



***Editor's comments:***

*Dear Subscribers,*

*Welcome to the May Engaging Aging e-Newsletter! Many of you will be off for the summer at the end of this month- enjoy your time away!*

*Please note: If for some reason a link does not work, copy and paste the address into your browser. Also, a reminder, if you are interested in posting and/or receiving jobs in aging announcements, please read the details at the end of this newsletter.*

*As always, thank you to all who donate to us! Your support is essential for continuation of our e-newsletter and Jobs in Aging Board.*

*Important: If you have content for the June newsletter (our final one before the summer hiatus), please email it to me at [jisrael@berkeley.edu](mailto:jisrael@berkeley.edu) by June 15, 2011.*

*Best to all, and here's to May-- Older American's Month!*

*Jill Israel, RN, Publisher/Editor*

*Coeditor: Desi Owens, MS, MSW, LCSW, Campus Planner & Academic Coordinator;*

*Contributor: Guy Micco, MD, Director, Center on Aging*

**UC BERKELEY RESOURCE CENTER ON AGING: FEATURED HAPPENINGS**

- **Website for Center Updates:** Please remember to visit our website for updates, especially during summer: <http://socrates.berkeley.edu/~aging/index.html> A reminder regarding our newsletter publications: our team will publish a June edition, and there will once again be a summer hiatus; our staff will reevaluate how we might be able to continue this resource (in the wake of unprecedented budget cuts) beginning fall 2011.
- ***The Poetics of Aging: Towards a New Understanding of the Many Verses in Life:*** Our UCB Center on Aging is pleased to collaborate with AgeSong Institute to bring

you this exciting conference. The mission is to counter the mainstream understanding of aging as decline and/or disease with a more expansive, humanistic, and creative - that is poetic - vision and approach. Together we shall create a climate where people exchange information and partake in creative expressions, while providing room for self-study and discovery. **Dates: November 16 - 19, 2011.** For more information and updates, please visit: <http://poeticsofaging.org/> Contact information: <http://poeticsofaging.org/contact.php>

- UC Berkeley Students! Our Center on Aging will be offering the course, *Readers' Theater: On Aging and Old Age*, in fall 2011. The lead instructor is Guy Micco, MD, and the co-instructor is Linda Spector-Hatofsky, playwright and co-founder of Stagebridge Senior Theater Company (<http://www.stagebridge.org/>). For more information (i.e., a link to last year's syllabus) please visit this webpage and click on "Readers' Theater": <http://socrates.berkeley.edu/~aging/centeractv.html>. This course is geared for graduate students from all health-related disciplines, though upper-division undergraduate students may be admitted with Professor Micco's consent. If interested, contact Guy Micco at: [guym@berkeley.edu](mailto:guym@berkeley.edu); a course entry code is required. This is a unique opportunity to have a moving experience within an interdisciplinary and intergenerational setting!
- **Our Center's CA Jobs in Aging Board: Reminder About How to Post and/or Receive Job Announcements**  
You will find a link to our Jobs in Aging Board on our Center's homepage: <http://socrates.berkeley.edu/~aging/>. As always, we're very pleased to offer this informational service to our subscribers! **Note: it is important that you remain a subscriber/subscribe to our jobs in aging listserv to receive key updates regarding the Jobs Board.** Please remember that your donations will help sustain this informational service. We are asking that you post your own positions—instructions are at the end of the newsletter. (Jobs will remain on the board for approximately one month unless you request an extension.) **IF you wish to receive daily updates on job postings, please scroll to the end of the jobs board page and sign up! You will notice an option called "get job updates"; to activate this feature, you will need to enter your email address.** If you need additional information, email Desi Owens at: [desiowens@berkeley.edu](mailto:desiowens@berkeley.edu).
- **On-Line Donation Option** to support Center activities: <http://socrates.berkeley.edu/~aging/support.html> Additional donation-related information is at the end of this newsletter.

**REFLECTIONS/CONTRIBUTIONS BY OUR UCB COMMUNITY/AFFILIATES****Why Have We Evolved a Menopause?**

by Jay Luxenberg, MD  
Chief Medical Officer  
On Lok Lifeways  
San Francisco, CA

In gerontology, it is useful to ponder the factors that have contributed to how we have evolved to have the particular life-span and pattern of aging that we have. It's apparent that we have a much longer life-span than other mammals like our friendly pets, dogs and cats. We also live considerably longer than our closest primate relatives. What you may not have thought about, though, is how menopause has evolved to contribute to our uniquely human pattern of aging. Menopause is a very rare phenomenon, essentially limited to people, short-finned pilot whales and killer whales(1). Stop thinking about the practical issues confronting scientists that study the menstrual cycles of killer whales, unless it is to reconsider how easy your own job is compared to that. Women cease reproduction about half-way through our biologically determined maximum lifespan, when there is only minimal impact of senescence on most other body functions. By contrast, other long-lived mammals can continue to become pregnant throughout their full lifespan — elephants, for instance, into their 60s and baleen whales into their 90s(1). This should trigger the question of “why do we humans have menopause at all?”

When did menopause evolve? We know our line split from simians around 6 million years ago, and anatomically modern humans appeared in Africa around 200,000 years ago. What we don't know is when, after our split from simians, did menopause appear. One line of reasoning is to look toward which aspect of menopause would provide the genes that determine it to be more likely to increase in frequency with subsequent generations – in short, what survival value for the genes does menopause convey? Clearly menopause would serve to end fertility in women, so at first thought it should decrease rather than increase the chance genes survive. Perhaps the value of menopause is that mortality in childbirth increases dramatically with age. Even in today's medically sophisticated world it still does. Now think of the relative head size of human babies compared to chimpanzee or gorilla babies. A 200-pound gorilla has a four-pound baby, whereas a hundred-pound woman may have a seven-pound baby. Our closest relatives, chimpanzees, have a maximal life span of 50 years that coincides with menopause. Human females have a maximal life-span of 120 years, which is at least twice as long as the age at menopause. Still, protection from childbirth mortality alone wouldn't explain a survival benefit for genes, except that our long period of vulnerability in infancy compared to other species means that the death of a mother might well mean the death of several children whose genes would then perish.

Another factor that would promote survival of the genes of a post-reproductive age woman would be if having a living grandmother improved the chances that her grandchildren would live to reproduce(2). Having a living grandmother can be associated with faster weight gain and

enhanced fertility in granddaughters(3). Given the increased chance of dying in childbirth with advancing age, the effect of a menopause to increase the chance a grandmother would survive to enhance their granddaughter's fertility would improve the survival of genes that lead to menopause. This grandmother factor may be at least a partial explanation of why we would have evolved such an unusual, prolonged post-reproductive period of life. Viva la menopause!

1. Johnstone RA, Cant MA. The evolution of menopause in cetaceans and humans: the role of demography. *Proceedings of the Royal Society B: Biological Sciences*. 2010 Nov. 10;277 (1701):3765-3771.
2. Herndon JG. The Grandmother Effect: Implications for Studies on Aging and Cognition. *Gerontology*. 2010;56(1):73-79.
3. Hawkes K, O'Connell J, Jones N, Alvarez H, Charnov E. Grandmothering, menopause, and the evolution of human life histories. *Proc Natl Acad Sci USA*. 1998 Feb. 3;95(3): 1336-1339.

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### **Medications for Depression in Late Life**

by Robert Dolgoff, MD

Medical Director, Mental Health Services, Alta Bates Summit Medical Center

Medical Director, Berkeley Therapy Institute

Anyone can get depressed at any time in life. Most people don't realize that the rate of depression in seniors living in the community is rather low – most seniors living at home, especially if they are physically healthy, report that they are more content and happy than at any other time of their lives. The incidence of depression in institutional settings, however, is very high, approaching 50% or even more in some studies. This is probably because seniors in institutional settings are not physically healthy and they have been uprooted from the lives and people that provided emotional gratification and support.

The three pillars of treatment for all psychiatric disorders throughout the lifespan are psychotherapy or counseling, psychosocial support from family, friends, and the community, and medications. Medical illnesses can cause depression or can make depressive disorders worse. Thus it is important for an older adult who has become depressed to have a full medical evaluation, including basic lab work and possibly other diagnostic studies. Sometimes the treatment of a medical condition can also treat the depression! When I see an older adult who has a mental health problem I want to be sure that the treatment will be comprehensive, but when the depression is mild medication may not be needed.

When the depression is moderate or severe and medical causes have been ruled out and when patients aren't improving with counseling and psychosocial support we turn to medications. In

my experience this is usually very successful and the person's suffering can be relieved. I hope here to provide a very broad and necessarily brief survey of the psychopharmacological treatment of depression in the aged. Most readers of *Engaging Aging* will have some basic familiarity with the drugs that are used for depression in young and middle aged adults. The medications used in late life are the same but there are differences in dosing and in side effects in the elderly.

At one time there was little scientific evidence about how seniors do with antidepressants. Now numerous studies have been done in geriatric populations; a survey published in 2007 cited more than 30 randomized clinical trials with 5,000 geriatric subjects. The antidepressants that are commonly used in early and middle life have been found to work well in the elderly and they have been shown to be safe even if the depressed person has mild cognitive impairment or even dementia. Citalopram (Celexa), Sertraline (Zoloft), and Escitalopram (Lexapro) have certain advantages over the other drugs. These three drugs are less likely than others to have unpleasant or dangerous interactions with other drugs that patients may be taking. The first two on the list are generic and so are more affordable. Common side effects of nearly all antidepressants for patients in all age groups are gastrointestinal disturbances, jitteriness, sedation or mental fogging, weight gain, and impairment of sexual function. Patients with bipolar disorder (diagnosed or not-yet diagnosed) may become so overstimulated when given antidepressants that they can actually become manic. Most patients don't get any of these side effects or if those side effects do occur they are mild. Older adults should be started on low doses of antidepressants – usually 50% of the dose one would give to a young or middle aged adult. Then the dose can be raised slowly. This is because many but not all drugs are metabolized more slowly in the elderly than in young people. Also older persons may have concurrent medical problems and may be on a number of other medications, thus making adverse drug interactions more likely to occur.

There are a few side effects which are seen at times in young and middle-aged patients which may be more prominent or serious in the elderly. Some antidepressants can impair blood-clotting and bleeding may occur; this may be particularly risky for seniors who are already on aspirin or other drugs that impair clotting. It is thought that antidepressants may cause osteoporosis or thinning of the bones. Antidepressants may slow the heart, and this could present problems for seniors who are taking other medications which may do that as well, for example drugs for high blood pressure. Also some antidepressants may at times cause sleepiness or sedation and/or may lower blood pressure making it a bit more likely that a person taking the medication might fall.

If one medication does not provide benefit another should be tried. Unfortunately it is not possible to predict what the right drug will be for an individual patient. Ultimately most people will get better! There is a lot of hope for geriatric patients who suffer from depression, especially if there is a comprehensive approach to their care, with attention to counseling or psychotherapy, psychosocial support from friends, family, and the community, and thoughtfully prescribed and monitored antidepressant medications.

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## **It Takes a Village**

by Marlene Bagdikian  
Ashby Village member

As the longevity revolution unfolds, senior villages will become one of the distinctive social inventions of our time.... These virtual villages offer an affordable way for seniors to find the practical support, companionship, and cultural vitality they need while remaining in their own homes and neighborhoods.

--Theodore Roszak, *The Making of an Elder Culture*, and founding member of Ashby Village

Seniors in the East Bay who want to remain in their own homes and communities when life grows more difficult and complicated at last have a way to make that possible. They can join Ashby Village, a virtual village that offers members an amazing array of services.

In 2006, The New York Times published an article about Beacon Hill Village in Boston, the first such community dedicated to helping residents in the area age in place and not in remote institutions. Since then, the concept has become a movement! Over 150 Villages are now operating or being formed throughout the country, and the number is growing.

The New York Times article sparked a conversation among Berkeley neighbors who wanted their own aging to be different from that of their parents' generation. They wanted to plan before a crisis erupted, wanted to help friends and neighbors, but most of all, they wanted to be in charge of their later years and have their kids to know their wishes.

And thus in 2010, Ashby village was launched, a virtual community that includes residents of Berkeley, Albany, Kensington, El Cerrito, and the Rockridge neighborhood in Oakland. It gives village members independence and it relieves family members of worry and obligation.

Within one short year, AV now has 161 members and is growing weekly. It has trained 54 volunteers, responded to 152 requests and made 45 referrals to service providers. It is supported by membership dues and volunteering skills and, most significant perhaps, by members who have both the time and the wish to help friends and neighbors.

How does it work? AV has only one full-time employee, executive director Andy Gaines, who delegates and supervises a myriad of committees and activities. There are home-based volunteer services as far-ranging as transportation to a doctor or grocery shopping, a house visit to change a lightbulb or hang a picture, or a supportive presence at a time when one does not want to be by oneself. One member called AV when she found herself alone as her husband was facing unexpected and potentially serious surgery. Two volunteers waited with her, ready to stay the

night if need be. The surgery was successful, but she writes that “we had never met before; we have not seen each other since ... but I will be grateful to them forever.”

Some services are not performed by volunteers. AV now has 101 service providers who have been fully approved. These one-call vetted concierge referrals can include gardeners, painters, attorneys, accountants, and personal care attendants. After a single call to AV, for example, a member with a broken backdoor lock had it fixed by an experienced carpenter for the reasonable fee of \$50 and the door could be locked that evening.

Access to support and services are key elements but creating community within the Village is the secret to success. Members meet at potluck dinners, poetry readings, luncheon outings and holiday parties and educational events have focused on problem memory issues or how to ensure an ethical will. It is membership needs and interests that determine cultural, social, and educational events and gatherings.

Ashby Village invites anyone living in its service area to Come and Join.

For more information about Ashby Village, click on <http://www.ashbyvillage.org/>, call 510-204-9200, or email [outreach@ashbyvillage.org](mailto:outreach@ashbyvillage.org).

### **DIRECT PRACTICE PICKS OF THE MONTH**

- T'ai Chi Helps Prevent Falls and Improve Mental Health in the Elderly  
[http://www.eurekalert.org/pub\\_releases/2011-05/bmj-tch051311.php](http://www.eurekalert.org/pub_releases/2011-05/bmj-tch051311.php)
- Baby Boomers Becoming The Replacement Generation  
<http://www.kaiserhealthnews.org/Daily-Reports/2011/May/23/knees-hips-medical-devices.aspx>
- Caring for an Ill Spouse, and for Other Caregivers  
[http://www.nytimes.com/2011/05/10/health/10cases.html?\\_r=1&ref=todayspaper](http://www.nytimes.com/2011/05/10/health/10cases.html?_r=1&ref=todayspaper)
- Medicare Atypical Antipsychotic Drug Claims for Elderly Nursing Home Residents  
<http://oig.hhs.gov/oei/reports/oei-07-08-00150.asp>

### **AGING IN THE MEDIA**

- Haunted by Their Medicare Vote  
<http://www.nytimes.com/2011/05/22/opinion/22sun2.html>
- Democrats Put G.O.P. on Spot as Medicare Plan Fails  
[http://www.nytimes.com/2011/05/26/us/politics/26medicare.html?\\_r=1](http://www.nytimes.com/2011/05/26/us/politics/26medicare.html?_r=1)

- Get Ready for Social Security, Medicare Meltdowns  
<http://www.marketwatch.com/story/get-ready-for-social-security-medicare-meltdowns-2011-05-19>
- More Seniors Going Hungry  
[http://www.usatoday.com/yourlife/mind-soul/2011-05-16-seniors-hunger-meals-on-wheels-survey\\_n.htm](http://www.usatoday.com/yourlife/mind-soul/2011-05-16-seniors-hunger-meals-on-wheels-survey_n.htm)
- Older Workers Have Much to Offer, Experts Say  
<http://www.nationalpost.com/todays-paper/Older+workers+have+much+offer+experts/4794448/story.html>
- Our Irrational Fear of Forgetting  
[http://www.nytimes.com/2011/05/22/opinion/22gullette.html?\\_r=2&src=recg](http://www.nytimes.com/2011/05/22/opinion/22gullette.html?_r=2&src=recg)
- In An Aging Nation, Making Stores Senior-Friendly  
<http://www.npr.org/2011/05/10/135773106/in-an-aging-nation-making-stores-senior-friendly>
- Nursing Homes Seek Exemptions from Health Law  
<http://www.nytimes.com/2011/05/16/us/16nursing.html>

#### **RESEARCH/POLICY-RELATED PICKS**

- Driving Skills Do Ebb With Age: Study  
<http://consumer.healthday.com/Article.asp?AID=653139>
- Aspirations for Later Life  
[http://research.dwp.gov.uk/asd/asd5/report\\_abstracts/rr\\_abstracts/rra\\_737.asp](http://research.dwp.gov.uk/asd/asd5/report_abstracts/rr_abstracts/rra_737.asp)
- Social Security and Black Women  
<http://www.iwpr.org/publications/pubs/social-security-and-black-women>
- Rise of for Profit Hospice Industry Raises Troubling Questions, New Study Says  
[http://www.eurekalert.org/pub\\_releases/2011-05/pfan-rof051811.php](http://www.eurekalert.org/pub_releases/2011-05/pfan-rof051811.php)
- Columbia Researchers Work to Prevent Blindness from Age-Related Macular Degeneration  
[http://www.eurekalert.org/pub\\_releases/2011-05/cumc-crw051811.php](http://www.eurekalert.org/pub_releases/2011-05/cumc-crw051811.php)
- Reimagining Alzheimer's Disease– Time for Bright New Ideas?  
<http://www.alzforum.org/res/for/journal/detail.asp?liveID=189>

- The Lowdown on “Low T,” UCB Wellness Letter, Featured Article  
<http://www.wellnessletter.com/html/wl/2011/wlFeatured0511.html>
- Multigenerational Households Are Increasing  
<http://assets.aarp.org/rgcenter/ppi/econ-sec/fs221-housing.pdf>

### WEB HIGHLIGHTS– SELECTIONS OF THE MONTH

- May is Older American’s Month! This year’s theme, *Older Americans: Connecting the Community*  
[http://www.aoa.gov/AoARoot/Press\\_Room/Observances/oam/archive/archive.aspx](http://www.aoa.gov/AoARoot/Press_Room/Observances/oam/archive/archive.aspx)  
<http://olderamericansmonth.org/>  
[http://www.aoa.gov/AoARoot/Press\\_Room/Observances/2011/pres\\_proclamation\\_OAM.aspx](http://www.aoa.gov/AoARoot/Press_Room/Observances/2011/pres_proclamation_OAM.aspx)
- Another Month, Another Home  
<http://newoldage.blogs.nytimes.com/2011/05/18/another-month-another-home/>
- Population Aging: Facts, Challenges, and Responses  
[http://www.hsph.harvard.edu/pgda/WorkingPapers/2011/PGDA\\_WP\\_71.pdf](http://www.hsph.harvard.edu/pgda/WorkingPapers/2011/PGDA_WP_71.pdf)
- Racial Disparities Still Exist in Colorectal Cancer Screening Despite Increased Medicare Coverage  
[http://www.eurekalert.org/pub\\_releases/2011-05/aafc-rds042811.php](http://www.eurekalert.org/pub_releases/2011-05/aafc-rds042811.php)
- Workers to Be Asked to Save for Cost of Care in Old Age  
<http://www.telegraph.co.uk/health/elderhealth/8522500/Workers-to-be-asked-to-save-for-cost-of-care-in-old-age.html>
- Women’s Retirement Risks, Urban Institute  
<http://www.urban.org/publications/500224.html>

### ELDER VOICE: RELATED RESOURCES

- Moving Murray  
<http://newoldage.blogs.nytimes.com/2011/05/20/moving-murray/?ref=health>
- ‘Ask Medicare’ 2.0:  
<http://newoldage.blogs.nytimes.com/2011/04/18/ask-medicare-2-0/>

- Financial Realities Faced by Seniors and Their Caregivers Today  
<http://www.voa.org/Boomer-Bust-2011>

## PALLIATIVE CARE

- Improving Advanced Illness Care: The Evolution of State POLST Programs  
<http://www.aarp.org/health/doctors-hospitals/info-04-2011/polst-04-11.html>
- Loneliness  
<http://www.geripal.org/2011/05/loneliness-2-recent-articles-have.html>
- Figuring the Odds  
<http://newoldage.blogs.nytimes.com/2011/05/02/figuring-the-odds/#more-8753>
- Computer Program Aids Patients in End-of-Life Planning  
[http://www.eurekalert.org/pub\\_releases/2011-05/ats-cpa051111.php](http://www.eurekalert.org/pub_releases/2011-05/ats-cpa051111.php)
- Clinicians' Attention Lacking in Discussions of End-of-Life Care  
[http://www.eurekalert.org/pub\\_releases/2011-05/ats-cal051111.php](http://www.eurekalert.org/pub_releases/2011-05/ats-cal051111.php)
- The End of Life Paradox  
[http://www.huffingtonpost.com/kenneth-j-doka/end-of-life-paradox\\_b\\_858013.html](http://www.huffingtonpost.com/kenneth-j-doka/end-of-life-paradox_b_858013.html)

## EVENTS

- **Caring for Aging Family Members: Tools, Resources, and Support**  
The Continuing Education Department at John F. Kennedy University is offering a free one-day workshop, “Caring for Aging Family Members: Tools, Resources, and Support” on Saturday, **June 18, 2011** at our Pleasant Hill campus. This workshop is designed for family members who provide care for aging relatives and will provide information and resources on a variety of topics, including memory loss and dementias; legal documents; health care benefits and entitlements; strategies for dealing with loss of independence; housing and placement options; and practicing self-care while caring for another.

Expert presenters include Linda Fodrini-Johnson, MFT, CMC; Cazeaux Nordstrum, MFT; Dr. Eric Freitag, Geriatric Neuropsychologist; and attorney F. Michael Hanson. The presentations will be held from 9:00 a.m. to 1:00 p.m., followed by an Aging Resource Expo from 1:00 p.m. to 3:00 p.m. This event is free to the public. Refreshments will be provided during the morning presentations.

Space is limited for the presentations, so anyone who is interested in attending should RSVP at [www.jfku.edu/events.html](http://www.jfku.edu/events.html). No RSVP is required to attend the Expo in the

afternoon. For more information: <https://secure.jfku.edu/cecart/index.php?act=browse&id=498>

- **Age For Change Book Group**  
<http://www.comingofage.org/bayarea/>
- **Certified Eden Associate Training**  
**June 13 - 15, 2011**  
Salem Lutheran Home, Oakland CA  
<http://archive.constantcontact.com/fs022/1101511475155/archive/1105065937964.html>

Creating person-directed care is an exciting and challenging journey. The Certified Eden Associate Training provides practical tools, resources, and inspiration that empower teams to initiate and maintain effective change. Through our Ten Principle approach to person-directed care, attendees will:

Connect to ongoing support from person-directed care experts worldwide, in all aspects of care;

Reframe the culture of care and perceptions of aging in our society;

Gain powerful team building skills to strengthen partnership development throughout the organization;

Discover that improving well-being for all also improves the well-being of business itself;

Return equipped and inspired to initiate change.

**WHO SHOULD ATTEND:** People (e.g., formal and informal leaders) who have positive influence in organizations caring for others who will come back from the training prepared to lead the culture change journey.

- **International Reminiscence and Life Review Conference, Boston, MA, November 16 - 18, 2011.** For more information, see: <http://www.reminiscenceandlifereview.org/>
- **American Society on Aging Announces its Call for Proposals to Present at the 2012 Aging in America Conference. Submissions Will Be Accepted June 1 - 30, 2011**  
If you have a best-practice program, innovative research or expertise in aging you would to share with more than 3000 professionals in the field of aging, the Aging in America conference is the place to do it. Whether you are a seasoned presenter at Aging in America or submitting for the first time, we invite you to submit a workshop or poster session for the conference scheduled for **March 28 - April 1, 2012 in Washington, DC.**

The Aging in America conference is the largest multidisciplinary aging conference in the country and is recognized as a platform for the new knowledge, practices and

replicable models that help our members and participants be more effective in their work with older adults. Presenting at Aging in America earns you recognition as an expert in the field, and allows you to share your ideas with colleagues from across the country.

The online submission site at [www.asaging.org](http://www.asaging.org) will be open from June 1 - 30.

**Proposals must be submitted online by the deadline of June 30, 2011, to be considered.**

Visit [www.asaging.org](http://www.asaging.org) for more information.

- **American Society on Aging/MetLife Foundation Web Seminar Series**  
[http://www.asaging.org/webseminars/metlife\\_mindalert\\_series.cfm](http://www.asaging.org/webseminars/metlife_mindalert_series.cfm)
- **Festival of International Conferences on Caregiving, Disability, Aging, and Technology, June 5 - 8, 2011**, Toronto, Canada  
<https://www.confmanager.com/main.cfm?cid=1559>

### OFF THE BEATEN PATH...

- Aging Across America: Photographs by Jeffrey Levine, M.D.  
<http://www.levinemdphotos.com/#a=0&at=0&mi=2&pt=1&pi=10000&s=0&p=0>
- *Health for Sale*, An Exhibition of Vintage Medical Posters, Debuts at the Philadelphia Museum of Art, April 2 - July 31  
<http://www.uwishunu.com/2011/03/health-for-sale-an-exhibition-of-vintage-medical-posters-debuts-at-the-philadelphia-museum-of-art-april-2/>

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If a colleague has forwarded this newsletter to you, why not get the newsletter directly? A reminder that our Center offers three subscription options: 1) CA Jobs in Aging posts *only*; 2) our monthly electronic newsletter *only*; or 3) both the CA jobs in Aging posts (via our new Jobs in Aging Board) **and** our monthly e-newsletter. Jill Israel, RN, is the contact for ALL subscriptions ([jisrael@berkeley.edu](mailto:jisrael@berkeley.edu)). Please note "subscribe" in the subject heading with your preference, that is, if you haven't already subscribed. (Also, to unsubscribe, please note this in the subject heading of your email.)

## **Jobs in Aging Board Information**

**Note: it is important that you remain a subscriber to our jobs in aging electronic mailing list to receive key updates regarding the Jobs Board.**

Here is the link to our user-friendly Jobs Board: <http://jobsinaging.easyjobboards.com>

**Remember, we are requesting that you now post your own positions.** Jobs will remain on the board for approximately one month unless you request an extension. **IF you wish to receive daily updates on job postings, please scroll to the end of the jobs board page and sign up! You will notice an option called “get job updates”; to activate this feature, enter your email address.**

### How to Post

The following details should significantly lessen the learning curve!

To submit a new job post:

Click on the green plus sign with “submit a job” on the right side of the homepage.

There are several fields to complete, such as “job title” & “location.”

Under the “contract type” options, if none apply, select “other.” The “hours” field is optional.

At a minimum, please include the following in the “description” box:

- Job Description
- Name and address of company where job is located, and url and/or background information about your organization
- Contact person including name, phone number and/or email address

**IMPORTANT: to mitigate formatting problems in the “description” box, copy and paste your job summary from a Word document or Text Edit to the “description” box without text enhancements (e.g., bulleting, bolding, etc.). If desired, do wait to bold, underline, and/or italicize content until you have already entered all information in the box; icons are available should you wish to do this.**

If you do not have information for an “optional” field, leave it blank.

Next, type in the requested words in the security box and click on the “post” button. Your post will be sent to the jobs administrator for review; if complete, it will be approved and posted as soon as possible. If we need additional information or have questions, we will contact you.

**Also, remember to enter your name and email address in the appropriate text boxes below the “description” box so that we can contact you if needed.**

If you need assistance during this transition phase, please contact Desi Owens at:

[desiowens@berkeley.edu](mailto:desiowens@berkeley.edu)

**Postings in this newsletter are for informational purposes only and do not constitute endorsement by the Resource Center on Aging or the University of California. Please do not contact the UCB Resource Center on Aging about information within these posts. Contact the provider/contributor directly. Thank you.**

### **Donations**

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\$10-\$15.00 a year for newsletter

\$10 a year for job listings

\$20 a year for both

\$20 per job posting

\$10 per newsletter posting

We appreciate all donations, large or small. Our monthly e-newsletter and jobs in aging posts will continue through our fiscal year, June 2011; there will be no newsletter or job posts in July and August 2011. Continuation of these services in fall 2011 is contingent upon funding. Thank you!

New Online donation option: <http://socrates.berkeley.edu/~aging/support.html>

Please mail checks to: Resource Center on Aging, C/O Desi Owens, 50 University Hall, MC 7360 Berkeley, CA 94720