The Director’s Report
by Jan Bowman, Ph.D.

Here Ye! Hear Ye!
CAAR Has New Funded Projects to Bring to You

I am so happy to announce that we have received funding from the following agencies to bring new programs to you. We hope you will participate in these and other programs sponsored by the Center.

Workforce Survey-Seeking Folks to Critique Instrument

Hardly a day goes by that we are not contacted by someone in our area who is looking for work. Many have raised their families or worked full-time and would like to re-enter the job market or change jobs. We hear from many who are middle age and older with great job skills and who are relatively new residents to the Grand Strand region. In an effort to assess the job skills of the region, the Waccamaw Regional Council of Governments has funded a workforce study and survey for approximately $42,549.

Recognizing that we have a very diverse and growing population, we are most interested in identifying the job skills and work experiences of residents in Horry, Georgetown and Williamsburg counties. We will be targeting retirees, homemakers, currently employed persons, unemployed workers and persons who may have been displaced from their jobs.

The information gathered from the survey is vitally needed so that we

---

Physical Activity & Fitness...

Important for All Ages

“Aerobic Exercise and Cardiovascular Fitness: The Heart of Physical Fitness”

by Greg Martel, Ph.D., Research Coordinator and Associate Professor, Coastal Carolina University

In the first article of this five-part series, we discussed the definition of physical fitness according to the Centers for Disease Control and Prevention: “a set of attributes that people have or achieve that relates to the ability to perform physical activity.” These attributes include cardiovascular fitness, body composition, flexibility, muscular strength and muscular endurance. In this second article, we will focus specifically on cardiovascular fitness.

The term cardiovascular fitness reflects the capacity of the heart, lungs, blood vessels and blood to take oxygen from the air we breathe and deliver it to our active muscles during physical activity (i.e. walking, climbing stairs, etc.). Other commonly used terms that also represent cardiovascular fitness are “aerobic capacity,” “functional capacity,” “cardiopulmonary fitness” and “maximal oxygen consumption,” to name a few. Simply put, all of these terms indicate our ability to deliver oxygen to our muscles to make the energy needed to perform physical activity. In general, the better one’s level of cardiovascular fitness, the better the ability to perform physical activity without becoming overly fatigued or tired.

Each of the components mentioned above that determine cardiovascular fitness typically improve as a result of frequent physical activity. Specifically, research has indicated that we usually improve our ventilation (breathing efficiency), cardiac output (the amount of blood the heart pumps...
each minute), delivery of blood to active muscles, and the ability of muscles to use oxygen after only a few weeks of consistent participation in aerobic exercise. Aerobic exercise is any type of activity that involves continuous, rhythmic use of muscles that causes our heart rate and breathing to increase. Examples include walking, jogging, swimming, riding a bike (stationary or outside) or participating in a group exercise class such as step aerobics or aerobic dance.

When starting an exercise program with the goal of improving cardiovascular fitness, one should consider a few important factors: frequency of participation; intensity and duration of the activity; and the type of activity. Let's start with the simplest factor, the type. Individuals are more likely to stick to an exercise routine if participating in something they enjoy. There are many options in the Myrtle Beach area for participating in aerobic exercise, from obtaining a membership in a fitness center or joining a group exercise class, to taking part in one of the many outdoor activities that surround us (for example, walking nine or 18 holes of golf instead of riding a cart.) Don't be afraid to try something new and different; aerobic exercise does not have to be a boring, difficult chore in order to improve your health.

Next, let's address frequency and duration. The U.S. Surgeon General and the American College of Sports Medicine both recommend that we participate in some form of moderate intensity physical activity for about 30 minutes per day. If you don't have time in your busy day to do 30 minutes of continuous exercise, try to accumulate 30 minutes by doing three separate 10 minute sessions throughout the day, maybe one in the morning, one at lunch and one after dinner or in the early evening. As far as exercise intensity, the good news is that physical activity does not have to be high intensity or exhausting in order to gain health benefits. The activity should be continuous but moderate in nature; a good way to gauge this is to exercise at a level that increases your heart rate and breathing rate, but still allows you to hold a conversation.

There is more good news. It is never too late to start a physical activity routine. Many studies have shown that men and women of all ages can safely participate in aerobic types of physical activity, improve their cardiovascular fitness and obtain related health benefits such as lowered resting blood pressure and increased high density lipoproteins (“HDL,” also known as the “good cholesterol.”) Although there are many documented benefits resulting from participation in aerobic exercise, including improved cardiovascular fitness, there is also an increased risk of injury for individuals of all ages when participating in physical activity. If you are a man over 40 years of age or a woman over 50 years of age, or if you currently have some form of chronic disease such as cardiovascular disease, lung disease, diabetes or cancer, it would be wise to speak to your physician before beginning an exercise program or changing your current routine to include more vigorous (high intensity) types of activities. Depending on your health status, your physician may recommend a baseline exercise test to assess your current cardiovascular fitness level, allowing for a safer, more appropriate and individualized exercise prescription.

The Smith Exercise Science Laboratory at Coastal Carolina University currently provides a range of fitness assessments that would assist you in developing an exercise routine, including one that may improve your cardiovascular fitness. If you are ready and interested in making a healthy change to your lifestyle, please contact us using the information below. Remember, a little activity is usually better than nothing – and it’s never too late to start!

To arrange a fitness assessment, please contact:
Stacey Beam, MA, ES, HFI
Laboratory Coordinator, Smith Exercise Science Laboratory
Telephone: (843) 349-2807 • E-mail: sbeam@coastal.edu
www.coastal.edu/hper/exercise/fitnessTesting.html

This is the second of a five part series on physical fitness for older individuals and the role of the Smith Exercise Science Lab. Greg Martel can be reached at gmartel@coastal.edu or (843) 349-2957.
Pulmonary medicine refers to the branch of medicine that deals with the causes, diagnosis, prevention and treatment of diseases affecting the lungs. Pulmonary medicine deals with many diseases and conditions which affect the respiratory system, including: ARDS (acute respiratory distress syndrome), asthma, COPD (chronic obstructive pulmonary disease), cystic fibrosis, interstitial lung disease, lung cancer, lung transplants, occupational lung disease, pulmonary hypertension and pulmonary infections. Pulmonary medicine is also sometimes called pulmonology which is the science concerned with the anatomy, physiology and pathology of the lungs.

Many pulmonary disorders develop during the aging process. Moreover, our lungs begin to deteriorate after we reach our early adult years. An important and prevalent lung disease, COPD, which defines two clinical disorders, emphysema and chronic bronchitis, is directly attributed to smoking. Smokers have an accelerated annual decline in lung function. Early studies estimate that the incidence of COPD in those who smoke ranges from 15-20 percent. However, more recent studies suggest that the incidence of COPD in smokers may be as high as 50 percent. COPD is ranked as the fourth leading cause of death in the United States. In greater than 90 percent of patients diagnosed with lung cancer, smoking appears to be the contributing factor. In terms of cancer-related deaths, lung cancer is the number one killer in both men and women. COPD and lung cancer are preventable diseases if one remains abstinent from smoking.

To improve quality of life, I advise patients to eat well and become involved in aerobic exercise for at least 30 minutes a day. Most importantly, do not smoke; if one smokes, he/she should stop. The benefits of not smoking are enumerable and prevent complications such as emphysema, cancer and cardiovascular disease.

I believe there is an art to breathing, and breathing properly can alleviate tension and stress that all people encounter on a daily basis. Breathing appropriately incorporates the proper use of the diaphragm during inhalation. The diaphragm contracts downward forcing the abdomen to move out when inhaling. The opposite of abdominal breathing is shallow breathing, which is improper breathing. Shallow breathing often utilizes accessory muscles of the neck which can be seen or felt with the shoulders lifting during inhalation. The next time you become stressed or lack energy, observe how you are breathing.

It is true that women and men differ in relation to pulmonary issues and problems. However, smoking-related diseases do not discriminate between gender. Abstinence from smoking is the key to a healthy and productive life.
HORRY COUNTY DISABILITIES AND SPECIAL NEEDS

by Joan Graham, Executive Director • 250 Victory Lane, Conway, S.C. 29526 • (843) 347-3010 • www.hcdsn.org

Each issue of Prime Times will feature an outstanding local agency, business or organization serving older adults and retirees on the Grand Strand to illustrate the range of services available in the area. If you would like to nominate a facility for this feature – or if you are involved in an organization that would like to be featured – we want to hear from you!

Horry County Disabilities and Special Needs (HCDSN) is a non-profit organization established to provide and coordinate services for persons with Mental Retardation Related Disabilities, Autism, and Head and Spinal Cord Injuries. Individuals who receive services have met eligibility requirements defined by the State of South Carolina Department of Disabilities and Special Needs and reside in Horry County.

HCDSN offices are staffed with 150 employees striving to make life less challenging for the 800 families in Horry County currently being served by our agency. There are many more families wanting to avail themselves of our services but presently we are limited in our resources to provide these services.

OUR MISSION is to provide services and support to individuals with Mental Retardation, Head and Spinal Cord Injuries and Autism, utilizing a person-centered approach to achieve their goals in partnerships with the community and families.

OUR VISION is to be the leader and innovator in empowering choice, providing access to services and ensuring safety for individuals with disabilities.

HCDSN offers day services, residential services, family support services and the Head and Spinal Cord Injury (HASCI) Initiative.

Day Services are to enhance the opportunity of employment possibilities. There are adult development centers in Conway and Loris and in these centers, individuals work in a variety of environments from a supervised sheltered workshop where they learn basic work and self-help skills, to community-based work in a supervised group setting. All training is geared to maximize the potential for achievement, independent living and possible competitive employment.

The Job Development Program is designed to place individuals into competitive employment. A job developer plans and secures a job placement then works with the individual to ensure that he/she is successful. As the person gains skill and confidence the job developer supervision decreases.

In Rehabilitation and Supports the intent is to develop within the person a better ability for independence, self direction and participation in community activities. Supports include methods intended to develop or restore functional abilities, personal identity, responsibility and self direction.

HCDSN Residential Services are offered in different type settings determined by the needs of each individual. There are two intermediate care homes, six residential homes and two more residential care homes waiting to be built. Eight men or women live in the four bedroom intermediate care homes where the emphasis is on training and skill development in daily skills and social behavior as the first step toward other, more independent residential options. Nursing service is available for any medication or health concerns.

There are two levels of residential private family homes; in the first, one or two individuals receive training, guidance and services while living in a caring, protective, family environment. In the second, four men or women live together in a family type environment where caregivers are available around the clock. These men or women receive the training to help them take a greater responsibility for their own care and home.

HCDSN Service Coordination assists new families and individuals in determining the eligibility of the individual for services. Once approved, the service coordinator assists in identifying the person’s needs through a Person Centered Planning process, working with the family in identifying the appropriate supports. The least restrictive principles and individual choice are in the forefront of this process.

Early intervention services are for children up to three years old who are developmentally delayed. Individualized Family Service Plans are developed for support services, family training and linking with other agencies for maximizing opportunities for skill development at this critical age.

Respite Care is a short-term relief support offered to eligible participants and their families. For example, the Jones family needs to be out of town and away from their child with special needs but what do they do with Susan? A highly trained HCDSN staff person can stay with Susan and allow the family to travel or attend to their business knowing that Susan is well cared for.

Head and Spinal Cord Injury (HASCI) Initiative is a program designed to provide support to persons with a head or spinal cord injury or similar disabilities. The program offers a drop-in location with support services, vocational assessment and job development services and assisted technology outlets for persons qualifying for the program.

continued on page 9
Located on the eastern end of Little River Neck on property currently known as Tilghman Point are the remains of a Confederate battery/fort built during the War Between the States by the Confederate government. The Confederate battery, or fort, as it came to be called, served a dual purpose of protecting the village of Little River and the surrounding countryside from invasion and of providing a safe haven for blockade runners. As the Union’s naval blockade was tightened around Charleston, S.C., and Wilmington, N.C., Little River Inlet served as an alternative port for the blockade runners which were bringing in valuable supplies for the besieged Confederacy.

Fort Randall was in existence by March, 1861, for at that time Capt. Thomas West Daggett, who was in command of the Waccamaw Light Artillery, was trying to lodge his men in Fort Randall and in Fort Ward. Capt. Daggett, a native of Massachusetts, was an engineer who had moved to South Carolina. He used his skills to build and operate rice mills on the Waccamaw Neck. When war broke out, he joined the Confederate forces and was put in charge of the coastal defenses from Winyah Bay to Little River Inlet. Like Battery White, which is located on Belle Isle on Winyah Bay just outside of Georgetown, Battery Randall used earthen works for fortification. Records indicate that the battery consisted of an approximately 10 feet broad by 5 feet deep ditch with parapet and a blockhouse pierced so that the defenders might fire without being exposed. Capt. Daggett armed Fort Randall with two six-pounder cannons and inquired about whether he should also add the 12-pounders which were in the mill yard at Laurel Hill Plantation. In addition to the blockhouse he also built a magazine in which to store ammunition and arms.

The fort received its name from Capt. Thomas Randall who owned the plantation on which the battery was built. Randall, also a native of Massachusetts, was born in Rochester on Nov. 25, 1791. He became a large landowner in the community and owned 85 slaves in 1860. He is buried at Cedar Creek Cemetery. The Randall plantation home was located several hundred feet from the fort.

A report in the Official Records of the Union and Confederate Navies tells us of how Lt. William Barker Cushing, USN, attempted to capture some harbor pilots at Little River. This venture resulted in an attack on Fort Randall. On Jan. 8, 1863, Lt. Cushing reported on his failed venture to capture the pilots and of his encounter with Confederate forces at Fort Randall. He stated, “About a mile from the mouth the enemy gave us a volley of musketry from a bluff on the left. I beached the boats at once, formed my men about 200 yards from the enemy’s position, and gave the order, “forward; double quick; charge.” Without firing a musket the men moved forward, and when we got clear of the woods I saw a fort in front and the light of the camp fires. Knowing that the rebels were ignorant of our numbers, I charged with the bayonet and captured their works, going over one side as they escaped over the other. I found the fort an earthwork, surrounded by a ditch about 10 feet broad by 5 deep. Inside was a blockhouse pierced for musketry. No guns were mounted. I learn that it was held by one company of infantry. The enemy left in such haste that their stores, clothing, ammunition, and a portion of their arms were captured. I destroyed all that I could not bring away. I went a short distance farther up the river; had another skirmish; did not see the schooners; got out of ammunition and returned with the loss of but one man shot in the leg.”

Apparently, the cannons that had been mounted in 1861 had later been relocated to more strategic locations as the war worsened as per General Lee’s plan for coastal defense. This move left Little River without the benefit of the protection of heavy artillery.

In 2007, all that remains of Fort Randall is a clearly defined footprint of the fortification. The site has been respected and well preserved although a portion of the earthen works has begun to erode. The site still commands a spectacular view of Little River Inlet as it meets the Atlantic Ocean.

Burroughs can be reached at bburroughs@coastal.edu or (843) 349-2120.
I recently sat down with Diane Dale, president of Dale Publishing. Diane owns South Carolina Woman magazine, Transitions News magazine and Parent News. We met for her interview in the office that she shares with her husband. Several calendars help her keep up with appointments both personal and professional. Pictures of all her grandchildren make her smile throughout the day when she’s in the office. Most of her office time is early morning or late in the evening. Catching her here during the day is a rare thing. She shared with me the poem that she reads every morning before getting started with her day. Donna Tyson who writes each month for South Carolina Woman magazine used this once in her column and this had a profound effect on Diane.

“The Woman in the Glass”
When you get what you want in your struggle for gain
and the world makes you queen for a day,
just go to the mirror and look at yourself
and see what that woman has to say.
It isn’t your father or mother or husband
whose judgement upon you must pass.
The one whose verdict counts most in your life,
is the one staring back in the glass.
She’s the one you must satisfy beyond all the rest
for she’s with you right up to the end.
And you have passed your most difficult test,
if the woman in the glass is your friend.

You might fool the whole world down the pathway of years
and get pats on the back as you pass,
but your final reward will be heartache and tears
if you’ve cheated the woman in the glass.

Also in her office are many different types and pictures of pink ribbons. Pink ribbons symbolize breast cancer and this is something that Diane knows about first hand. She proudly announces that she’s a six year cancer survivor – six years and four months to be exact. I asked Diane about her bout with breast cancer and how she dealt with the diagnosis and treatments.

Elizabeth: What was your first reaction to the diagnosis of breast cancer?
Diane: I was very shocked, to say the least. I had just turned 45, had been in good health, with no family history of breast cancer. You’re never prepared to hear the words “You have cancer.” After you’re told, and most of the time, while you’re still in the hospital, you have to undergo additional tests to see if, and or how far it has spread. So pretty much you’re not only hit with the fact you have cancer, you also have to wait and see what other tests will show. It’s pretty frightening!

Elizabeth: I understand you had a lumpectomy and six months of chemo, followed by seven weeks of radiation. I also have heard that you got along extremely well during your chemo. Why do you think you did?
Diane: I think having a positive attitude helped tremendously. Now that’s not to say I didn’t have some down days. There were days that I threw up, I had no energy, I lost my hair, but I did not lose my sense of humor and cancer didn’t take away my spirit. Having a good support system of family and friends helped so much. My faith was also a big part of how I got along during treatment. A good friend of mine told me right after I was diagnosed that “God is stronger than any diagnosis.” I have found this to be true and I have held on to that statement many, many times over the years. I’ve tried to pass this along to others that have been diagnosed with cancer. I also did a lot of praying, always have and always will. I read numerous daily devotional books, and I did lots of guided imaging.

Elizabeth: What is imaging?
Diane: Well, I don’t know if that is the proper term but it’s what I call it. I would close my eyes and “see” the cancer being destroyed. I would “see” my blood counts where they needed to be in order to receive more treatments, I would “see” myself healthy and well, I would “see” the doctor telling me I was cancer free. I tried to do the old mind over matter. I didn’t want my mind to “see” me sick I wanted it to “see” me well.

Elizabeth: After your treatments were finished you started South Carolina Woman magazine. Why did you take on more work when you already had Transitions News magazine?
Diane: There was not a woman’s publication here at the time. I had a vision of what I wanted a woman’s magazine to be. I wanted it to educate, to entertain, but most of all to empower women to be the best they can be. And my readers tell me that it does all those things, so that’s what I consider success!

Elizabeth: Any closing words?
Diane: I just want to say how blessed I’ve been in my life. I have a great family, supportive friends, and a career and business that I love. I’m thankful for everything good and bad in my life. It’s made me the woman that I am today!
My Grandfather, Horace Tilghman, Sr.

As mentioned in my earlier articles on memoir writing, one way we can know our ancestors and have a glimpse into their characters is from the stories that are passed down about them, especially from those who loved them. That’s one of the ways that I’ve been able to feel I knew my grandfather Horace, who died of a heart attack when my mother was 18, long before I was born. I feel that I know him from all these stories remembered and told to me by my mother who loved her father dearly.

My grandfather Horace was a very talented, shrewd and successful businessman in his lumber mill business in Sellers, S.C., with his brother Charles Tilghman Sr. In a previous story, I shared how he enjoyed buying up thousands of acres of coastal property (some with his brother Charles and some on his own) partly just out of a love of the beauty of the land and the hobby of piecing it together into larger unbroken tracts of land. Charles Tilghman died tragically at age 42, when his five-year-old son was innocently playing with a loaded shotgun. From all accounts, my grandfather Horace was a generous man. After his brother’s death he continued to pay his widow his full salary (although his family would have had no way of knowing that he was going to die). Horace had known that they were shutting their doors the next day, and he had acted like a responsible bank trustee of integrity and left his own savings in the bank while insisting that Ellen, an African-American woman, who worked for their family, was protected. He knew that he could afford to lose his savings, and she could not.

My grandfather also had a highly developed intuitive sense like probably a lot of successful businessmen have. Another story shows how important even the role that dreams played for our ancestors can be in stories. He always had a routine of going to the bank in Marion on payday for his workers in the lumber mill and then driving to nearby Sellers, where the lumber mill was, to pay his workers (most likely in cash in those days). One time, the night before, he dreamed that a man stood out in the middle of the road and held him up. The next day when he was driving to Sellers with his bank withdrawal for the payroll, a man stood out in the middle of the road to hold him up just like in his dream. He without hesitation made a U-turn in the road and turned around and made his way back to Marion. Without the prophetic dream, he might not have acted in time to prevent his being held up in the middle of the not so frequently traveled road in a time when cars were not as speedy or easy to tightly lock up as these days.

My grandfather was apparently not happy with the election of Roosevelt to office; he believed that he would recklessly spend all the government’s money, which in his mind would not bode well for the economy. As a result of this, my grandfather decided to spend as much of his own money as he could, himself, before Roosevelt spent it. As a result, he took his family on a cruise around the Panama Canal and also on a trip out West. They traveled in tandem with another family with their car: security for road travel in an era in the thirties before AAA and so many highways or much traffic. Their postcards from that era are a nice memento for us from their travels to Yellowstone Park with Old Faithful Geyser and other points of interest and their stays in many grand hotels along the way.

There’s another story that shows his intuition and his sharp financial acumen at work. While he was still alive, he chose to divide his estate equally between his wife, his daughter (my mother), and his son, this way avoiding estate taxes. Since he died of a heart attack, he had no way of knowing that he was going to
can work with our educational leaders, economic development centers and policy makers in developing and marketing a skilled labor force to potential employers. If you would like to participate in the pilot project to test the readability and general usability of the survey, please provide the Center with your e-mail address, mailing address and telephone number.

Attn.: Yes! Add me to the Pilot Group for Workforce Survey Center for Active Aging and Retirement Coastal Carolina University P.O. Box 261954 Conway, SC 29528-6054 Call Kathy Caulfield at (843) 349-6531 or e-mail: kcaulfie@coastal.edu

Navigating and Financing Long-term Care Training Grant

As many of you know from experience, care-giving and the way we provide care in this country has changed tremendously over the last few years. We hear cases on a regular basis about families struggling to care for an aging parent, spouse or other family member. While it may be a gift of love to care for others, unfortunately, many exhaust their financial resources caring for aging relatives. Some exhaust their own pensions and children's college funds to help ensure that mom and dad stay out of nursing homes. There are no easy solutions to financing long-term care, but there are options that can help families navigate the system and stay financially solvent.

In an effort to assist families in planning for long-term care for their loved ones, the Center for Active Aging and Retirement is developing training modules on the financial aspects of long-term care. We will be providing training in the Trident, Santee-Lynches and Pee Dee regions as well as across the state for concerned families and professionals.

Reagan Callahan, RN, BSN, CCM, GCM, director of Elder Advocates, will serve as the project director. You may recall from our last Prime Times that Reagan was featured in our Spotlight section and she had an article, “Enhancing the Gift of Independence,” published in the paper. Welcome Reagan! This project is being made available in part by a $9,000 grant from the Lt. Governor's Office on Aging. If you would like more information about this new project please call our office.

Welcome Kristen Anne Habesland, CAAR Intern

We are delighted to have Kristen Anne Habesland interning this spring with the Center for Active Aging and Retirement. Originally from Mount Hope, N.Y., she is a full-time student in psychology and plans to graduate this May. She will complete her gerontology certificate this summer and she is interested in working in Hospice and crises and end of life counseling. We are so pleased to have her working with us this semester. Please help me welcome her to the Center.

CCU Hosted Living with Grief Webcast with Mercy Hospice

On March 22, 2007 the Center for Active Aging and Retirement and Mercy Hospice hosted a Webcast training conference at CCU for the public and professionals. The conference explored different perspectives on loss and grief as experienced by persons throughout life-limiting illnesses and by survivors after the death.

CCU will be offering CEUs for professional groups interested in receiving this training and for those who might not have been able to attend the webcast. Professionals in social work, nursing, clergy, case management, funeral directors, art therapists, counselors and others are encouraged to contact the Center for Active Aging and Retirement for this customized training. Just contact our office to discuss details and to schedule a time.

Smart Home Model Project Underway

The Center for Active Aging and Retirement has initiated efforts with the business community to develop a model smart home as part of the university. What is a smart home? By most definitions, it is a home that is designed and automated to help people remain independent as long as possible within their homes. Every age group would benefit from the new design features and other technological advances provided within the home.

One of the most exciting aspects of the smart home is that it enables the resident to be connected with family caregivers who may be at work – or who live elsewhere. Additionally, the home can provide updates to residents’ doctors and other healthcare providers, thus possibly extending their independence, quality of life, and relieves the concerns of others who traditionally would be responsible for most of the care-giving.
Spotlight on ... Horry County Disabilities and Special Needs . . . . . . . Continued from page 6

HCDSN also provides services to the public like laundry and ironing, grass cutting, cleaning homes and offices and providing reliable workers for other tasks. Call HCDSN for information.

HCDSN receives funding from state, federal and local governments. Additional help is received from the United Way, private contributions and the emerging Waccamaw Regional Foundation for Disabilities and Special Needs.

However, there is serious need of expansion to enable HCDSN to fulfill our mission. Especially for the over-utilized Victory Lane Adult Development Center. There is no room for accepting new individuals into the Day Program and there is a waiting list for this and other services. The Waccamaw Regional Foundation (our fund raising arm) has raised more than $275,000; however, this is not enough to respond to the exploding growth in Horry County for the services HCDSN provides. There are giving options to help the nonprofit HCDSN. To learn more, please contact Diane Buffkin Creel at the HASCi Center at 1021 Third Avenue, Conway, SC 29526 or call her at (843) 488-1309, extension 102. §

We want to hear from YOU!

If you have comments or questions about articles in this issue, want to submit a Letter to the Editor, ask a question or make a comment, or if you would like to suggest appropriate subjects for consideration in future issues of PrimeTimes, the PrimeTimes staff wants to hear from you. Previous PrimeTimes newsletters are available on our Web site: www.coastal.edu/caar. If you want to be added to the PrimeTimes mailing list, just call, fax or write to let us know.

Writing into Remembering . . . . . . . Continued from page 5

die within a year. My mother related the story of their being called in before a judge after he died to testify that he did not know he was going to die when he divided his estate between his heirs. My mother's story was that they almost lost the case because she, in her usual light-hearted, humorous way told the judge that he was always “dying . . . laughing.”

Because my grandfather had divided his estate equally between his wife and his two children, including my mother, my parents had the unusual situation after they were newly married and trying to live frugally on my father's salary, of my grandmother buying things unsolicited by them and then delivering the bill to them. This included everything from brand name clothes for my mother's wardrobe from stores in New York City, where my grandmother liked to shop, to their first Ford station wagon. My parents probably overdid their frugality, thinking in those days, that in a good marriage, they should live on the husband's income only, so it was probably good that my grandmother sometimes over stepped her boundaries with them in this way.

My mother dearly loved her father and perhaps learned some of her generosity, wisdom, humor, humility, and love and respect for people from him. I know that one of his generous, annual events was to invite all of the children from the York Children's Place, an Episcopal orphanage, to the family place on the coast for a recreational, adventurous outing. My mother later joined the Episcopal church, her father's church, to balance out her brother joining the Methodist church, their mother's church. It's hard for us to believe it these days that a married couple of two Protestant denominations wouldn’t just compromise and join the same church, but my mother talked about how she and her brother would have to attend Sunday school at the Methodist church in Marion and then run uptown a few blocks away to the church service at the Episcopal church to keep both parents happy.

My mother was only 18 when her father died since her parents had a late-life marriage. The fact that her father was such a deeply, important part of her life in the 18 years she knew him has always left me with a strong impression of him. From my mother and her character (part of his legacy) and the stories, I've received a sense of the wisdom, far sightedness, and deep caring for people that were part of my grandfather's character, while the beautiful, undeveloped coastal lands that were passed on through the family from him have been the testimony to his sharp business acumen. §
“Sounds good,” my wife said. “But I don’t want the eggs.”

“Then I’ll have to charge you two dollars and forty nine cents because you’re ordering a la carte,” the waitress warned her.

“You mean I’d have to pay for not taking the eggs?” my wife asked incredulously.

“Yes!”

“I’ll take the special.”

“How do you want your eggs?”

“Raw and in the shell,” my wife replied.

She took the two eggs home.

DON’T MESS WITH AN OLDER ADULT...WE’VE BEEN AROUND AND LEARNED A FEW THINGS!