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AARP Bulletin

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GAMBLING WITH YOUR FUTURE

WHY SOME OLDER AMERICANS ARE LOSING THEIR RETIREMENT SAVINGS TO ONLINE GAMING

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PLUS
>SPOT HOW THEY TRY TO HOOK YOU!
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ASK DR. ADAM
OUCH! WHY DO MY LEGS CRAMP?
CAUSES, PREVENTION AND FAST RELIEF

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70–74	33	137	361

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Issue Age	**$10,000**	**$50,000**	**$150,000**
45–49	$12	$32	$72
50–54	13	40	93
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60–64	23	89	219
65–69	30	124	310
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$25,000

Amount the average American homeowner spends annually on home expenses

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At a diverging diamond interchange

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"Poetry speaks to the heart in a way that I don't know that anything else does for me."

— Ellen Burstyn, 93

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In online gambling, sometimes a loss can feel like a win.

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SERVICE HIGHLIGHT

AARP Seeks Your Input

Tell us what public policies AARP should pursue to improve the lives of people as they age. Your ideas can help guide AARP's advocacy across the country. Send your thoughts to policy@aarp.org by July 1.

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▶Disaster preparedness. May 20 at 7:30 p.m. ET.

▶Social Security. June 17 at 7:30 p.m. ET.

Both episodes are broadcast on RFD-TV. Or stream them live at aarp.org/aarplive or watch later on demand.

Author Talk
Historical fiction author Kate Quinn will discuss her new bestseller *The Astral Library* in a free virtual event with *The Girlfriend From AARP*. Go to facebook.com/thegirlfriendletter on June 16 at 7:30 p.m. ET.



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WHAT MOVES VOTERS?

Social Security, caregiving and the economy are vital issues for older Americans

BY **CHRIS ADAMS**

Greg Howell turned 18 just in time. He was a freshman at East Carolina University, and his birthday had been on Oct. 20, 1972. Eighteen days later, he voted in the presidential election of 1972—the first time 18-year-olds across the country could do so. And he's been casting his vote ever since. Today, his is a steadfast voice in the most loyal and consistent voting bloc in the country: those age 65 and over. As the nation moves to yet another vital election, older voters will play a disproportionate role, ensuring that Social Security, Medicare, caregiving and other issues of importance to them will be front and center.

"Our generation has always been pretty good about making our priorities known on the issues that affect us," says Howell, 71, who lives near Asheville, North Carolina.

In every national election since 2002—when citizen voting data by age became available—those 65 and older have cast ballots at higher rates than their younger counterparts. In fact, in 2024, their voting rates inched up very slightly from the previous presidential election, while those of other groups dropped, according to survey data from the U.S. Census Bureau. For midterm elections like this year's, the gap between older voters and younger ones is even bigger. In 2022, the difference was a yawning gap—66.8 percent of citizens 65-plus voted, compared with 27.6 percent of those 18 to 24.

The larger size of the over-50 demographic, coupled with its higher voting rates, means the group plays a major role in shaping the direction of the country.

AARP will help keep that voting bloc well informed. While the organization is nonpartisan and doesn't endorse candidates or contribute money to campaigns, it has a presence in every state to make sure candidates address issues of importance to those age 50-plus. This year, that means Social Security, family caregiving and health care, among other topics. "Our job is to bring these issues to the attention of the candidates and to bring what candidates say to the attention of our members," says Nancy LeaMond, AARP executive vice president and chief advocacy and engagement officer.

'THE ECONOMY DRIVES EVERYTHING'

So what's on the minds of older voters?

Asked to name the "biggest issue facing the country today," voters in a December 2025 AARP poll pointed to "cost of living." Related issues such as health care, taxes, jobs and Social Security and Medicare also registered as concerning. Older voters were actually less pessimistic on the economy than younger ones—but it still ranked as their top concern.

Asked whether they felt more or less financially secure than they had a year earlier, more people in every age group reported feeling "much less" or "somewhat less" secure than the number who felt "much more" or "somewhat more" secure. Among those 65-plus, the results in the AARP poll were 39 percent less secure, 26 percent more.

Not just pocketbooks are at play in this election, of course. "Threats to democracy," "political division" and "immigration" were top issues for both old and young, and older voters gave greater weight to those concerns than younger ones. Still, "the economy drives everything," says John Hishta, AARP senior vice president of campaigns. From the cost of groceries to utilities, housing and prescription drugs, paying bills is a major concern.

"People don't think that they're doing well right now, for the most part," Hishta adds.

For Lillian Lee, 75, a retired elementary school principal and AARP volunteer, such feelings help motivate her political participation. "I know I'll never be a billionaire, but I do want to make sure that I am comfortable—that I don't have to worry about having enough money to pay the bills or buy groceries," says the Raleigh, North Carolina, resident. ■

***Chris Adams** is AARP's state news editor.*

SOCIAL SECURITY CHIEF: 'WE ARE WORKING TO SERVE YOU FASTER'

BY **BILL WALSH**

Since taking office in May 2025, Frank Bisignano, commissioner of the Social Security Administration (SSA), has vowed to put the agency on a "digital-first" footing that shifts more of its business online while preserving customers' access to services by phone or in person.

In an interview at AARP's national office in Washington, D.C., in February, he promised to do that while "100 percent" keeping the agency's 1,200-plus local offices open.

"It's really about being a digital-first agency but meeting clients where they want to be met," said Bisignano, who also addressed the SSA's efforts to reduce fraud and the disability claims backlog.

Bisignano said phone wait times have already been cut significantly, as have wait times for in-person appointments at field offices.

As for the future of those field offices: "We can't foresee closing a field office. It's a place where people go," he said. "We have a very large obligation to be available all the time for the American public."

Go to **aarp.org/bisignano** to listen to the full interview.

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Your AARP
Where We Stand

BY DR. MYECHIA MINTER-JORDAN, CEO, AARP

THESE TECH COURSES COULD IMPROVE YOUR LIFE

AARP is helping open doors to digital access and capabilities

Two women meet in an online class about Instagram. A few months later, they are launching a podcast together. Debbie Troche, 69, and Yuko Yamamoto, 64, became acquainted through a Senior Planet from AARP class. They learned how to use graphic design and video editing tools. Then they built something of their own: *New York State of Minds,* a YouTube podcast that challenges outdated assumptions about aging.

They did not wait for permission. They learned skills, then created something meaningful. And they are not alone.

Each year, nearly 800,000 people discover new possibilities through Senior Planet from AARP, a digital community that empowers older adults to build technology skills, offering courses on everything from cloud storage to artificial intelligence. Stories like theirs challenge a persistent myth about technology: that older adults are reluctant to embrace it.

Across the country, older people are using technology to strengthen friendships, manage our health, grow careers and launch businesses. Seventy-three percent of adults 50-plus say technology makes life easier, and last year we spent $756 per person on personal devices.

A recent AARP-LinkedIn study shows adults 50-plus are rapidly expanding their tech skills in the workplace, particularly in artificial intelligence, where their rate of growth is outpacing that of younger employees.

Sometimes these new skills help people stay competitive in the careers they love. And sometimes they inspire people to create new opportunities. Jacquelyn Thomas, 63, never imagined she'd start a technology nonprofit. Yet she founded Kids N Technology to equip underserved young people with STEM skills. What began as a passion for learning evolved into a mission to help the next generation.

Michael Rosedale, 71, saw one of those needs while advising clients as a CPA. Many had complicated questions about Social Security but few answers. So he cofounded the National Association of Registered Social Security Analysts (RSSA), a technology and training service that helps people understand Social Security options.

Today RSSA is part of the AgeTech Collaborative from AARP, a global ecosystem of start-ups, investors and companies working to accelerate technology that improves how we age.

AARP launched the collaborative because even as adults 50-plus embrace technology, 60 percent say much of it still is not designed with them in mind. Closing that design gap represents both a challenge and an opportunity for innovation.

At AARP, we believe technology should help people live healthier, better and more connected lives. That is why we work to ensure stories like Debbie's, Yuko's, Jacquelyn's and Michael's become the norm.

We advocate to expand broadband access and work with entrepreneurs through the AgeTech Collaborative to ensure technology reflects the needs of adults 50-plus.

So follow your curiosity wherever it leads. When more people feel confident stepping into the digital world, the future becomes richer for all of us. ■

SENIOR PLANET
Go to seniorplanet.org to learn more about Senior Planet from AARP. And visit aarp.org/tech to read the latest on technology news for older Americans.

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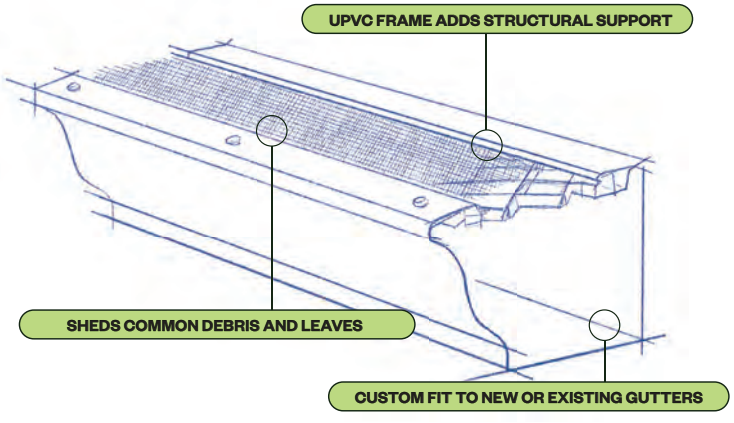




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BEATEN BY THE ODDS

With new forms of gambling booming in America, some retirees are going bust

BY JOHN ROSENGREN

ILLUSTRATIONS BY PETE RYAN



Jack F. had played the slots on trips to Atlantic City with his wife for years but never had a problem gambling—until he tried it online.

"I didn't get into it at the casinos," says Jack, 81, who asked that his full name not be used because he is in a recovery program for problem gamblers that stresses anonymity. "Then I discovered the iPhone. How wonderful the iPhone is! You can sit in your living room or bathroom and gamble away."

That was only a few years ago. Jack was happily retired from his job as a battalion chief with the Jersey City Fire Department. He lived in Clark, New Jersey, with his wife, a retired hairdresser. Their 56-year-old daughter lived downstairs in a basement apartment. They had three other adult kids and seven grandkids. Their house was paid off. His pension, her Social Security and their savings easily covered their monthly bills. Life was good, comfortable.

That all changed when, out of boredom, he started gambling on his phone at night. After his wife and daughter had gone to bed, he'd sit by himself in his recliner in the family room and play Wheel of Fortune, Monopoly and slots on the Borgata Casino app he'd downloaded. Soon he was doing that five nights a week, the hours slipping by two or three at a time—staying up sometimes as late as 2 in the morning—and racking up losses of as much as $5,000 a night. It was far more than he could afford on their fixed budget. "I can't believe I did what I did, how late in my life I got into this," he says. "It happened so quickly. It's just so easy to get hooked."

More than **75 MILLION** Americans—*1 in 5*—have an account with an online sports betting service

A COURT RULING FUELS AN INDUSTRY

In the wake of the 2018 U.S. Supreme Court decision that opened the door for legalized sports betting, a lot of media has focused on young men getting hooked on internet gambling. But very little attention has been paid to the ways older Americans are vulnerable to developing online gambling problems. The user-friendliness of apps that transform computers, tablets and smartphones into portable casinos, combined with the opportunity to play continuously, has almost doubled the amount Americans have wagered over the past five years. That has driven the rise in gambling problems nationwide, notably in people age 50 and older.

"You can make the argument that the generation that is most susceptible for developing gambling as a problematic behavior are boomers," said Don Feeney, research and planning director for the Minnesota state lottery, in the Nebraska Public Media documentary *Growing Old Gambling*. "When I started looking at the risk factors for gambling addiction, they seemed to me to be concentrated in boomers: isolation, the sense of guilt, stigma, forbidden fruit."

Deceptive features in game design, custom-tailored marketing and seemingly ubiquitous advertising are inducing people to gamble longer and lose more money than they intended. "Often older people who develop gambling problems have been fine gambling recreationally most of their lives, but as we get older, we're subject to more stressors related to health, we start to lose loved ones," says Ted Hartwell, former director of storytelling at the Nevada Council on Problem Gambling. "That can lead to behavior like gambling becoming a way of escape, to numb some of that physical or emotional pain."

Indeed, experts say online gambling operators view people over 65 as a desirable market and target them with their advertisements and promotions. "They go after the seniors," says Gary Schneider, 71, a recovering gambling addict. "Online casinos know exactly who they're talking to. A senior that's lonely gets a call from a concierge and has someone to talk to. It's a con game."

The consequences can be devastating for those who are retired, on fixed incomes and with no means to recoup losses once their savings accounts are wiped out. And there are worrisome signs the problem is growing. The Connecticut Council on Problem Gambling reports that 1 in 9 of the organization's helpline calls come from someone age 55 or older. In Nevada the number is even higher; of callers seeking direct assistance from the state's helpline, 1 in 3 are 50 or older. At the Dr. Robert Hunter International Problem Gambling Center in Las Vegas, the oldest in

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the country and one of the largest, approximately 35 to 40 percent of the clients are over 50 years of age. Even these numbers may not represent the full extent of the problem because, as noted in the journal *Frontiers in Psychiatry*, "very few older people with a gambling disorder will seek access to specific treatment programs."

A SHOCKING CHARGE

The recent arrest of Karl Jacobson, 56, the former police chief of New Haven, Connecticut, illustrates the potential harm of problem gambling. Jacobson was charged with stealing more than $80,000 from police accounts to cover losses from gambling on the sports betting apps DraftKings and FanDuel. Jacobson initially won substantial amounts on his bets, according to court documents. But he wagered $4.46 million and eventually incurred a net loss of $214,365. In late February, he was charged with embezzling to cover his gambling expenses. "I have a problem," he told investigators, according to a state police affidavit. "I turned to gambling."

> **"I have a problem," said police chief Karl Jacobson, who was charged with embezzling funds to pay for online gaming. "I turned to gambling."**

In an interview, Jacobson's attorney Gregory Cerritelli stressed that his client had not yet been convicted of any crime but called phone-based gambling "dangerous," adding, "For people who struggle with a gambling addiction, it's like an alcoholic having a bottle of scotch in their hand and trying not to drink." Cerritelli says his client's story "is a cautionary tale: This can happen to any one of us."

Since the 2018 Supreme Court ruling, 32 states and the District of Columbia have allowed online sports betting on everything from the Super Bowl to Ping-Pong.

Many people also gamble in online casinos. Right now, they can do that legally in only seven states (Connecticut, Delaware, Michigan, New Jersey, Pennsylvania, Rhode Island and West Virginia), but online casino gambling is widespread throughout the country, with illegal sites advertising openly and allowing access from anywhere. When asked if people in Minnesota—where online casino gambling is not legal—were gambling online, Susan Sheridan Tucker, executive director of the Minnesota Alliance on Problem Gambling, said, "It doesn't matter whether the sites are illegal or not. People are still gambling online. If we're interested in reducing gambling harms, all types of gambling must be regulated."

According to a 2025 study of online casino advertising trends published by the American Gaming Association, offshore and sweepstakes operators such as Chumba Casino, Pulsz.com and McLuck are focusing their

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They Won't Let You Quit

FEEL COMPELLED TO CONTINUE PLAYING DIGITAL GAMBLING GAMES? THAT'S NO ACCIDENT

Online gambling operators collect troves of data on customers that allow them to precision-target their marketing and promotions. And when activity lags, they can use that data to lure players back.

"They don't want you to quit," says Richard Daynard, law professor and president of the Public Health Advocacy Institute at Northeastern University School of Law. "If they see you lagging, they will make an offer to pull you back. They know exactly what your profile is and how to get you to place the next bet." Sometimes those offers come from a personal host assigned to VIP gamblers. Hosts are trained to spot addictive patterns and tendencies in players' gambling, ostensibly to help them take a break or quit if they need to, but that training and the data collected can also be used against a customer's best interests, Daynard says.

"It's a competitive market, right?" says Jonathan Krutz, president of the Stop Predatory Gambling board. "So if I have a customer who's exhibiting signs of addictive gambling, and I asked that customer to gamble less, then I'm going to lose that customer to the outfit sending them extra bonuses and encouraging them to bet more. I can't afford to do that."

Kavita Fischer, a Pennsylvania psychiatrist who became addicted to gambling, claimed that's what happened to her. In 2025 she sued DraftKings, saying in court documents that the company's VIP host "actively and intentionally targeted and preyed on Plaintiff with incentives, credits, and gifts" to keep her gambling.

When Fischer asked DraftKings for a loan because she was unable to pay her mortgage, according to her complaint, the DraftKings host sent her an email asking if she was "playing within [her] means/budget" and saying they "never want someone to be playing outside their comfort zone." Then the company sent a half dozen emails that week, "all containing enticements to continue" her gambling, says her lawsuit.

The host had also instructed Fischer on when she could change her self-imposed $40,000 monthly deposit limit, given her complimentary tickets to NFL and NHL games, and provided credits to continue betting, says her suit. Fischer gambled away more than $150,000 during the time period cited in her complaint. Matthew Litt, Fischer's attorney, declined to comment on the lawsuit. DraftKings and Fischer reportedly settled the suit.

"We have designed our rewards program to recognize and reward loyal players in ways that enhance their experiences," a DraftKings spokesman says. "Loyalty programs are common practice in sectors like entertainment, retail, airlines and lodging, and we believe our program is aligned with best practices across various industries."

Watchdogs are monitoring the industry's tactics. The Massachusetts Gaming Commission said that from April 2024 through July 2025, BetMGM sent promotional emails to 19 people on the state's self-exclusion list and to 25 in a "cool off" status. —*J.R.*

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advertising in states like California, Texas and Florida, which have the highest number of residents age 65 and older.

Over 75 million Americans—more than 1 in 5—now have an account with an online sports betting service, and most of them use an app on their smartphone to place their bets, according to a 2025 national survey by researchers at Siena College Research Institute and St. Bonaventure University. Much of the $700 billion placed in bets last year was wagered online, and not just on sports. Online and app-based casino and sports betting products are the fastest-growing sectors in the gambling industry worldwide, Polaris Market Research found.

COVID WAS A CATALYST

Online gambling became especially popular with older Americans during the COVID-19 pandemic, when lockdowns restricted trips to the casino and people were looking for ways to fill their time. A review of betting data by England's Royal College of Psychiatrists showed that online gambling during the pandemic increased more for people over 65 than it did for any other age group. A Glasgow study revealed that people approaching retirement age (those 55 to 64) had the highest rates of participating in gambling activities, but gamblers 65 and over participated more frequently; more than 50 percent of those who gambled did so weekly.

The United States lags behind Australia and Europe in its gambling research, in part because of the influence the industry has on funding and how studies are conducted in America, critics say. "There is clear evidence that research related to the effects of gambling in America has been skewed by casino interests in ways that highlight arguments for gambling expansion and suppress evidence of gambling harms, following the model of tobacco interests," says Jonathan Krutz, emeritus marketing professor at Boise State University and president of the Stop Predatory Gambling board.

But the problem is well understood by experts. The National Council on Problem Gambling estimated that the risk of gambling addiction grew by 30 percent from 2018 to 2021. One study published in *JAMA* in February 2025 reported a 23 percent nationwide

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Getting Help

WHERE TO GO IF YOU HAVE AN ONLINE GAMBLING PROBLEM

▶If you are seeking help for yourself or someone else with a gambling problem, you can call the **National Problem Gambling Helpline** (800-MY-RESET/697-3738). Calls are answered 24 hours a day, seven days a week, and are routed to the state or U.S. territory of the area code of the phone being used. There is a Spanish language option. The staff members who answer the phone provide referrals to counselors and treatment centers. The organization's website (ncpgambling.org) offers directories of gambling counselors and treatment centers, tips for selecting a treatment center, a place to sign up for motivational text messages, a self-assessment tool and other resources.

▶Another option is **Gamblers Anonymous**, which, in its own words, "is a fellowship of men and women who share their experience, strength and hope with each other that they may solve their common problem and help others to recover from a gambling problem." The 12-step program's meetings are free to attend and open to anyone with a desire to stop gambling. You can find a meeting directory and list of state hotlines at gamblersanonymous.org, the organization's website.

Treatment options include residential and intensive outpatient programs, as well as individual therapy with trained counselors. "The best success I've seen is people who've had clinical treatment and continued attendance in Gamblers Anonymous," says Marc Lefkowitz, a certified gambling counselor in Prescott, Arizona. He recommends that family members seek help through therapy or Gam-Anon (gam-anon.org), the 12-step sister program of GA for those affected by another's gambling.

NOT SURE IF YOU HAVE A PROBLEM?

The American Psychiatric Association provides the following list for those wondering if gambling has become a problem in their lives. If you've experienced at least four of these behaviors in the past 12 months, consider looking for help.

1. Frequent thoughts about gambling (such as reliving past gambling or planning future gambling)

2. A need to gamble with increasing amounts of money to achieve the desired level of excitement

3. Repeated unsuccessful efforts to control, cut back or stop gambling

4. Restlessness or irritability when trying to cut down or stop gambling

5. Gambling to escape problems, a negative mood or stress

6. After losing money while gambling, feeling the need to continue in order to "get even" (also known as chasing one's losses)

7. Lying to hide the extent of your involvement in gambling

8. Losing close relationships or important opportunities such as a job or school achievements due to gambling

9. Often gambling when feeling distressed

10. Relying on others to help with money problems caused by gambling —*J.R.*

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increase in internet searches for help with gambling problems. Since Pennsylvania legalized online casino gambling in 2017, the number one reason people cite for calling the state's gambling hotline for help is online casino games.

Jimmy C., 64, who is also in a recovery program for problem gamblers, says he is one of those who found out the hard way that online gambling can be more seductive than traditional forms of wagering. The New Jersey native is a lifelong gambler; he started betting in card games at age 12, on football games at 14 and in casinos as soon as he was old enough to frequent them. He got into financial trouble gambling as a young adult, but by working mountains of overtime at two jobs, he was able to cover his losses.

Once he started betting online, however, his compulsive gambling intensified and his troubles accelerated. He opened accounts on four different apps, betting on sports and playing slots, and wagered far beyond his means. One year he gambled more than $250,000 through a single online account. He seemed to play endlessly—driving in the car, during bathroom breaks at work, on the toilet in the middle of the night. He even set his phone on autoplay while taking a shower, losing $500. He rigged the TV monitors at one of his jobs, where he was supposed to be surveilling traffic conditions, to show four football games he had placed bets on. He blames the easy accessibility of his phone: It was always there, always available to take another bet. "As long as we're awake and breathing, a compulsive gambler usually will engage in some activity as long as they have access," he says.

23%
The increase in internet searches for help with gambling problems

The American Psychiatric Association classifies gambling addiction in its *Diagnostic and Statistical Manual of Mental Disorders* (DSM-5) as a disorder on par with substance use disorder. Indeed, gambling activates the brain's reward systems similarly to how alcohol, cocaine, opioids and other drugs do. Those who develop a gambling disorder continue to bet despite symptoms such as a preoccupation with gambling, the inability to control their betting behavior, feeling the need to chase losses and gambling to escape problems.

DEEPENING SELF-DECEPTION

When retired firefighter Jack F. downloaded the Borgata app on his phone, it asked for a credit card number, which he provided. He did not have to feed his gambling device with coins, as he once did with slot machines, or replenish a user card with purchased credits, the way it's done now in physical casinos. The app simply charged his credit card. That sometimes made it hard to track whether he was up or down, though he was usually down. In fact, he was losing more money than he realized. "Sometimes you think maybe it's not real money you're playing with because you're on the phone," he says. "You don't even realize that you're betting, and it's not really affecting you until you get your credit card bill, and you say, 'Oh, my God, what did I do?'"

Jack's credit card debt kept mounting. He hid his gambling from his wife out of shame and embarrassment over his losses. He paid down his credit card balance with another credit card. But the balance on that one mounted too. He got a third card to pay down the balance on the first two. But the debt kept mounting and the minimum payments became too much. He overdrew his bank account. He borrowed money from his credit union. He tapped into a home equity loan for $17,000. "It was craziness, trying to get the money together and conniving about where I could get it," he says. "It was always in the back of my head: *How do I get more money?* And that was the only thing I could think about, trying to find sources to pay for the gambling."

His wife, Mary Ann, found out about the loan and confronted him. He promised to stop. But within a few weeks, he was back on his iPhone, gambling late at night.

SEDUCTIVE LURES

Gambling online may carry a greater risk than gambling at a casino because of features built into the apps. Some let users make bets continuously, as often as every three seconds. That continuous action—whether it's placing a bet on if a pitcher will throw a strike or simply pushing a button—does not allow for a reflective pause, when a gambler might realize it's time to take a break, and is known to induce riskier behavior more likely to lead to gambling problems. Some apps have an automatic betting feature, where "you can tell it to continually gamble for you," says Krutz. "So you hit the button once and then it bets over and over and over and over and over again, and you just watch.... You may be sucked into that, and you may empty your account

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62	$31.45	$22.90	$61.90	$44.80	$92.35	$66.70	$153.25	$110.50
63	$32.50	$23.70	$64.00	$46.40	$95.50	$69.10	$158.50	$114.50
64	$33.50	$24.55	$66.00	$48.10	$98.50	$71.65	$163.50	$118.75
65	$34.75	$25.50	$68.50	$50.00	$102.25	$74.50	$169.75	$123.50
66	$35.90	$26.35	$70.80	$51.70	$105.70	$77.05	$175.50	$127.75
67	$37.05	$27.25	$73.10	$53.50	$109.15	$79.75	$181.25	$132.25
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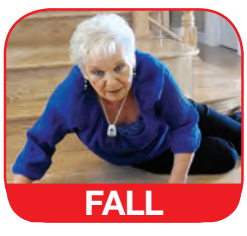
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very quickly. We're talking $1,200 an hour [making a $1 bet every three seconds], and you can do it for 24 hours a day, seven days a week."

Using a credit card can be especially risky because it allows people to gamble with money they may not have. But any form of digital expenditure seems to carry greater risk than using actual money. "Many report being surprised by how much they bet when they look at their betting statements later on," says Nerilee Hing, a research professor of gambling studies at Central Queensland University in Australia. "It's very easy to lose track of expenditures. You can't see your physical cash dwindle away, your wallet empty or yourself having to withdraw more cash from an ATM. You just keep tapping away on your phone."

Gambling apps, just like electronic gaming machines (or slots) found in brick-and-mortar casinos, are designed to maximize the time someone is playing and, in turn, maximize the amount the person is betting. That ultimately maximizes the amount the person is losing because, given the odds, the longer someone plays, the greater the probability they lose.

There are elements of the apps' design that can deceive and manipulate users. These include near misses. Say you're playing a game with three spinning reels and the first and second show a cherry on the winning line, but the third shows a cherry just above the winning line. That's a near miss. Though this is all virtual, it appears you almost won, and neurological research has shown such near misses trigger the same response in the brain as a win. Losses disguised as a win can do the same. Say you bet $5 and win $2. The app flashes all the sounds and images associated with a win, which can register in the brain as a win when you have actually lost $3.

Hing and other researchers have found that these practices can deceive gamblers, inducing them to play longer and lose more money than intended. Richard Daynard, a legal scholar, president of Northeastern University School of Law's Public Health Advocacy Institute and pioneer of strategic litigation against the tobacco industry, charges that online gambling companies are doing what tobacco companies did with

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When Casinos Target Older Gamblers

FROM FREE BUS RIDES TO BIRTHDAY CARDS, THEY WANT YOU INSIDE

While online gambling is on the rise among older Americans, the demographic remains a desirable one for the more than 1,000 brick-and-mortar casinos spread across 42 states.

Many casinos have designed marketing campaigns to draw in older gamblers. They offer free bus rides from senior residences and community centers. Many promote their physical accessibility and offer complimentary use of wheelchairs and electric scooters. They also tout packages geared to older players, including slot play credits, meal vouchers and show tickets.

It's common practice for hosts to chat up VIPs and get to know the details of their lives. They may follow up with birthday cards and free play credits, inviting customers to celebrate at the casino. Older people "are especially vulnerable to this, especially if they're living alone or in social isolation," says Brian Pempus, an industry analyst and founder of gamblingharm.org.

In 2019, Shannon Moran received a promotional mailing at her house in a small town outside of Dallas. The flyer offered about $200 in free play at a casino new to her. Moran, 57 at the time, had gambled in the past but never had a problem with it. "The promo enticed me to check it out," she says. "That's the first time I went overboard."

When her mother passed away a year later, Moran inherited money to play with, but she would end up betting more than she'd intended. Those promotions kept coming, and she kept returning. Twice, she hit big—two $100,000 drawings in three months—but she poured those winnings back into the slots. Given her penchant for playing machines with $25 and higher spins, the casino granted her VIP status and showered her with gifts, from tickets to bathrobes. "Everything in my home—socks, pajamas, plates, blankets, jewelry, a TV—came from the casino," she says.

The tactics proved effective. Three years later, Moran says, she had lost the $200,000 she'd won from the casino and over $200,000 of her own money. She sank into a depression accompanied by thoughts of suicide. "I thought I was gambling out of grief," the retired hairdresser says. "I didn't realize it could be an addiction." After her losses, Moran started attending meetings of a 12-step program for people with gambling problems. She says she found gambling harder to quit than the 40-year smoking addiction she'd kicked. "It took over my life." —*J.R.*

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CONTINUED FROM PAGE 16

cigarettes: engineering their products to be addictive. "If you want to compare it with cigarettes," he says, "these are both designed as traps. Designed to trap people into addiction. Online betting is designed to be addictive."

GAMING PUSHED AGGRESSIVELY

Gambling apps are being marketed relentlessly, critics say. Television broadcasts of sporting events are saturated with the logos of online bookies like FanDuel and DraftKings, commercials featuring star athletes promoting gambling and commentators bantering about betting odds. Elsewhere, slick and pervasive ads promise "free bets" and say you can "win big." Americans 50 and older are encouraged to get in on the gambling game. Some ads target older adults with offers for freebies, discounts and even medication coupons. One TV spot has Yankees legend Derek Jeter, 51, walking in front of a highlight reel of some of his best plays and saying, "You never know when a play will become legendary. When the moment comes, will you be ready?" He flashes a phone showing the BetMGM logo while a voiceover intones, "Make it a season you'll never forget when you bet on baseball."

Another TV ad supposedly portrays the wisdom and influence that come with age: An older bartender teaches a younger patron to "pass the leg," a FanDuel feature that allows multiple people to share a parlay bet. In a montage of scenes, various people repeat the phrase, including an older adult at a Thanksgiving dinner where everyone is on their phones. The tagline? "Bet together like never before."

A static ad for an online casino makes it seem oh so simple to win money with gambling apps. It depicts a woman clearly over 50—phone in hand, wearing a happily surprised expression—and bears the caption, "If you love casino games, Chumba Casino is free to play, and you can win cash prizes."

Unsurprisingly, a 2019 study by Hing found that frequent exposure to gambling advertisements and inducements on digital platforms encouraged higher betting frequency, larger amounts wagered, more impulsive play and riskier bets with longer odds.

> **"Online gambling companies precisely target consumers using predictive algorithms, personalization, and persuasive technologies and train sophisticated algorithms to enhance an individual's user experience."**
>
> —*Lancet Public Health* Commission on Gambling

The apps collect reams of data on the people using them, enabling online gambling companies to laser-focus their marketing efforts. Knowing how and when someone bets, what they bet on and how much they bet enables these companies to tailor offers and other inducements to encourage more gambling. In November 2024, the *Lancet Public Health* Commission on Gambling reported, "Online gambling companies precisely target consumers using predictive algorithms, personalization, and persuasive technologies and train sophisticated algorithms to enhance an individual's user experience."

Problem gamblers are **4 times** more likely to die from suicide

A SPRAWLING MARKETPLACE

The gambling industry invested $472 million over a 12-month period to encourage responsible gambling, fund research and provide support services for problem gamblers, reported the American Gaming Association, which promotes and lobbies on behalf of the industry, in September 2024. The concern, critics contend, is that the industry frames problem gambling as an issue that rests with the individual who develops the gambling addiction, rather than accepting responsibility for the way product design and marketing efforts exacerbate or even cause problems.

The first comprehensive legislation to address these issues at the federal level has been proposed. The SAFE Bet Act would place severe restrictions on advertising, prohibit AI from tracking users and creating individualized offers and promotions, and stop betting during college or amateur sports games. But it has not gained traction in Congress. At the state level, no government has passed meaningful reforms with similar measures. Perhaps that's because states have come to rely on the money they get from the gambling industry as part of their annual budgets.

In 2024, the gambling industry paid $15.91 billion in taxes on commercial gaming to state and local governments. Those governments deeply depend on those revenues, the *Lancet* commission observed.

GETTING HELP

The shame and remorse over gambling losses can lead to some dark places. A Swedish study published last year found that problem gamblers were four times more likely to die from suicide than the general population. (If you are having thoughts of suicide, please call the Suicide & Crisis Lifeline at 988 to talk with someone.)

Jack eventually racked up a debt of about $60,000, far more than his firefighter pension could cover. He was constantly on edge, scrambling to cover his losses, sweating over his wife's scrutiny, telling himself, *I won't get caught*. His daughter Deanna, who lived downstairs, overheard her parents arguing about his gambling. She also confronted Jack about it. "You need help," she told him. "You're out of control."

When Jack reached the point where he was desperate to get control of his online gambling, he entered a 12-step Gamblers Anonymous program. He says he hasn't placed a bet since Dec. 7, 2024. He even put himself on New Jersey's exclusion list, which blocked him from using the gambling apps on his phone or visiting a casino in the state.

He attends therapy sessions once every three weeks at a local Veterans Affairs center. And he continues to attend weekly meetings of his recovery group.

"Walking into that room to this day makes me feel so much better about what had been transpiring over the past couple years," he says. "And the people in it, they share their problems, their issues, and we work things out together. We're there for each other. It's really just comforting knowing that you're not alone." ■

John Rosengren *is an award-winning journalist based in Minnesota.*



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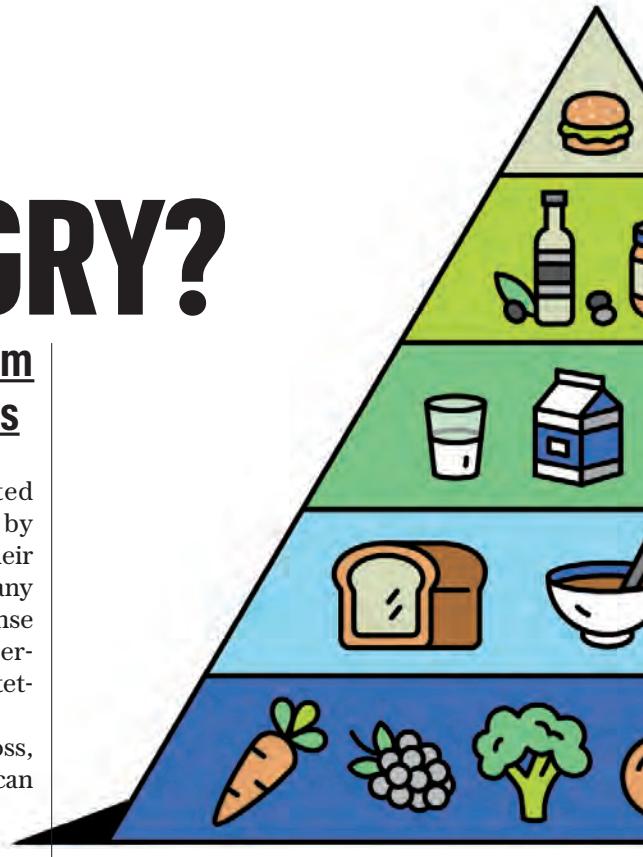
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P. 22 ASK DR. ADAM

WHY AREN'T I HUNGRY?

Appetite often wanes with age, but eating too little can harm your health. Here's how to get the nutrition your body needs

BY **JESSICA MIGALA**



Remember when a trip to the ballpark meant two hot dogs? When you happily ran roughshod over the all-you-can-eat pasta bar?

For many of us, those days are in the past.

"Appetite changes as we get older," says Cary Kreutzer, director of the master of science program in nutrition, health span and longevity at the USC Leonard Davis School of Gerontology in Los Angeles. "It happens to all older adults; it's just a matter of when."

But appetite is, in many ways, a measure of overall health. If yours is flagging, here's what you need to know—and what you need to do.

WHY YOU'RE EATING LESS

Appetite is a complex system of physical, emotional and even social factors, and a number of things can cause it to wane over time:

Your digestive system is changing. A reduction in the hunger hormone ghrelin and changes to the hormone leptin, which regulates satiety, can affect your hunger cues. "We may not get that hunger sensation like we used to," says Kreutzer. In addition, she says, muscles throughout the gastrointestinal tract begin to slow, delaying gastric emptying (the movement of food through your digestive system), leaving you fuller for longer.

Your taste buds are dimming. When you were younger, seeking out food for pleasure was driven, in part, by up to 10,000 taste buds. With age they decrease in number and start to shrink, making you less apt to detect the sweet, salty, sour, bitter and umami ("meaty") notes in foods after age 60. A decade later, your sense of smell can diminish, too, due to a decline in nerve endings and reduced mucous production in your nose. The result: Food—even the stuff you've always loved—tastes bland and less appealing.

Muscle mass is declining. Age-related muscle loss sets in starting in our 30s; by age 70, the average person has lost half their muscle mass. "Your body won't crave as many calories when you don't have to power dense muscle mass," says Jen Bruning, spokesperson for the Academy of Nutrition and Dietetics in Chicago.

You may have dental issues. Tooth loss, sensitivity and reduced saliva production can make swallowing more of a chore. This affects appetite, says Kreutzer. If eating is a pain, you're more apt to avoid it.

Inflammation is on the rise. Chronic inflammation naturally increases as we get older, playing a role in numerous health issues and, yes, reducing hunger.

"Table for one" isn't always appealing. One out of 3 adults ages 50 to 80 said they felt a lack of companionship sometimes or often, reported a study in *JAMA*. That can affect your drive to eat, says Kreutzer.

LESS NUTRITION, MORE PROBLEMS

These assaults on your appetite can mean you're getting less nutrition to fuel your body—one reason that less than half of older adults meet the requirements for a healthy diet, skimping in particular on vegetables, fruits, dairy and protein overall, according to data from the U.S. Department of Agriculture (USDA). "In many instances, older adults are not getting enough nutrition to sustain themselves in a way they can thrive," says Bruning.

More than that, older adults whose appetites lag are more likely to have poor physical performance and functional limitations, especially if they're also losing weight. Kreutzer describes this as a domino effect: "Loss of appetite leads to loss of weight. That leads to loss of muscle mass, which increases your risk of frailty, disease and loss of energy."

Perhaps one of the biggest risks is falling, the leading cause of injury and death among older adults. Muscle loss itself is also dangerous over time, as the more muscle you have, the healthier your immune system.

STRENGTHENING YOUR HUNGER SIGNS

Your appetite is ever-shifting, but it's worth trying some strategies to get it back on track, prioritize nutrient-dense foods and continue to eat the things you enjoy.

Maintain your weight. "While some individuals may benefit from weight loss, in general I don't recommend people over 70 try to lose weight," says Kreutzer. Weight loss typically brings with it not just fat loss but also a loss of muscle. You should weigh yourself regularly, she advises, but with the goal of maintaining your weight.

Eat regular meals. Kreutzer recommends keeping to a schedule of three meals a day, even if you have trouble eating as much as you once did. "I saw my mom's health decline as she got older," she says. "She had no appetite. Other than dinner, she didn't sit down for meals."

Stack your snacks. If sitting down to a meal seems overwhelming and you prefer to graze, it's important to make those snacks work harder: Opt for foods high in fiber, protein, healthy fats and other nutrients. Pair fruit with cheese or peanut butter, or buy a tub of tuna or chick-

ILLUSTRATION BY JARED ORIEL



en salad at the deli counter and scoop it up with whole-grain crackers. Guacamole, hummus and bean dip are other high-nutrition snack options, especially when paired with fruits or vegetables, adds Romy Nathan, a registered dietitian in Vienna, Virginia, specializing in adult nutrition, including weight management.

Add protein. "Protein is one of our best defenses against muscle loss," says Bruning. According to USDA research, only about 50 percent of men and 30 percent of women over 71 get enough of it. Most older adults can meet their needs for proper muscle and bone maintenance, immune system health and mobility by consuming 25 to 30 grams of protein at every meal.

A standard-size serving of steak, chicken or fish will hit that number, but you can also get protein in other ways, says Kreutzer. For example, add an egg white to pancake mix for about 4 grams of protein—and extra fluffiness. Pair Greek yogurt with a piece of coffee cake. Stirring protein powder into milk, blending it into a smoothie or adding collagen powder to coffee (it will dissolve) are other ways to up your intake. Ultrafiltered milk has 50 percent more protein per serving than standard milk; use it to make oatmeal or enjoy it as a drink (even chocolate milk!). And premade protein drinks are always an option. If you find this protein quota out of reach, ask your doctor to recommend a dietitian or go to eatright.org/find-a-nutrition-expert to find one near you.

Keep moving. Physical activity boosts your metabolism and your appetite. Plus, combining protein intake with exercise is the most efficient way to promote muscle growth. "If you're not already active, plan out how you can safely be active in the day," says Bruning. "Rather than trying to put all the onus on *How can I eat more?* the focus becomes *How can I* want *to eat more?*"

Prep food for the week. Try cooking a meal, then dividing it up into individual storage dishes to keep in the fridge or freezer so you have balanced, nutritious heat-and-eat meals at the ready. Slow-cooking foods can help stimulate an appetite as the aroma fills your home, says Kreutzer.

Try new foods. Changes in taste may lead you to discover and delight in different flavors. "This could be a time in your life where you discover new things you didn't think you liked before," says Bruning.

Seek help for your mood, if needed. Talking to someone about how you're feeling may have unexpected benefits for your appetite. And if you feel lonely or not connected to others, consider participating in local events like cooking classes, outdoor and exercise activities, and luncheons and dinners. Participating in social activities has been shown to improve appetite and decrease symptoms of depression.

Drink up. Thirst and appetite are like two peas in a pod. "Fill up two big 1-liter bottles of water. Keep them in places you spend time, such as a chair by the TV, so you're reminded to drink," says Kreutzer. You can add sliced fruit or a sugar-free flavor packet to it to make sipping more appetizing.

Keep an eye on sudden changes. Appetite varies day to day, but if there is an unexplained difference in hunger that lasts more than a week, make an appointment with your doctor to rule out an underlying illness. Similarly, if you've noticed that your loved one's clothes look a bit looser on them, urge them to see a doctor too. ■

Jessica Migala writes on health and nutrition for Cosmopolitan, Prevention *and other publications.*

Visit aarp.org/howmuchshouldyouweigh if you are concerned about your weight.

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ASK DR. ADAM

A top internist and cardiologist answers your questions with surprising doctor-tested tips

"What can I do to ease leg cramps?"

Dr. Adam: One common cause of cramping is dehydration. Even a mild case can mess with your body's delicate balance of minerals. Potassium, magnesium and sodium, which can occur naturally in drinking water, are essential to keeping our muscles working properly. If you're not drinking enough fluids, an imbalance can interfere with the signals telling your muscles to relax, leading to involuntary muscle contractions and cramps.

Some medications—diuretics, statins and certain asthma or Parkinson's drugs—contribute to cramping. If you've started a new medication and the cramps kicked in soon afterward, that could be the link.

Oddly, too much or too little physical activity can bring on cramping. Extreme exercise, or even long walks or gardening, can tax the leg muscles. On the flip side, being sedentary for extended periods can cause muscles to shorten and spasm, especially when you finally stretch out. Being overweight increases the chance of getting cramps too.

Now for the good news. In many cases, there are a few ways to prevent leg spasms. If you get cramps while in bed, gently stretch your calves and hamstrings before you tuck in. Daily stretching has been shown to reduce nighttime leg cramp frequency and intensity in older adults. (Visit aarp.org/stretch-video for a guided stretch routine.)



Stay hydrated. It's a good idea to sip water throughout the day, even if you're not thirsty. This is especially important if you drink alcohol, as it is dehydrating.

Speak with your doctor about your medications. There may be alternatives or adjustments that can be made.

Finally, when a cramp strikes, you could apply a warm compress or take a hot shower to loosen those leg muscles. But no matter how severe the cramp is, be careful! The last thing anyone wants is a fall.

If leg cramps are persistent or paired with swelling, weakness or numbness, talk with your doctor. In any case, you don't have to suffer in silence or lose sleep. Know the cause, take control and keep moving.

"Is dental health important?"

Dr. Adam: The mouth is one of the most critical gateways to overall health. How we care for it can have substantial consequences on our overall aging.

As we grow older, there's an increased risk of gum disease, dental decay and tooth loss. When teeth are lost, it affects the foods you're able to enjoy, your nutrition and your social life.

Poor dental health has been linked to heart disease, stroke, complications from diabetes, respiratory infections, worsening rheumatoid arthritis and frailty. In rare cases, germs from the mouth can travel and infect the inner lining of the heart.

Scientists believe chronic inflammation in the mouth may increase Alzheimer's risk the way it increases cardiovascular risk, by driving inflammation system-wide over time.

Many people avoid going to the dentist because they dread the experience. Dentists today are aware of those fears and use techniques and technologies designed to make treatments far more comfortable. Choose a dentist who is willing to be a partner on your wellness path. And always let your dentist know the medications you are taking. Certain drugs that older adults are commonly prescribed, such as those for bladder control, blood pressure, allergies or pain, can contribute to dry mouth. When there's less saliva to protect teeth, decay can accelerate.

And follow the 2-2-2 rule: Brush your teeth twice a day with fluoride toothpaste for two minutes and see a dentist twice a year. Floss once a day using dental floss or a water flosser. See your dentist if flossing or brushing causes your gums to bleed. Eat a well-balanced diet and quit smoking if you smoke, as it increases your risk of gum disease.

Your mouth matters. Make it a priority. ■



Adam B. Rosenbluth, M.D., practices and teaches in New York City. Each Monday online, he answers your questions about how to make your body work better for you.

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STAYING UP TO SPEED

The rules of the road are always changing. Here's the latest to keep you at ease behind the wheel

Those who have driven for decades may not always realize that some of their habits may have become outdated. And that can put their safety at risk. Here are some updated tips.

BY **CLAIRE LEIBOWITZ**

AN AARP NEED TO KNOW GUIDE

GO RIGHT TO GO LEFT

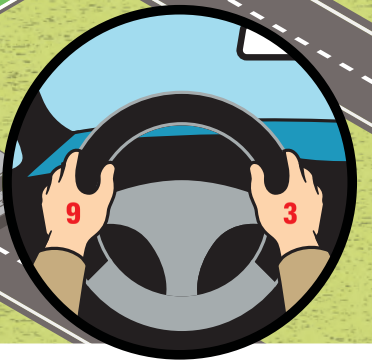
Turning left across oncoming traffic can be stressful. There's no shame in avoiding it. Remember, three right turns can equal a left. At an intersection with a traffic light, drive a block farther, take a right, then two more and you should be facing in the desired direction. Safely cross the intersection on a green light.

WATCH THE LINE

Oncoming headlights too bright? To keep from getting blinded, look to the right of the road and follow the edge line there. In general, driving in the right lane on multilane roads can reduce exposure to the brightest oncoming headlights.

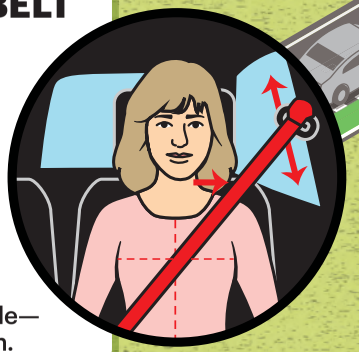
ABOUT THAT ROUNDABOUT

Traffic circles have become more common because they reduce intersection crashes, says Wen Hu of the nonprofit Insurance Institute for Highway Safety. But they can be confusing to those used to four-way intersections. At a roundabout, yield to circulating traffic. Turn right to enter, then go around counterclockwise. If you miss your exit, just circle again.



ADJUST YOUR BELT

Your seat belt's shoulder strap should land across the center of your chest and not dig into your neck. This can often be difficult to achieve for shorter drivers. You can adjust the height of the strap by finding the base of the pulley—near your left ear on the driver's side—and moving it up or down.



SHARE THE ROAD

You may notice bike lanes, often colored green, on the right side of the road. These help create space between bikes and cars. If you see a green box at a traffic light, stop behind it, not inside of it. The box is an extension of the bike lane and gives cyclists protection to continue down the road with less risk.

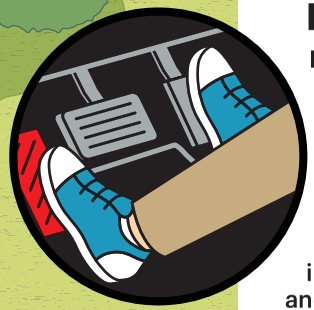
TIMES ARE CHANGING

You may still use the 10 and 2 o'clock hand positions on the steering wheel. But holding it at 9 and 3 instead gives you better leverage and quicker steering response, according to AARP's Smart Driver course. These positions also reduce the risk of hand, arm or face injuries if airbags deploy in a collision.

ILLUSTRATION BY REMIE GEOFFROI

MIND THE 'MOVE OVER'

When you're driving in the right lane and see a construction crew or an emergency vehicle stopped on the shoulder ahead, try to move to the next lane over. All states and Washington, D.C., now have Move Over laws under which fines can be imposed for drivers who do not comply.

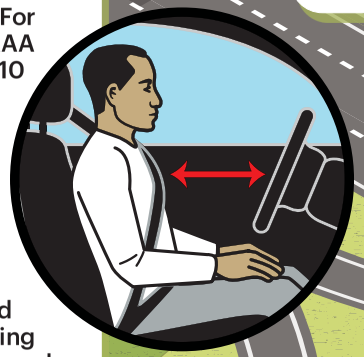


BEST FOOT FORWARD

Drivers use their right foot for both the gas and brake pedals. But did you know there's a recommended spot for your left foot—even if you did away with your clutch decades ago? Keep it on the "dead pedal," which isn't a pedal but, rather, the raised spot on the left side of the floor, says William Van Tassel, manager of driver training programs at AAA. "It helps you brace and add a little bit more control in your body."

TILT THE WHEEL

Position the steering wheel so that it is in line with the middle of your chest. For horizontal distance, AAA recommends leaving 10 to 12 inches between your chest and the center of the wheel. It offers a simple way to gauge this: Hold up a sheet of standard 8½-by-11-inch printer paper, lengthwise, between you and the wheel. If the steering wheel is poorly positioned, you risk injury from the airbag inside it.



LEARN THE DIAMOND

There's a relatively new type of highway interchange that may seem confusing at first. It's called a diverging diamond, and it's designed to reduce collisions and improve traffic flow where a busy local road crosses an interstate. Right turns at these interchanges are simple: Stay in the right lane and follow the curve of the road. "The challenges come when you want to go straight through or turn left," Van Tassel says. In those cases, your whole lane will move to the left and then move back to the right, crossing traffic at intersections with stoplights. To make a left from the interchange, you follow the curve to the left—and because you'll be on the left side of the road already, you won't need to face oncoming traffic. ■

Claire Leibowitz is an associate editor of the AARP Bulletin.

AARP RESOURCES

▶**CarFit**, a program developed with the American Occupational Therapy Association, can help ensure your seat, steering wheel, seat belt and mirrors are adjusted for safe, comfortable driving. Visit **car-fit.org** to learn more.

▶**AARP Smart Driver** is a defensive-driving course designed for motorists 50 and older. Visit **aarp.org/findacourse** to search for classes near you or to sign up for an online version. In many cases, those completing the course can qualify for an insurance discount.

▶The **AARP SafeTrip** smartphone app will monitor your driving behavior and then provide feedback on what you do well on the road and in what areas you can improve. Go to **aarp.org/safetrip** to learn more about this free app.

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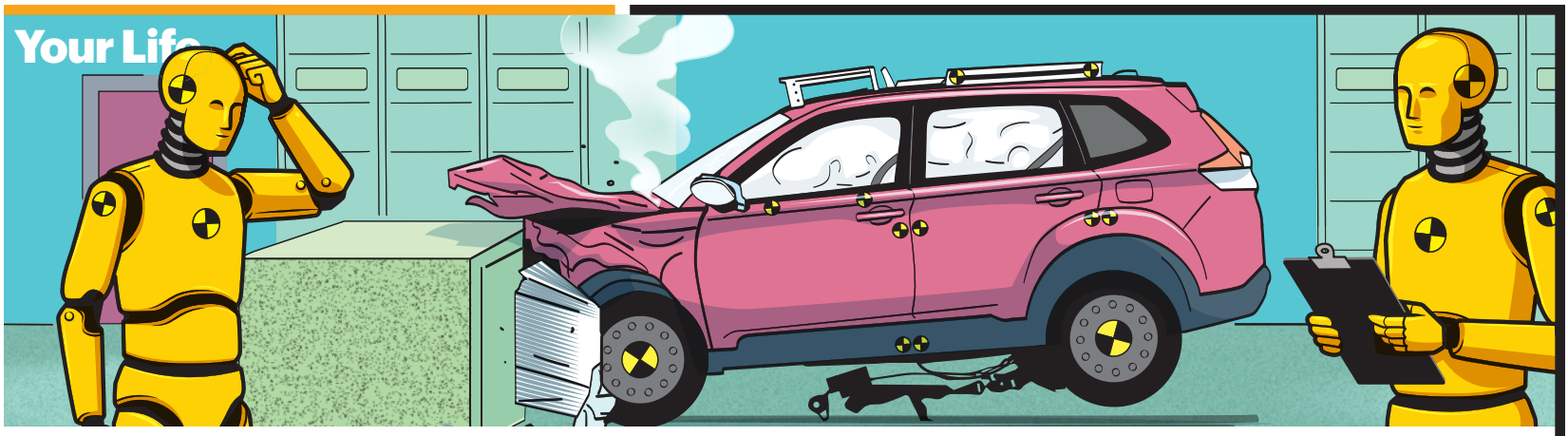
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WHAT DO VEHICLE SAFETY RATINGS ACTUALLY MEAN?

Two key groups test for crash impact and rate the vehicle technology that can help prevent accidents

BY **MICHAEL FRANK**

Even the best driver can get into an accident. And if it happens to you, you're likely better off in a car that has been rated highly for safety.

Take, for instance, the test in which a car is rammed into a barrier, with the impact measured on a crash test dummy. "If we compare vehicles that get a Good rating in that test, which is the highest rating we hand out, versus a vehicle that gets a Poor rating, you're 46 percent less likely to die in a frontal crash in those Good-rated vehicles," says Joe Young of the nonprofit Insurance Institute for Highway Safety (IIHS), one of two entities that issue car safety ratings. The other safety-rating group is the National Highway Traffic Safety Administration (NHTSA), run by the U.S. Department of Transportation.

Shopping for a car? Go to iihs.org and nhtsa.gov to access their reports. Here's a look at what goes into them.



Crash Tests

By propelling cars into stationary barriers at up to 40 mph, or replicating side accidents by slamming weighed carts into cars, NHTSA and IIHS experts can study hundreds of impact factors, from how a steering column collapses and whether that harms the driver to the functional protection of airbags preventing head and neck injuries.

IIHS conducts two front-crash simulations:

• Small overlap, in which front-end sides of a car hit a barrier, for a total of 25 percent of that end colliding with a stationary object.

• Moderate overlap, in which 40 percent of the front of the car hits a barrier.

IIHS also conducts a side-impact test, plus a whiplash prevention test, to size up the force of being rear-ended.

NHTSA tests include a full-frontal crash (the entire bumper makes contact with a barrier), two kinds of side impacts (one meant to simulate hitting a telephone pole and another to mirror a T-bone collision from another car) and a rollover test.

Neither entity evaluates every car model; both test the highest-volume mass-market vehicles. Every year, IIHS tests about 200 of the more than 400 models marketed in the U.S., while NHTSA looks at about three dozen.



Crash Prevention Tech

Both IIHS and NHTSA evaluate the "passive" safety features of a car, such as the metal structure surrounding the cabin, seat belts, airbags and head restraints. They also rate the effectiveness of "active" safety features, such as crash-avoidance technology.

A good example is what's called automatic emergency braking (AEB), which can stop your car in case you fail to see that the motorist in front of you slammed on their brakes. IIHS data shows that AEB alone eliminates half of all front-to-rear crashes and can also lower your chance of being hurt in such an accident by reducing the impact speed.

"I'd encourage older drivers to consider a vehicle with good ratings for crash-prevention technology," Young says. For example, IIHS says a system called rear automatic braking, which can prevent you from hitting another car while backing up, reduces accidents by up to 78 percent when paired with parking sensors and a rearview camera.



NHTSA Test Scores

NHTSA uses a scale of one to five stars, with five the safest. But the agency cautions not to compare vehicle ratings across classes—a large SUV versus a compact car, for example—because its tests are designed to simulate crashes of two vehicles of similar size and weight.



The IIHS System

There are four levels of IIHS ratings: Good, Acceptable, Marginal and Poor.

The best bunch of cars, roughly one-fifth of all tested models, earn its highest award, Top Safety Pick+. Those got Good ratings for all crash tests and also for IIHS's updated front-crash prevention test. A second tier receives its Top Safety Pick award (without the plus). Those got Good crash test results. Both tiers have strong headlight ratings and effective pedestrian-avoidance technology. Young also cautions not to compare crash test ratings across classes. "In the real world, we know that a smaller car is going to be at a higher risk in a multi-vehicle crash." ■

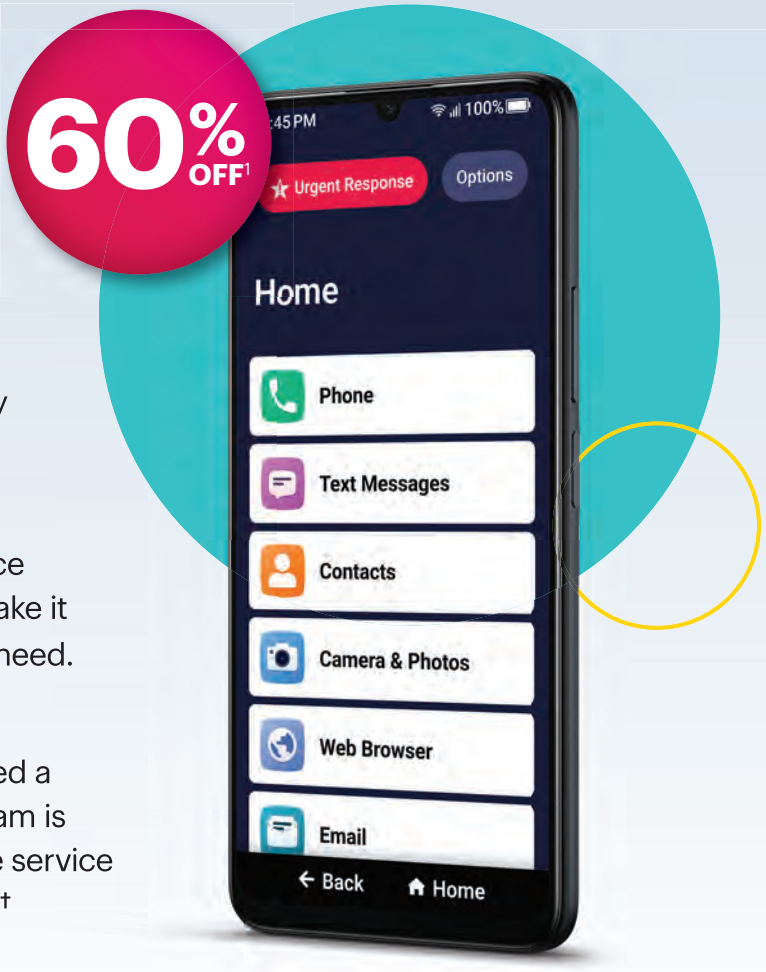
***Michael Frank** is an adjunct professor of journalism at SUNY New Paltz and a contributor to* Consumer Reports, Men's Journal, *Gear Patrol and other outlets.*

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"MY RECIPE FOR HAPPINESS IS TO MAKE MONEY AT SOMETHING I'D DO FOR FREE."

—OSCAR-WINNING ACTOR **ELLEN BURSTYN**, 93, ON THE MOVIES THAT MADE HER AN ICON, HER LOVE OF POETRY AND THE IMPORTANCE OF LAUGHTER

You have won an Emmy, a Tony and an Oscar. What would you still like to achieve?
I've written this new book [*Poetry Says It Better: Poems to Help You Wake Up*] hoping to introduce poetry to people who don't read it. I feel like they're missing out on something that's nourishing spiritually and intellectually. So I wrote it with those people in mind. Poetry speaks to the heart in a way that I don't know that anything else does for me.

How has the world changed since you began working in the late 1950s?
Women have their own lives now, their own abilities and their own way to fulfill their lives. We're separated from the patriarchy a bit, enough for us to be heads of corporations or pilots or to go to the moon. It wasn't like that in the 1950s. There weren't many women directors or women producers. Men owned the world. That's changed.

You are still working at 93. Any tips for readers who want to keep going that long?
I did everything unhealthy and bad for me for about 40 years of my life. And then, one by one, I gave up my bad habits. Smoking was the big one. That was hard. Then alcohol, which was relatively hard. My last vice to let go of was a little marijuana. I eat very healthy. I exercise. I walk my dog in the park.

How have you achieved a nearly seven-decade career in films?
I just did a film in Australia with Taika Waititi—he's a writer, director, actor and comedian—which will be out this year, I hope. When I was shooting this film, doing 12-hour days, my assistant said, "How are you doing this?" The answer: I like my profession. My recipe for happiness is to make money at something I'd do for free.

***The Exorcist*, which came out in 1973, was the first horror film nominated for an Oscar for best picture. Were you surprised?**
It was a best-selling book when it was made into a film. I had high hopes for it, but I remember the day it opened: I was in Los Angeles and it opened worldwide, and I was in the kitchen, and there were shots of people [on television] standing in line in a snowstorm for four hours, waiting for the movie to open. I remember the first time I saw it with an audience. Billy [director William Friedkin] and I were sitting together, and the first scary moment is when I, with a candle, go up into an attic, and there's this scary sound. And the audience laughed. I later read that when people get scared, they often laugh to resettle. And that's what happened. From that point on, the audience became like a unit, like they were in this together. It was quite an experience for me.

The 1974 movie *Alice Doesn't Live Here Anymore* was a trailblazing film for women. Did you realize that during filming?
It's what I hoped for. I wanted it to be a film about a woman who is like the women I knew—and myself, for that matter: working and raising a child by themselves. Women could say, "It's my life; it's not some man's life that I'm helping out with."

What was it like to work with Martin Scorsese on that film?
It was so wonderful working with him. He does this thing, which is, at the end of the day, he takes the scene that we are shooting the next day and rehearses it. Not for the camera, just for the acting. And that's when we find out what's hidden in those words we speak.

You worked with Jack Nicholson in 1972 in *The King of Marvin Gardens*. How was that?
First of all, he's a brilliant guy. I loved working with him. Just loved it. He has a level of reality about him when he is acting that is beyond anybody. About a year ago, I worked with someone who was close to him, and this person told me that when she told him she knew me, he said, "Now, there's a broad." I thought, *Thank you. That's a good compliment.*

You have laughed a lot on-screen. Is that true in your life?
Oh, yes. Laughter does something physically as well as spiritually and emotionally and intellectually for you. I wouldn't know what to do if I didn't have laughter in my life. ■

Interview by A.J. Baime

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P. 32 GREAT WAYS TO SAVE ON FAMILY TRAVEL
P. 36 FRAUD WATCH: SCAMMED NOW, TAXED LATER

RENT OR BUY?

Make a winning financial decision when you move



BY **CHRIS FARRELL**

Ann and Tracy Godfrey, both 78, have owned their two-story home in Golden Valley, Minnesota, for nearly 40 years. Their garden is a source of pride and joy, but tending it, they say, is getting to be too much. "We can't do it anymore," says Ann.

They want to move but also stay close to their friends, community and doctors, so they've limited their search to nearby homes. What they haven't figured out is a question facing many older adults: "Should we buy our next place or rent it?"

"We're leaning toward owning," Tracy says, "but renting may turn out to be a better option." Ann laughs: "Every time I think I'm ready to decide, there's a big 'but.'"

Selling the home you've lived in for decades can leave you with a pile of money at the closing, giving you the wherewithal to buy your next home with a hefty down payment or maybe even no mortgage at all. But that doesn't necessarily make it the right choice.

Quality-of-life factors are important, and they're where you should start, says Erin DiCarlo, founder of Massachusetts-based Dovetail Companies, which provides services to older adults facing major life transitions. "How do you see your future?" she asks. "What's most important to you?"

But if the finances of buying versus renting play a role in your housing choice, here are some tips for working through the decision.

THINK ABOUT YOUR TIME FRAME

"If you're in it for the short run, usually renting is better," says Daryl Fairweather, chief economist at Redfin, the online real estate brokerage. In general, that means renting if you plan to stay less than five years.

Why? When you buy, you're not just paying the home's price and perhaps committing to a mortgage; you're also typically on the hook for 2 to 5 percent of the purchase price in closing costs. And when you sell, you'll likely lose 8 to 10 percent of the sales price to transaction costs. In general, buying wins if your time horizon is 10 years or more. "The longer you stay in the home, the more opportunity you have for that home to go up in value," says Fairweather. "The longer you stay in the home, the better off you are financially."

So you should ask yourself serious questions about changes in your health or your family situation that might require yet another move. The typical 65-year-old can expect to live about two more decades and has a 28 percent chance of spending 90 days or more in a nursing home, according to the Urban Institute; 15 percent of older adults will spend more than two years in one.

DIG INTO HOMEOWNER FINANCES

Separate from a mortgage, the average American homeowner spends almost $25,000 annually, or more than $2,000 monthly, on home expenses, according to *Real Estate*

CONTINUED ON PAGE 32

CHRIS GASH

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CONTINUED FROM PAGE 30

Witch, an industry publication. That number, up sharply in recent years, includes property taxes, insurance, repairs and maintenance.

Research can inform a budget plan. You can learn about property taxes from your real estate agent, as well as the main real estate platforms like Realtor.com, Zillow and Redfin. County assessor or auditor websites offer public portals to look up current assessed value and tax bill by address. To get an idea of home insurance costs, you might call two or three local independent agents. Your monthly mortgage payment will depend on the home's cost, interest rates, length of the mortgage and the size of your down payment.

Over the long term, ownership also gives you the possibility of profiting from price appreciation. Home prices aren't guaranteed to rise, however, and, as mentioned, transaction costs cut into potential profits.

CONSIDER RENTAL FINANCES

Calculating monthly costs is much easier for renters: Add up your monthly rent, utilities and renters insurance. Rents have risen 5.1 percent on an annualized basis over the past five years, according to the Bureau of Labor Statistics, though hikes have slowed since 2023. The cost of renters insurance, which covers personal property but not structures, has increased 2.9 percent annually.

As for the long-term financial consequences: Unlike a fixed-rate mortgage payment, your rent could rise year after year. But, assuming you have cash left over from the sale of your home, you'd keep more of it than you would if you had used it on a down payment for a purchase. You could set it aside for other purposes, perhaps putting it in the bank or investing it in the hopes of getting higher returns. Either way, you'd have less of your wealth tied up in real estate. "One of the main benefits of renting and having liquid, fungible cash is diversification," says Kristian Fors, a research fellow at the Independent Institute in Oakland, California.

MIND THE GAP

Before making any final comparisons between renting and buying, research local conditions and estimate your down payment on any purchase. Right now, on average, renting is usually cheaper, according to Redfin. That estimate reflects that most rental stock consists of apartments, while most homes for sale are single-family houses. It's also a function of mortgage rates, which have risen above 6 percent in recent years.

If the choice is an apartment rental versus a condominium purchase—more of an apples-to-apples comparison—the numbers are different. Among midpriced properties as of March, the typical monthly apartment rent is $1,757, while the typical condo mortgage payment is $1,698, reports Zillow. By Zillow's calculations—which assume a 20 percent down payment on purchases and a 6.18 percent, 30-year fixed-rate mortgage but don't include maintenance, taxes or insurance—rents exceed mortgage payments in 39 of the top 50 U.S. metropolitan areas.

If you're rolling over the profits from a home sale into a new purchase, your mortgage bill could be even lower. For example, if you make a $150,000 down payment on Zillow's typical condo, your monthly payment would drop nearly $500 to $1,206. "The less you borrow, the less you are going to be paying in interest and the less expensive it is going to be to buy that home," Fairweather says. To dig deeper into the finances of your housing decision, you can check out AARP's Rent vs. Buy Home Calculator; to find it, go to **aarp.org/calculators** and click on Personal Finance. ■

***Chris Farrell** is a journalist and the author of books including* Purpose and a Paycheck: Finding Meaning, Money, and Happiness in the Second Half of Life.

How Much Will It Cost to Live There?

Typical monthly mortgage payments and rental prices

Metropolitan Area	Condo Mortgage (after 20% down payment)	Apartment Rental
New York City	$2,799	$3,271
Los Angeles	$3,323	$2,654
Tampa	$973	$1,800
Las Vegas	$1,169	$1,520
Nashville	$1,730	$1,641

Note: Midpriced units, March 2026. Source: Zillow

99 GREAT WAYS TO SAVE: ON FAMILY TRAVEL

BY BETH BRAVERMAN

Traveling with kids or grandkids can create priceless memories, but lodging and travel expenses add up fast. Here's how to travel with family on a budget.

Book early. Work through schedule conflicts and complications well in advance and pick dates you can lock in. Darley Newman, host of the podcast *Travels With Darley*, recommends booking at least three to six months in advance for larger parties to lock in your preferred dates and get the best possible rate. Carriers often release their bulk-fare pricing early, but it's limited.

Look beyond hotels. For groups, renting a large house or villa with multiple bedrooms and pullout couches or space for air mattresses for kids often costs less per person per night than booking several hotel rooms, says Lisa Niver, author of *Brave-ish: One Breakup, Six Continents, and Feeling Fearless After Fifty*. Such accommodations can include perks like free parking, free Wi-Fi and a kitchen. Plus, they provide private, communal living spaces where your family can socialize.

Ask ahead for a group rate. Theme parks, museums and tour operators may offer a discounted rate for larger groups, although you often have to book in advance to get the deal. At Madame Tussauds in Orlando, for example, groups get on average 25 percent off, while some groups at the American Museum of Natural History in New York City pay about 15 percent less for their tickets.

Work with a travel adviser. Their services are often free for the traveler (they get paid by the hotel, cruise line or tour operator), and they may have access to discounts for large groups. Let them handle the logistics of arrivals and transfers.

Get a van. If you're staying somewhere that requires driving, renting one large vehicle rather than multiple smaller cars can lower your total fuel, toll and parking costs.

Schedule free activities. Mix in a few no-cost pursuits the family can enjoy between expensive excursions. Beach days, nature hikes and game nights all foster intergenerational connections without a huge price tag.

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- Fraud Resource Center

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- AARP Retirement Calculator
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- Retirement Resources
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WORK & JOBS
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CHEATED—THEN TAXED

Fraud losses can bring IRS bills and Medicare hikes. A proposed law could fix that

BY **SARI HARRAR**

Criminals stole almost $900,000 from Joan Johnson in a sophisticated impostor scam in 2023. Then the Internal Revenue Service hit her with a $60,000 income tax bill—entirely for the scammed money.

"It was devastating. I felt like my life was threatened during the scam," says Johnson, 75, a retired government worker who asked that her real name be concealed for her protection. The majority of the lost money was from her retirement account. "When it was over, I realized most of the stolen money counted as taxable income," she says. "I couldn't get a deduction for the lost money. The IRS even charged me interest on taxes I couldn't pay by the deadline."

Johnson's tax bill is shocking, but her situation is not uncommon. Since a 2017 tax law change halted a long-standing deduction for stolen money, fraud victims across the U.S. have been slammed with federal income tax bills as high as hundreds of thousands of dollars. "It's like victimizing someone twice," says Nancy Rossner, executive director of the Community Tax Law Project in Richmond, Virginia.

Have questions related to scams? Call the AARP Fraud Watch Network Helpline toll-free at **877-908-3360**.

Go to **aarp.org/fraudwatchnetwork** for the latest fraud news and advice.

And government rules make scam victims pay in more ways. Taxpayers younger than 59½ can also face a 10 percent penalty on withdrawals from 401(k)s, IRAs and other retirement accounts even if the money was scammed, Rossner says. Many pay dramatically higher state and local income taxes that can add up to tens of thousands of dollars or more. Investment withdrawals in a scam can also trigger income-based Medicare premium hikes of up to $578 a month. While some victims qualify for deductions and appeals, many do not.

"What other victim of a crime has to pay taxes on their loss?" asks Amy Nofziger, senior director of fraud victim support for the AARP Fraud Watch Network. "Victims tell me it feels like a secondary trauma—first from the criminal, then from the government."



RELIEF IN SIGHT?

Before 2018, taxpayers could deduct money or property lost to a scam, theft or disaster on their federal income taxes. In 2017, President Donald Trump signed the Tax Cuts and Jobs Act that ended most of those deductions. There are a few loopholes that help some scam victims. According to a 2025 IRS memo, victims can take a federal income tax deduction if they believed the scam would increase or safeguard their money. But that doesn't include many common scams. "Romance scams, grandparent scams, kidnapping scams and any scams where the victim was trying to help someone are not deductible on a federal tax return," says tax attorney James Creech, who works in the San Francisco office of accounting firm Baker Tilly. "It's heartbreaking."

The taxable portion of money withdrawn in a scam—such as from retirement accounts funded with pretax money, investments that have earned interest and stocks and bonds that have increased in value—counts as taxable income. This can mean big tax bills, Creech says.

The stakes are high. As much as $81.5 billion was scammed from older adults in 2024, according to the Federal Trade Commission.

A bill in Congress would restore the deduction for money lost in scams and allow victims of scams dating back to 2018 to take the deduction if they file an amended tax return.

"This is one of AARP's priorities," says Clark Flynt-Barr, AARP's government affairs director for financial security. "We have endorsed this legislation and are hopeful it will pass." In January, Kathy Stokes, senior director of fraud prevention programs for the AARP Fraud Watch Network, told the U.S. Senate Special Committee on Aging that the tax is "an insurmountable burden for many victims who no longer have the ability to pay this tax bill due to the fraud loss."

Meanwhile, AARP is exploring ways to bring relief to scam victims hit with high Medicare premiums, says Andrew Scholnick, an AARP government affairs director for Medicare. Currently, in order to appeal, beneficiaries must show proof that the criminals behind the scam were convicted. But few scammers are caught or convicted, he says. AARP has recommended letting victims present financial records as proof instead. Visit aarp.org/money/scams-fraud/fighting-for-you to learn more about AARP's efforts.

WHAT TO DO FOR NOW

Unless and until the law changes, options are few and unsatisfying.

Former social worker Barb Putnam, 74, of Washington state, saw her 2026 Medicare premiums jump by about $530 a month after losing nearly $300,000 in a 2024 scam. She worked with a legal clinic to get a deduction on her federal taxes but is still fighting for Medicare relief. "As a single mother with two daughters, I worked long and hard for this money," she says. "Now I've gone back to work to rebuild my savings. And I can't afford repairs on my home."

Scam victims may be tempted to ignore tax liabilities—but that will only make things worse, Creech says. "If you've been scammed, talk to somebody," he advises. And be sure to keep statements of scam losses and records of interactions with criminals, he says. "A tax attorney or legal clinic can help, but so can an accountant, who can give you advice on next steps. It's better to file your tax return than to skip it because you feel overwhelmed." ■

Sari Harrar writes about scams and health for AARP.

CHRIS GASH

How a Safe Step Walk-In Tub can change your life

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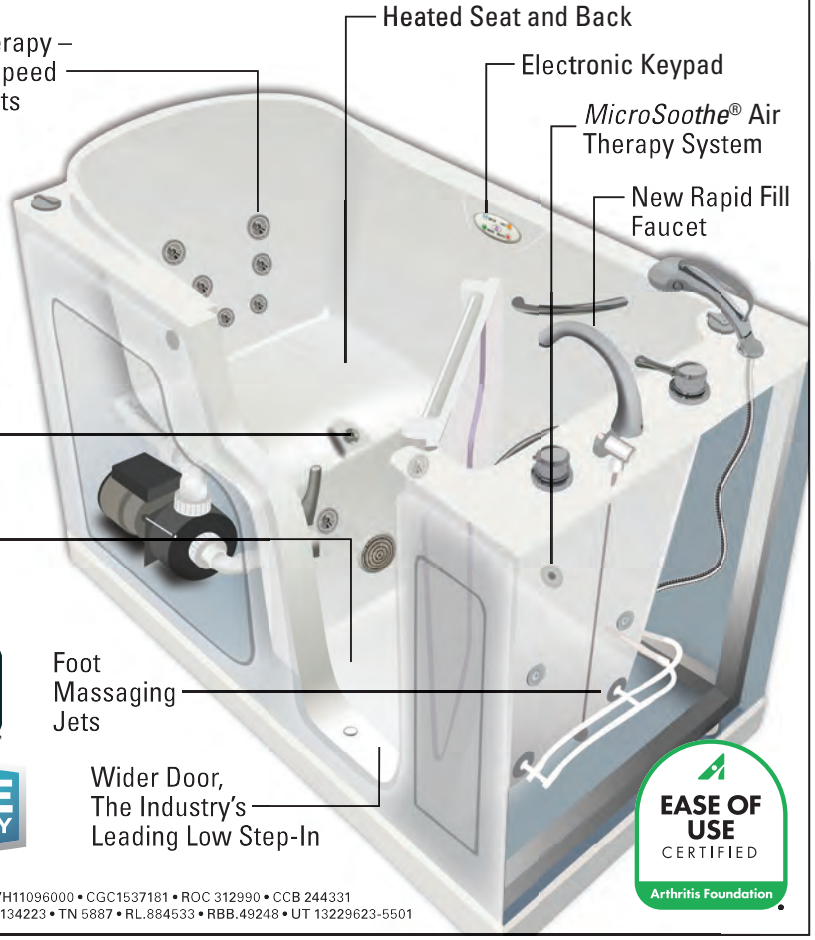
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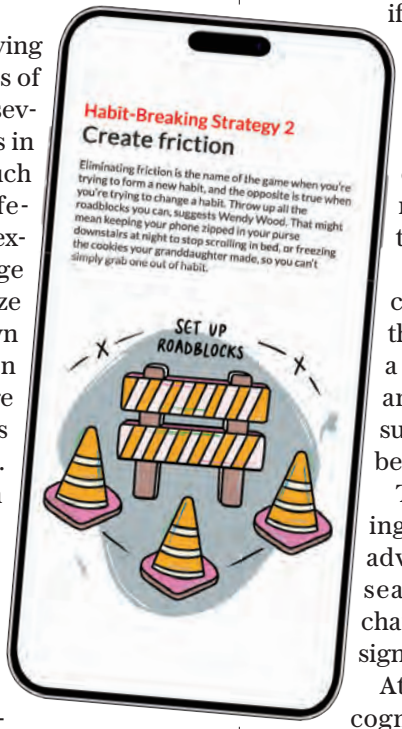
BY **CORI VANCHIERI**

Staying mentally sharp is a top concern of AARP members. In the latest member opinion survey, 77 percent were extremely or very concerned about it, close behind worries over consumer fraud and the future availability of Social Security and Medicare.

Is there a secret to staying mentally sharp? Decades of research have revealed several ways to tilt the odds in your cognitive favor. Much of it comes down to lifestyle: Eat a healthy diet, exercise regularly, manage stress, sleep well, socialize and keep learning. Known as the six pillars of brain health, these practices are the foundation of AARP's Staying Sharp program. They've also been shown to support overall health.

The trick is to turn those activities into consistent habits—learned behaviors that you've repeated so many times they've become automatic and often unconscious. Fastening your seat belt, making the morning coffee, even reaching for your smartphone every time it dings.

"Habits are the infrastructure of what we do every day," says behavioral scientist Wendy Wood, professor emerita at the University of Southern California. "If you always had to think about *So where exactly is my toothbrush and how do I put toothpaste on it?* we wouldn't get very far. Habits just streamline all that and make our lives easier."



GETTY IMAGES (AARP)

Staying Sharp's new challenge, Building Healthy Habits, helps you learn how habits are formed, why some stick and how to design brain-healthy routines that work for you.

Instead of making major lifestyle changes all at once, the idea is to focus on small, practical actions you can repeat day after day. Wood is also a big believer in the power of friction. Want to break a bad habit? Amp up the friction. Put your phone in another room if you want to avoid using it once you climb into bed. That's creating friction against the habit. Want to start walking in the morning? Set out your sneakers and workout clothes the night before. You've reduced the friction.

The Building Healthy Habits challenge walks users through these steps: the cue that prompts a behavior, the behavior itself and the reward you get as a result. With enough repetition, the behavior becomes a habit.

This challenge includes writing prompts, tips for success and advice from Wood and other researchers who study behavior change. Visit **stayingsharp.org** to sign up for the challenge for free.

At that website, users can take a cognitive assessment, try quizzes and even play games. AARP members get access to extras, like recipes with videos, inspirational TED Talks and a library of activities. And it works. A recent study showed the longer people were enrolled in Staying Sharp, the more likely they were to report better sleep as well as healthier eating and overall habits. ■

***Cori Vanchieri** is AARP's brain health editor.*

Medicare Made Easy

BY ANN KAYRISH

Where can I get a complete list of the Medigap plans available in my state?
The medicare.gov website has a search tool where you can find the Medigap plans available in your ZIP code. The tool provides insurance company names and contact information along with a monthly cost estimate. You will need to contact each company directly to get a more accurate price estimate and learn how to apply. Many state departments of insurance also compile a list of available Medicare supplement plans.

MEDICARE HOTLINE: 800-Medicare (800-633-4227)
MEDICARE ONLINE: medicare.gov

I joined Medicare Advantage when I became eligible for Medicare a few months ago because my doctor was listed as a participating provider. However, the office now advises me they are not part of the plan's network. Can I switch plans?
In most cases, a single doctor leaving a Medicare Advantage (MA) plan provider network does not trigger a special enrollment period for impacted enrollees. For 2026, however, Medicare recognized the limitations of its plan finder's new provider directory information feature and created a temporary Special Election Period (SEP) for Incorrect Medicare Plan Finder Medicare Advantage Provider Directory Information. This SEP allows you to change your MA plan or return to original Medicare and add a drug plan if you chose and enrolled in an MA plan through the Medicare Plan Finder (MPF) based on directory information that your preferred doctor was in the plan's provider network and you later learned the information was wrong. The SEP is limited to people who use the MPF to enroll in an MA plan between Jan. 1 and Dec. 1, 2026. You need to contact Medicare at 800-633-4227 within three months of enrollment to change plans.

I know I haven't met my drug plan deductible, but sometimes my drugs are free, and other times, I pay full price. What gives?
It can get confusing. Your deductible is the amount you pay for covered drugs before your plan starts to pay. Those drugs are grouped in tiers. The amount you pay for a drug depends on the tier. In general, the lower the drug tier, the less you pay. Many Medicare drug plans, however, use a "split-tier" deductible, which means that the deductible applies to drugs in the higher tiers (tiers 3, 4 and 5) but not to the lower-cost generics usually found in tiers 1 and 2. Under this structure, enrollees can get many generic drugs for a small or $0 copay before any of the deductible is met, which is why you sometimes get drugs free or for a low cost before meeting your deductible. Detailed information on which drugs or tiers of drugs are subject to your plan's deductible can be found on your drug plan website or by calling your plan directly.

I keep reading that Medicare is now negotiating drug prices. But I haven't seen any change. When will this lower my costs?
Medicare enrollees will begin seeing the impact of Medicare's drug price negotiation program this year. If you are currently taking one of the drugs on the negotiated and lowered price list, your out-of-pocket cost will likely be less, especially if your drug plan has you pay for a portion of the cost of the drug or coinsurance. You won't see this type of savings if your plan charges a flat fee or copayment for the drug. Starting next year, up to 20 additional drugs will be added to the list of medications slated for price negotiations. A second benefit of the drug price negotiation program is increased access to medications, as the selected drugs must be added and remain available on all Medicare plan formularies.

Ann Kayrish has worked as a Medicare counselor with the State Health Insurance Assistance Program.

Go to **aarp.org/medicare** for quick answers to your questions via our chatbot.



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SPOTLIGHT **DELAWARE**

PAID FAMILY LEAVE LAW NOW ON THE BOOKS

Delaware residents caught between caring for loved ones with serious health issues or new babies and working at their paying jobs can now get some financial help from the state's new paid family and medical leave law, which took effect this year with strong support from AARP.

Kim Wharton, AARP Delaware communications director, says the law provides a financial cushion for workers, particularly those over 50, who can't just give up their jobs to help a family member in distress.

Under the law, employees of companies with 25 workers or more can get 12 paid weeks to care for a new child and six weeks every 24 months to care for a family member with a serious health issue or their own serious health condition. They can also be eligible for caregiving while a loved one is on overseas military deployment. The qualified employee gets 80 percent of their weekly wages, up to $900 per week.

Covered employees are eligible for up to 12 weeks of combined leave annually. It is paid for by a contribution of less than 1 percent of an employee's weekly wages, and the payment can be shared by both the employer and employee. Companies with 10 to 25 employees must provide at least the parental leave, while companies with fewer than 10 employees are exempt but can opt in.

Chris Counihan, director of paid leave at the Delaware Department of Labor, said the state began accepting claims for paid leave on Jan. 1. The state received more than 2,250 claims in the first two months and made payouts on 250 of those, he says.

Liz Richards, 34, director of the Delaware Cares Coalition, which pushed hard for the new law, says its implementation means "caregivers will no longer be ... faced with an impossible choice between their job and their family."

She should know. She was on paid leave this spring to care for her newborn daughter. *—Elaine S. Povich*

NEW JERSEY

Andrus Award AARP New Jersey is seeking nominations for the AARP Andrus Award for Community Service. The award is limited to unpaid volunteers and recognizes individuals age 50 and older for their contributions to communities. This is the organization's most prestigious volunteer award.

The nominees' service must enrich the lives of others and be inspiring, courageous or innovative. The criteria also include an evaluation of how the nominee's work has influenced other people to serve. Applications are due by July 15. The winner will get $1,000 to donate to the charity of their choice.

MARYLAND

Underground Railroad walk AARP Maryland is supporting Montgomery County historian Tony Cohen, 62, as he retraces a portion of the 750-mile Underground Railroad from Maryland to Canada in a commemoration of the 250th anniversary of the American Revolution.

The pilgrimage follows 19th-century routes to freedom, telling the story of the brave self-liberators, the abolitionists and their secret networks. The walk starts on May 4 from Montgomery County's Sandy Spring, foundational home of the Quaker community, which was instrumental in the slavery-era Underground Railroad movement. The walk will make 10 stops at cities along the way. It ends near Niagara Falls, New York, crossing into Canada.

The Underground Railroad was a series of surreptitious transportation methods and safe houses that smuggled the enslaved out of the South. "The celebration will be about how far we've come in 250 years," Cohen says. See menare.org for more information on the walk.

PENNSYLVANIA

Food volunteers On the third Tuesday monthly, AARP Pennsylvania volunteers head to Second Harvest Food Bank of the Lehigh Valley to pack food for older adults and veterans.

"We couldn't do it without our volunteers," says Sarah Wassel, 37, of Martins Creek, associate executive director of the nonprofit.

Volunteer Judy Lentz, 74, of Schnecksville, says it's a way to give back to the community, especially to older folks who might not have money for food and medicines.

In 2025, Second Harvest chose AARP Pennsylvania as the Volunteer Group of the Year. Find more about AARP Pennsylvania and volunteer opportunities at aarp.org/pa. *—EP*

EVENTS & ACTIVITIES

AROUND THE REGION

For more information: **local.aarp.org.**



DELAWARE
AARP Delaware will share **job-hunting tips** at a workshop Wednesday, May 20, at 11 a.m. at the MOT Senior Center in Middletown. Go to **events.aarp.org/JumpStart.**



DISTRICT OF COLUMBIA
Get all the information you need to vote in the Tuesday, June 16, **D.C. primary election**. Find more voting details at **dcboe.org** and **aarp.org/DCVOTES**.



NEW JERSEY
Join AARP New Jersey's speakers to **help with presentations** in your community. Check **aarp.org/njspeakersbureau.** Applications are due by Wednesday, July 15.



PENNSYLVANIA
Find a free speaker for your community group on topics such as fighting scams. For details on the **AARP Speakers Bureau**, email pa@aarp.org



ALL STATES
Caregivers can find tips and resources at AARP's **caregiving guide.** Check **aarp.org/caregiving** and click on support and resources.

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[2]Average annual savings are derived from 6-month policy terms and based on information reported by customers who switched to The Hartford's newest rate plan between 9/1/24 and 8/31/25. Your savings may vary. Rate differences for AARP members and non-members vary by state and AARP membership tenure. [3]Terms and conditions may apply. **Accident Forgiveness is not available to CA policyholders.** [4]Gift is a limited time offer and not available in all states. Email address required in most states. Allow 4-7 weeks for delivery. Bag style and color may vary from image. Bottle not included.

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Readers Respond

SCAM STOPPERS

The best advice regarding scams like those in the article "Sunshine, Pickleball ... and Scams?" ["Fraud 2026: Your Guide to Spotting Scams," March/April] is "Just hang up" or "Just shut off your computer." Scammers are now targeting people in hospitals! A nurse told me unsolicited calls are made to phones in occupied rooms, and the hospital can't stop them. What a pain!

ELIZABETH BURT,
SIMSBURY, CONNECTICUT



I have one simple and effective strategy to avoid scams like those detailed in your cover package and, in fact, save money in many different ways: If I truly need or want a product or service, I go find it. If the product or service has to find me—whether it be via the internet, TV, mail or wherever—I must not need it, and I just ignore the solicitation.

BRUCE HERMAN,
BLACKSBURG, VIRGINIA

LESS MESS

The article "30 Days to a Decluttered Home" [March/April] suggests throwing out expired medications. But they should be disposed of properly: recycled at local pharmacies. They should not be put into the regular trash, as their chemicals can find their way into groundwater and create health hazards.

MARY JANE CURRY,
ROCHESTER, NEW YORK

ALIENATED BY AI

The article "Should You Take High-Tech Shortcuts at Work?" [March/April] touched on some issues with artificial intelligence but in my opinion did not go far enough. It is my belief that AI should not be allowed in business, academics or—most importantly—in our military. It is not reliable enough to be trusted.

KEVIN C. FOLTZ,
VANCOUVER, WASHINGTON

SAVE A BUCK

I have another tip to go along with the article "Drugstore Grocery Deals" [March/April]. Many offer a discount for seniors on certain days of the week. These usually apply to regularly priced items in store or online and sometimes require a code.

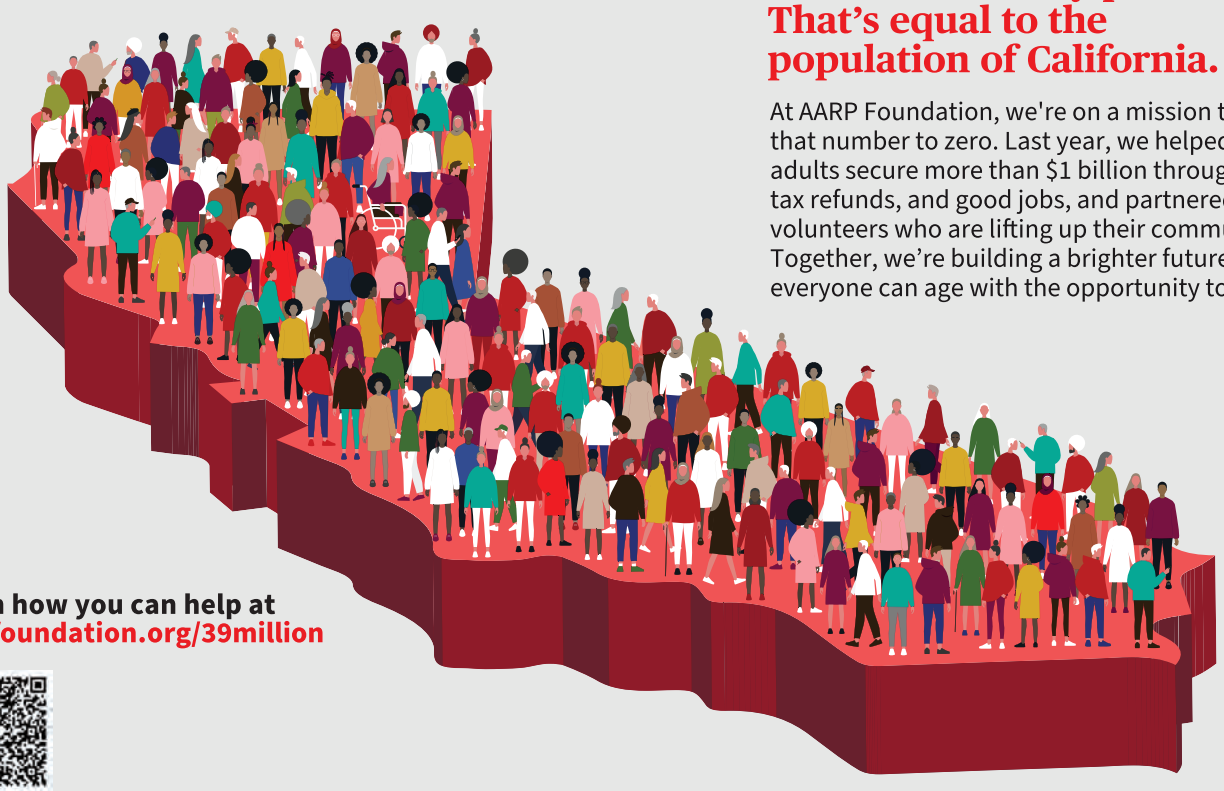
AMY PAPPAS,
CHAPPAQUA, NEW YORK

We appreciate hearing from you. Write to: *Bulletin* Editor, Dept. RF, 601 E St. NW, Washington, D.C. 20049, or email **bulletin@aarp.org.** Please include your address and phone number.

AARP Foundation

39 million older adults are threatened by poverty. That's equal to the population of California.

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Learn how you can help at aarpfoundation.org/39million

Social Security Simplified

BY TOM MARGENAU

I am 68 and receiving my own Social Security. I have been divorced twice. The second marriage ended after just a few years, but the first marriage lasted more than 10 years. When I called Social Security and asked if I could collect benefits from my first husband, who is getting his own Social Security, they said I could not because I had remarried. Is this true?
No, it's not. Because your second marriage ended, and because your first marriage lasted more than 10 years, you could be due divorced spousal benefits from your first husband, assuming your own retirement benefit is less than what you would be due on his account. The size of those divorced spousal payments could be anywhere from one-third to one-half of his benefit, depending on various factors—the primary one being how old you were when you started receiving your own benefits.

I am 60 years old and disabled, and I haven't been employed for several years. Can I file for Social Security disability benefits? I've heard that I need to have worked for 10 years to qualify.
Your eligibility for Social Security disability benefits depends not only on the length of your work record but also on how recently you worked. First, someone your age must have at least 40 Social Security credits, which usually means you must have worked for at least 10 years. Second, you must have worked in five out of the past 10 years.

I turned 62 in January of this year. I am thinking of retiring at the end of June and filing for my Social Security to start in July. I have a 16-year-old daughter who will be eligible for dependent benefits. I know the annual earnings limit for 2026 is $24,480. But I will make more than that by the time I retire. Will that cause a reduction in our benefits this year?
No, you likely won't see a reduction in your benefits for 2026. As you are already aware, people who file for their benefits before their full retirement age are subject to an earnings limit that may reduce their monthly benefit. And normally, $1 must be withheld from people's benefits for each $2 in earnings above that amount. But there is a special rule that applies only to the first year that you file for Social Security. It says that even if your earnings exceed the annual limit, your benefits won't be reduced for any month in which you earn less than the monthly limit. That monthly limit is always one-twelfth of the yearly limit, or $2,040 this year. In other words, assuming you do not earn more than $2,040 per month from July on, you and your daughter will get your regular benefits each month for the rest of the year. (Note that your retirement benefit for July will arrive in August, because Social Security payments are always for the prior month.)

My ex-wife and I are each getting our own Social Security. We were married for nine years before getting a divorce. If we remarry, how long would we have to be married before she would be eligible for widow's benefits if I die first?
In most cases, a couple must be married for nine months before a surviving spouse would be due widow's or widower's benefits. But one of the exceptions to that rule is that if a couple was married before and that prior marriage lasted more than nine months, there is no duration-of-marriage requirement.

Tom Margenau, a 32-year veteran of the Social Security Administration, is the author of Social Security: Simple and Smart.

Go to **aarp.org/ssquestions** to submit a question for our Social Security experts, or visit **aarp.org/social-security** to ask our chatbot.

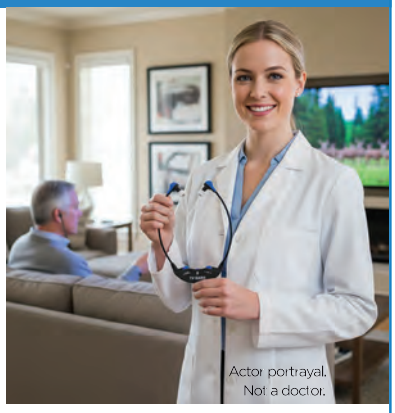
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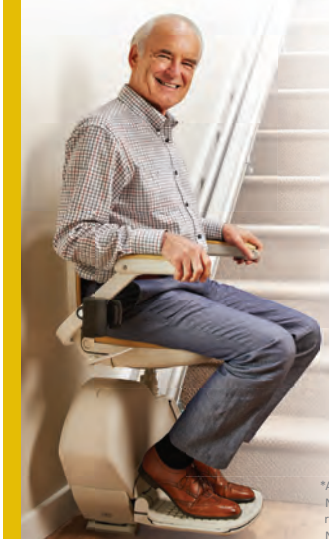
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