **1-844-843-6364** or **nebraska.arounja.org**



### Intercultural Senior Center

Due to flooding from a recent storm, activities and programs held at the Intercultural Senior Center – 5545 Center St. – are temporarily closed.

The ISC's SAVE bus is still available to bring case management services to your doorstep.



Monthly food pantries continue to be offered to men and women ages 50 and older.

For more information, please call 402-444-6529.



Survey shows how older Americans have responded mentally to pandemic

Homecare.org, a resource for data, studies, and tools to help older adults remain safe and independent in their own homes, has published a recent survey about mental health problems among older men and women during the pandemic. The study generated responses from 1,000 American adults who have parents over age 60.

“Isolation during the pandemic greatly increases their chances of suffering in silence from anxiety or depression.”

Homecare.org conducted this survey to raise awareness about the impact of COVID-19 on the mental well-being of older adults. Respondents answered a series of questions based on in-person interaction, virtual meetings, and conversations with their parents.

Research findings indicate 34% of respondents noticed signs of anxiety or depression in their older parents during the pandemic. Approximately 31% of the people surveyed said their parents mentioned feeling anxious or depressed.

Overall, older men and women showed signs of anxiety at a slightly higher rate than those with depression. More than 23% of adult children said their parents displayed suspected anxiety and about 21% saw suspected depression.

Survey results also show 49% of adults felt their parents were more isolated than before the COVID-19 pandemic began.

“Our elderly population is always at risk for undiagnosed mental health conditions, and isolation during the pandemic greatly increases their chances of suffering in silence from anxiety or depression,” said Daniel Cobb, content director for HomeCare.org.

“We hope this research study will help to increase awareness and equip families with additional resources like the directory of certified care providers, educational guides, and on-demand help.”

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TSCL: Americans want Medicare to negotiate prescription drug prices

Older Americans overwhelmingly support legislation that would allow Medicare to negotiate prescription drug prices, according to The Senior Citizens League (TSCL).

The online survey, which had more than 1,000 participants, found 88% supported tying prescription drug prices to what other industrialized countries such as Great Britain, Canada, and Japan pay for the same drug.

“Reducing the cost of prescription drugs is essential for both Medicare beneficiaries and Medicare’s finances,” said Mary Johnson, a Medicare policy analyst for TSCL.

The average monthly Social Security retiree benefit is \$1,552. Spending on prescription drugs is the fastest growing cost most retirees face in retirement. Over time, drug costs take a growing portion of Social Security income because prices are rising several times faster than annual cost of living adjustments.

The Congressional Budget Office (CBO) estimates the Elijah E. Cummings Lower Drug Costs Now Act prescription drug price negotiation legislation under debate in the U.S. House of Representatives could lower government spending on Medicare Part D by \$456 billion over a 10-year period. The CBO cautioned the estimates are uncertain, especially if price negotiations are implemented differently than the CBO’s interpretation.

According to TSCL, the average Medicare beneficiary’s annual out-of-pocket spending for prescription drugs was \$4,097 in 2020.

“Although drug plans vary, under the standard Part D benefit, the beneficiary is responsible for about 25% of that amount. Drug plans cover the remaining 75% up to an initial coverage limit which is \$4,130 in 2021,” Johnson said.

According to a new TSCL survey, 28% of survey participants report a level of monthly drug spending (at least \$95 per month for co-pays and co-insurance) that puts them at risk of exceeding the Medicare Part D initial coverage limit and hitting the coverage gap or “doughnut hole”.

In addition, one quarter of survey participants said they postponed filling one or more prescriptions in 2020 due to high cost or shortages. Under current law there’s no annual cap on out-of-pocket spending in Part D, except for the lowest income beneficiaries who qualify for Medicare Extra Help which covers most of their out-of-pocket costs.

(TSCL provided this information.)

Mental health, aging webinars are scheduled for Sept. 3, 24

The final two installments of the Nebraska Mental Health and Aging Coalition’s (NeMHAC) series of free webinars are scheduled for Sept. 3 and Sept. 24.

Participants are encouraged to register for the webinars which are part of the fifth annual Mental Health and Aging Conference titled *The Power of Hope: Meeting the Needs of Older Adults*.

• **Sept. 3:** *Suicide Prevention for Older Adults* will feature Ciara Warden, LISW, from the University of Nebraska Omaha’s Grace Abbott School of Social Work from noon to 1 p.m.

• **Sept. 24:** *Mental Health and Aging Policy Panel* will be moderated by SAMHSA Assistant Regional Administrator for Region VII Kim Reynolds from noon to 1 p.m.

Each program – which meets the criteria for Nebraska licensed mental health practitioners, social workers, and professional counselors – will offer one continuing education credit.

For more information, contact Lorie L. Thomas at lthomas@regionsix.com.

Operating since 1996  
Hug-a-Bear group needs a new leader, place to assemble bears

Hug-a-Bears, a project that creates stuffed Teddy bears for children and persons with Alzheimer’s is looking for someone to lead its group of volunteers and for a place to assemble the bears.

Started locally in 1996 by the Telephone Pioneers General Assembly, Hug-a-Bears has made and donated nearly 52,000 bears locally during the last 25 years.

For more information, please contact Joe Bonaiuto at 402-333-6101 or Steve Dawkins at 402-319-3602.



Participants sought for UNO study on exercise, food choices relationship

Men and women are needed for an exercise and food choice research study through the University of Nebraska Omaha’s Department of Gerontology. The study is designed to better understand the relationship between exercise and food choices.

Participants must be ages 65 to 75, a healthy, non-smoker of stable weight, able to bicycle for 45 minutes, provide blood samples, and attend one Zoom session and three lab visits in Omaha including two overnight fasts and two supervised exercise sessions.

Compensation is available for participants who will also receive free food and an explanation of fitness and body fat.

For more information, please visit gerontology.unomaha.edu/eatfc or contact Sarah at shubner@unomaha.edu.

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# Simultaneous vaccinations...

*-Continued from page 6.*  
dren, shingles is the opposite. Reactivation of the dormant virus, more common in older adults, results in a tingling sensation followed by a distinct rash that can cause extreme itchiness and intense pain, lasting anywhere from a month to several years.

Someone who has never had chickenpox can't develop shingles. However, exposure to shingles may lead to a subsequent chickenpox episode, making it possible to experience shingles in the

future. Since 2017, the CDC has recommended healthy adults over age 50 receive the Shingrix series of the shingles vaccine. As of July 2021, Shingrix is now approved for immunocompromised adults at least 18 years of age.

Lower respiratory tract infections like pneumonia are the fourth leading cause of death globally (if we exclude COVID-19) at four million per year, trailing only heart disease, stroke, and Chronic Obstructive Pulmonary Disease. Around

44,000 Americans will succumb to pneumonia acquired at a hospital or in the community this year alone.

While some may develop a standalone case of pneumonia, most will experience pneumonia as an infection secondary to another health complication, putting them at even greater risk.

The CDC said this is true in children less than age 2 and in persons ages 65 and older, especially when other risk factors accompany advanced age. The good news is there are vaccines to help reduce the chance of contracting and improving the likelihood of beating pneumonia.

*(Colgrove and Kohll are with Kohll's Rx in Omaha.)*

## Millard Senior Center

You're invited to visit the Millard Senior Center at Montclair, 2304 S. 135<sup>th</sup> Ave., this month for the following:

- **Mondays:** Tai Chi with a live instructor @ 9:30 a.m.
- **Sept. 1:** At 9 a.m. we'll be making sun dresses that will be sent to Africa.
- **Sept. 8:** Board meeting at 9:30 a.m. If you have any suggestions or concerns, please contact Tamara Womack or a board member.
- **Sept. 13:** THEOS (Together Helping Each Other Socially) @ 12:30 p.m.
- **Sept. 27:** Book Club @ 1 p.m. featuring *Fresh Water for Flowers* (Valerie Perrin).

The center will be closed on Labor Day.  
For more information, please call 402-546-1270.

## CMS seeks greater access to care for persons with End-Stage Renal Disease

The Centers for Medicare and Medicaid Services (CMS) recently proposed actions that aim to close health equity gaps by providing Medicare patients battling End-Stage Renal Disease (ESRD) with greater access to care through the ESRD's Prospective Payment System. This proposed rule would update the ESRD's payment rates, make changes to the ESRD Quality Incentive Program, and modify the ESRD's Treatment Choices Model.

The proposed changes encourage dialysis providers to decrease disparities in the rates of home dialysis and kidney transplants among ESRD patients with lower socioeconomic status, making the model the agency's first CMS Innovation Center model to directly address health equity.

According to the CMS, disadvantaged Medicare patients suffer from ESRD at higher rates. They're also more likely to experience higher hospital readmissions and costs, as well as receive in-center hemodialysis because their kidneys are no longer able to perform their function. Studies also indicate non-white ESRD patients are less likely to receive pre-ESRD kidney care, become waitlisted for a transplant, or receive a kidney transplant.

"The proposed rule is grounded in measures to ensure people with Medicare who suffer from chronic kidney disease have easy access to quality care and convenient treatment options," said Chiquita Brooks-LaSure of CMS.

"When CMS encourages dialysis providers to offer more options for Medicare patients to receive dialysis treatments, it can be life changing and lead to better health outcomes, greater autonomy, and better quality of life," she added.

The proposed changes build on the current model by proposing to test a new health care approach that rewards ESRD facilities and managing clinicians participating in the model for achieving significant improvement in the rates of home dialysis and kidney transplants for lower income beneficiaries.

Consistent with President Joe Biden's Executive Order on Advancing Racial Equity and Support for Underserved Communities through the federal government, CMS is addressing health inequities and improving patient outcomes in the U.S. through improved data collection for better measurement and analysis of disparities across programs and policies.

CMS is soliciting feedback in this proposed rule change on opportunities to collect and leverage diverse sets of data. This includes race, ethnicity, Medicare/Medicaid dual eligible status, disability status, LGBTQ+, and socioeconomic status. It also includes new approaches to advance equity through the ESRD Quality Incentive Program.

Nearly 90% of dialysis facilities are reporting COVID-19 vaccination data to the Centers for Disease Control and Prevention's National Healthcare Safety Network. CMS is evaluating options for publicly reporting the data that compares the quality of care provided in Medicare-certified dialysis facilities nationwide.

CMS' proposed rule changes include several requests for information for the agency to consider as part of its goal to increase access to dialysis treatments at home. Medicare will only pay for dialysis at an ESRD facility for patients with Acute Kidney Injury.

*The Eastern Nebraska Office on Aging has been providing programs and services for older adults in Douglas, Sarpy, Dodge, Cass, and Washington counties since 1974.*

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# Joe: Good interviews result of doing good homework

--Continued from page 9.

Jordan opened KMTV’s Lincoln Bureau in 1980 before returning to Omaha in 1982, where within a few years he became the station’s lead political/investigative reporter. With a knack for uncovering news stories before his competition, and a flair for reporting them, Jordan earned the respect of his peers and the viewing public.

His journalistic honors have been many, including the Walter Cronkite Award for Political Journalism on Television, and Columbia University’s duPont Award for Investigative Reporting.

The Cronkite Award recognized work in exposing an alleged political scam. One of the country’s leading pharmaceutical companies, Pfizer, teamed up with several members of Congress, including then-Nebraska Rep. Lee Terry, to produce what was billed as a series of public service announcements for patients seeking prescription drugs at reduced prices.

“Realistically, the ads, with on-camera appearances by the Congressmen, were nothing more than a campaign commercial, and therefore a potentially illegal campaign contribution by Pfizer,” Jordan says.

Prompted by Jordan’s reporting, Pfizer denied the allegation – and pulled the ads.

The prestigious duPont Award recognized work that uncovered extensive abuse of patients inside an Omaha area home for the physically and mentally handicapped.

Getting a good interview is integral to reporting, Jordan says, and the best way to do good interviews, is to do good homework. “One of the problems with reporters today is they aren’t going that extra mile.”

Jordan has had so many “Oh, wow” interview moments they are too numerous to count. Like the live interview in 1998 when he asked then 2<sup>nd</sup> District Congressional seat candidate and former KMTV newsman Michael Scott if he ever did drugs. Scott seemed blindsided, even though Jordan had asked Scott’s opponent, Lee Terry, the same question one week before.

As Jordan pressed, Scott, then 44, admitted using “soft drugs” as a youth. “When I was a youngster I smoked marijuana. We probably were exposed to some cocaine. And that’s it.”

Jordan continued. “Hang on. You smoked marijuana. Did some cocaine. And how long ago was that?”

Scott declined to answer. And though the interview was not yet over, Scott’s political aspirations pretty much were.

Jordan says he never had hard information about Scott’s drug use prior to asking him the question. He asked because he had asked Terry the same question, and received an emphatic, “No.”

“I had no proof Scott had done drugs,” Jordan recalls. “If he had said, ‘No,’ that would have been it.”

Jordan says that when he speaks with journalism classes, he often gets asked, “What’s the difference between an investigative reporter and a reporter?”

“I’m not sure I know the answer,” he says. “Sometimes it’s just one more phone call.”

Or one more on-air question.

From July 2009 to April 2015, Jordan reported and managed Nebraska Watchdog, an investigative reporting website. His coverage included an exclusive series of reports revealing a scheme by former Nebraska State Sen. Kent Rogert to avoid paying sales taxes on his speed boat.

In 2013, the *Washington Post* honored Jordan as one of the best state-based reporters in the country in recognition of his original reporting on questionable campaign contributions to

the state attorney general.

Since 2017, he has been the investigative/political reporter for News Channel Nebraska (NCN), where he also fills management duties for NCN and as News Director for NCN’s sister network, Telemundo Nebraska.

NCN is a Nebraska based in-state television, radio, digital news, weather, and sports network with coverage geared to eight different regions from Omaha to Scottsbluff. It’s available at [www.newschannelnebraska.com](http://www.newschannelnebraska.com), via TV and radio on KOHA-LD Channel 26.2 Omaha (NCN); KFDY-LD Channel 27.2 Lincoln (NCN); KBBX-FM 97.7 FM (Lobo 97.7), and by subscribing for emails.

At NCN, he continues turning over rocks, looking for stories other news organizations miss. In 2017, his exclusive reporting exposed a cover-up within the Nebraska State Patrol involving a high-speed chase and crash that left one man dead. It resulted in the firing of the patrol’s superintendent and the suspension of six state troopers.

Good news or bad, every story Jordan covers is the best work he can produce.

“TV news is personal to me,” he says. “It has impact. When you’re in someone’s living room telling them a story, it’s personal to everyone.”

There is life outside the newsroom for Jordan. He is married to Deborah Ward, former KMTV news anchor and reporter and now the Executive Director of Visit Omaha (aka the Omaha Convention and Visitors Bureau) for the City of Omaha. Married for 34 years, they have two daughters, Samantha Douez and

Addison Jordan. Joe has three children from a previous marriage: Molly Mayfield, Julia Monteverde, and Jon Jordan. Joe has eight grandchildren: Houghton Mayfield, Mary Mayfield, Simon Mayfield, Mateo Monteverde, Capri Monteverde, Presley Jordan, Ryland Jordan, and Ryan Douez.

He and Deb travel to Chicago regularly; her to shop, and both to enjoy the “zillion” good restaurants there.

Off camera, Jordan likes to run, although while running his snow thrower during a typical Omaha winter three years ago he slipped on some hidden ice and broke his kneecap when he fell. He also enjoys playing golf, participating in the KMTV league since the 1980s, though most of his fellow golfers are now retired.

And, no, he’s not yet contemplating retirement. At least, not before he makes that 50-year mark. “Assuming I have a job in two years,” he says, smiling.

Through the years, Jordan has interviewed every U.S. President from Gerald Ford to Barack Obama. He has covered eight national political conventions, along with seven Nebraska governors, and a long list of Omaha mayors from Mike Boyle to Jean Stothert.

It’s probably no surprise that, when asked if there is a news story he would refuse to cover, he’ll admit to only one.

“I don’t do city tourism,” Joe says, referencing the Convention and Tourism office his wife directs. “I’ll cover the mayor and any other city office, but I don’t do stories about people who touch my food last.”

Because the one thing Joe Jordan would never want to appear to be is biased.



During his award-winning career, Jordan has interviewed seven U.S. Presidents.