



March 2021 <https://boomerbestu.com> Issue No. 24

50+Living our best lives now and in the future!

Reinvention: When the Whole is Greater Than Its Parts

Wendy Marx, MSW, MS., MBA, jokes that she has “enough master’s degrees to sell them on the black market.” She has applied her background by helping others as a personal branding and reinvention coach. She has also drawn on her experience writing a book and starting a live series on LinkedIn called Renewal at 50+.



A Personal Reinvention

Initially, Wendy earned a degree in social work. “I was interested in aging issues knowing that there would be a huge bump in older people with the graying of baby boomers.” She applied her knowledge and interests by working as a social worker in a significant geriatric center in NYC.

Later, Wendy used her experience by writing a master’s thesis at Columbia University Journalism School about poor older adults in NYC. She was paid to write her thesis and was awarded a

fellowship by a foundation that published it. “So, I was able to right off the bat to use some of my social work experience in my journalism work.”

“After graduating from journalism school, I worked as a newspaper reporter for several chain newspapers. The work, while exhilarating, was very stressful. Many days, I had to report and write three stories. I could have made more money flipping hamburgers at McDonald’s. For that reason, I went back to school to get my MBA in marketing.”



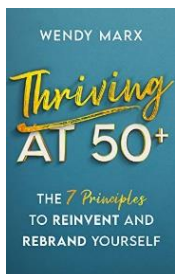
A Perfect Fit

“I love to promote other people and am proud, during the course of my career, that I’ve taken many people from relative anonymity to industry icons. For me, it’s shaping someone’s story.”
“A lot of people are not good at branding themselves, especially people 50+. We were taught that our work speaks for itself. Today, that’s not enough.”

“PR was a natural fit for me with my journalism background. And by applying my marketing skills, I was able to brand clients and offer more opportunities to develop leads than the typical PR initiative.

Helping Those 50+ Tell Their Stories

Wendy's book, *Thriving 50+: The 7 Principles to Reinvent and Rebrand Yourself* offers valuable



information on how we tell our own stories—stories that have the power to influence how we see ourselves and how others see us.

“If you tell yourself that you can't do something, you start believing it. As one of the people I quoted in my book says, ‘You can look in the mirror and see yourself as a pussycat. Or you can look in the mirror and realize you're a lion.’ Our stories help frame our perception of ourselves. It is also important when you tell a story to have a beginning, middle, and end (as in any good story). The beginning is what you did, the middle is your present, and the end is where you're heading. This gives coherence to a life journey.”

“People 50+ have so much wisdom and knowledge, but unfortunately are too often considered surplus baggage in our society. In my book, I mention how being 50+ is can be akin to being an immigrant. You don't speak the current lingo and don't feel part of the dominant culture. Yet, you have so much to offer if given a chance.”

A Learning Opportunity

“I wrote my book because I wanted to understand how people cope with being 50+ and often needing to work, and the traits, qualities, and skills that benefit them. I discovered the amazing resilience of people 50+ and that it is possible to reinvent and rebrand yourself at any age. Doing so is part of what keeps us vital, energized, and living a life of purpose and meaning.”

A New Growth Opportunity

Later in March, Wendy will be starting her LinkedIn Live Series, *Renewal at 50+*. It will run twice a month. “One session will include a guest who I'll interview; the second session will be interactive

where I'll do a personal brand makeover with a volunteer or some other activity.” Click on the link to learn more: [linkedin.com/in/wendymarx](https://www.linkedin.com/in/wendymarx).

Advice for Living Your Best Life



“Don't go it alone. Join a support group. Or, create your own support group of friends, colleagues, and mentors. Or, hire a coach. Even a coach needs a coach. I recently hired a marketing coach for myself. While I am an expert at marketing others, I'm not as good at marketing myself. Don't think you'll

change or move forward by sitting on the couch and contemplating. It's important to act, and in acting, you'll discover what's important to you. People often think insight leads to action when it's the reverse: Action leads to insight.”

Everyone Needs Downtime

“I work very hard at being mediocre at tennis. I love that tennis is social yet doesn't require much equipment. It is also wonderful therapy. I also like to do pilates, yoga, and take walks in a park near me. I am taking up water coloring as a way to do something creative and completely different. And I love to read.”

Connecting

“If people want a vibrant dose of tips and insights into thriving at 50+, they can sign up for my free, monthly newsletter: <https://thrivingat50plus.com/join-newsletter/>.”

To contact Wendy, email wendy@thrivingat50plus.com or connect with her on LinkedIn: [linkedin.com/in/wendymarx](https://www.linkedin.com/in/wendymarx)

To learn more about her work, follow Wendy on Twitter @wendymarx, visit her website: [thrivingat50plus.com](https://www.thrivingat50plus.com), and follow her on Facebook <https://www.facebook.com/Thriving-at-50-102919031641146>

Your Life According to You

As we get older, it is easier to recognize we live in a culture that consistently reinforces negative views of aging. Advertisers, media, and some employers may try to define us using age-biased stereotypes.

According to the [World Health Organization](#), age bias (ageism) “is socially accepted and usually unchallenged because of its largely implicit and subconscious nature.”

[WHO](#) also states, “As we get older, we experience ageism from others, but also from ourselves because of the unconscious internalization of society’s negative attitudes towards older people.”

What are the potential consequences of internalizing negative views of aging? Evidence suggests that such views could actually shorten our lifespan by an average of 7.5 years compared to those who have positive views of aging.

One way we can counter age bias is to tell our own stories—stories that “help frame our perception of ourselves” and influence how others see us.

What are some positive stories you can start telling yourself and others about what you’ve learned so far, who you are today, and what your goals are for the future?

Calling Out Stereotypes

Dr Bill Thomas, co-founder of [Changing Aging](#) argues that the term “elderly” “amplifies decline and dismisses potential for growth. Further, he notes that most “older people never use the word to refer to themselves.”

As the [Columbia Journalism Review](#) notes, the 2020 AP Stylebook recommends treading carefully when using the term “elderly” as it stereotypes people rather than identifies them as individuals.

Nonetheless, advising against using stereotypical language is not the same as putting it into practice.

To help writers shift towards more respectful language, we have the power to gently encourage them to be more mindful of the language they use; that is precisely what Susan Uravich of Douglas County, Oregon did.

When Susan read an article in a local newspaper that included the term “elderly” about an older man, she contacted the reporter about this language choice. In response, the reporter thanked her and did mention that the AP Stylebook offered similar guidance. He then added, “We will think twice about using senior citizen or elderly in future stories. Thanks for keeping us honest.”

Thank you, Susan, for being a positive change agent!

Register for the Next Playbook Webinar: Understanding Your Goals & Objectives

[Ben James](#), CFA, CFP, is the founder of Elevate Wealth Management and the author of [The Playbook: 7 Fundamentals of Financial Planning](#). Ben is offering free quarterly webinars on the Playbook process.



The next webinar will be held on Wednesday, April 28, 2021, from 5:30 p.m. to 6:30 p.m. The topic will be: **Understanding Your Goals and Objectives.**

“We document our goals because it’s the first step in successfully accomplishing them. We clearly articulate our goals so those who help us understand what we are after. Finally, spending time on our goals allows us to reflect and refine them.”

Moderator: Ben James, CFA, CFP

Guest Speakers: Brian and Maryann Remsburg, owners of Adventurous Life Coaching

To register for the free April webinar, click [here](#).

A Tale of Two Hospitals: A Communication Perspective

Mark Lachs, MD, author of *Treat Me Not My Age: A Doctor's Guide to Getting The Best Care As You Or A Loved One Gets Older*, claims it is almost impossible to live a long life without ending up in the hospital at least once as we age. He also explains that good healthcare communication is an integral part of our ongoing care. Further, he emphasizes that we all have a responsibility to make sure that we get vital communication important for our best healthcare.

Last month, my husband unexpectedly ended up in a local emergency room where he received immediate and likely life-saving care. But then he was admitted to the hospital and ended up in what felt like a communication vacuum. When I called or visited the hospital, the nurses could not give me any information on my husband's condition. No one talked to him about a discharge plan. We were told that everyone was very busy—and they were. After two days, my husband decided to discharge himself—a process that took nearly seven hours. Before I took him home, I asked to speak to the hospitalist—the doctor in charge of his care. The doctor answered my questions and put together a discharge plan. His communication was clear, professional, and courteous.

Ten days later, my husband was back in the emergency room again but for an unrelated issue. This time he was experiencing a massive hemorrhage. The ER physician in charge decided to have my husband life-flighted to a hospital 130 miles away in Portland, Oregon. By the time he arrived in Portland, he was experiencing hemorrhagic shock and had to have a complete blood infusion to save his life.

Because I had read Dr. Lach's book, I didn't make any assumptions about what information the hospital in Portland had received about my husband's health history. I brought my husband's medical information, a list of prescriptions, and his doctor's name and phone number with me to the hospital in

Portland. I also left a message for my husband's doctor, letting him know what had transpired.

One of the doctors caring for my husband met with me in front of the hospital when I arrived. She explained my husband's condition and what the plan was for his recovery. The doctor also told me that they hadn't yet received any information from our rural hospital. I gave her a list of my husband's prescriptions (which included a blood thinner), necessary medical information, and his regular doctor's name and number.

My husband was in the Portland hospital for five days. Each day, I either communicated F2F with doctors and nurses or got calls from them.

After two days, my husband was moved from the ICU to a progressive care unit. A case manager then met with my husband and me to talk about discharge plans. The next day, my husband and I met with an occupational therapist. That same day, my husband and I had a meeting with the hospitalist, who explained steps forward and answered our questions. Notably, this hospital had a [patient satisfaction rating](#) of four out of five stars.

Our family, friends, and neighbors offered invaluable care and support during my husband's hospitalizations. Some encouraged us to move closer to an area with "better" healthcare. As we thought it over, we realized we already had good healthcare available in our community. However, we now know it is critical to advocate for the healthcare and communication we need to get the most appropriate care. Being proactive about our healthcare is our responsibility no matter where we might live.

"Extensive research has shown that no matter how knowledgeable a clinician might be, if he or she is not able to open good communication with the patient, he or she may be of no help."

([The Institute of Healthcare Communication](#))

[Subscribe/ Unsubscribe](#)

