In this issue of Outlook, we hope to stimulate your thinking with articles on working later in life; on the good news about coffee; and on the question of when keeping secrets can help us. We welcome your feedback to these articles.

Public Benefits Counseling: A new service at the EAP. Many working people do not realize that they or members of their families may be eligible for public benefits or advocacy services related to housing, health care, or emergency needs. Hunter College employees will have an opportunity to learn more about public benefits, understand the public benefits system and find out if they or a member of their family may be eligible for one or more services.

We also want to invite you to join us at any or all of our lunchtime seminars. This semester we are offering a broad range of topics from Feng Shui to Social Security. Come share lunch with your colleagues while gaining some new information. We look forward to seeing you.

THE SECRET LIVES OF JUST ABOUT EVERYBODY

One misplaced credit card bill or a single dangling e-mail message on the home computer would have ended everything: the marriage, the big-time career, the reputation for decency he had built over a lifetime. So for more than 10 years, he ruthlessly kept his two identities apart: one lived in a Westchester hamlet and worked in a New York office, and the other operated mainly in clubs, airport bars and brothels. One warmly greeted clients and waved to neighbors, sometimes only hours after the other had stumbled back from a “work” meeting with prostitutes or cocaine dealers. In the end, it was a harmless computer pop-up advertisement for security software, claiming that his online life was being “continually monitored,” that sent this New York real estate developer into a panic and to a therapist.

The man’s double life is an extreme example of how mental anguish can cleave an identity into pieces, said his psychiatrist, Dr. Jay S. Kwawer, Director of Clinical Education at the William Alanson White Institute in New York, who discussed the case at a recent conference. But psychologists say that most normal adults are well equipped to start a secret life, if not to sustain it. The ability to hold a secret is fundamental to healthy social development, they say, and the desire to sample other identities—to reinvent oneself, to pretend—can last well into adulthood. And in recent years researchers have found that some of the same psychological skills that help many people avoid mental distress can also put them at heightened risk for prolonging covert activities.

“In a very deep sense, you don’t have a self unless you have a secret, and we all have moments throughout our lives when we feel we’re losing ourselves in our social group, or work or marriage, and it feels good to grab for a secret, or some subterfuge, to reassert our identity as somebody apart,” said Dr. Daniel M. Wegner, a Professor of psychology at Harvard. He added, “And we are now learning that some people are better at doing this than others.” Although the best-known covert lives are the most
spectacular-the architect Louis Kahn had three lives; Charles Lindbergh reportedly had two—these are exaggerated examples of a far more common and various behavior, psychologists say. Some people gamble on the sly, or sample drugs. Others try music lessons. Still others join a religious group. They keep mum for different reasons.

And there are thousands of people—gay men and women who stay in heterosexual marriages, for example—whose shame over or denial of their elemental needs has set them up for secretive excursions into other worlds. Whether a secret life is ultimately destructive, experts find, depends both on the nature of the secret and on the psychological makeup of the individual. Psychologists have long considered the ability to keep secrets as central to healthy development. Children as young as 6 or 7 learn to stay quiet about their mother’s birthday present. In adolescence and adulthood, a fluency with small social lies is associated with good mental health. And researchers have confirmed that secrecy can enhance attraction, or as Oscar Wilde put it, “The commonest thing is delightful if only one hides it.”

In one study, men and women living in Texas reported that the past relationships they continued to think about were most often secret ones. In another, psychologists at Harvard found that they could increase the attraction between male and female strangers simply by encouraging them to play footsie as part of a lab experiment. The urge to act out an entirely different persona is widely shared across cultures as well, social scientists say, and may be motivated by curiosity, mischief or earnest soul-searching. Certainly, it is a familiar tug in the breast of almost anyone who has stepped out of his or her daily life for a time, whether for vacation, for business or to live in another country.

“It used to be you’d go away for the summer and be someone else, go away to camp and be someone else, or maybe to Europe and be someone else” in a spirit of healthy experimentation, said Dr. Sherry Turkle, a sociologist at the Massachusetts Institute of Technology. Now, she said, people regularly assume several aliases on the Internet, without ever leaving their armchair: the clerk next door might sign on as bill@aol.com but also cruise chat rooms as Armaniguy, Cool Breeze and Thunderboy. Most recently, Dr. Turkle has studied the use of online interactive games like sims Online, where people set up families and communities. She has conducted detailed interviews with some 200 regular or occasional players, and says many people use the games as a way to set up families they wish they had, or at least play out alternative versions of their own lives.

One 16-year-old girl who lives with an abusive father has simulated her relationship to him in Sims Online by changing herself, variously, into a 16-year-old boy, a bigger, stronger girl and a more assertive personality, among other identities. It was as a more forceful daughter, Dr. Turkle said, that the girl discovered she could forgive her father, of not change him. “I think what people are doing on the Internet now,” she said, “has deep psychological meaning in terms of how they’re using identities to express problems and potentially solve them in what is a relatively consequence-free zone.”

Yet out in the world, a consequence-rich zone, studies find that most people find it mentally exhausting to hold onto inflammatory secrets—much less lives—for long. The very act of trying to suppress the information creates a kind of rebound effect, causing thoughts of an affair, late-night excursions or an undisclosed debt to flood the consciousness, especially when a person who would be harmed by disclosure of the secret is nearby. Like a television set in a crowded bar, the concealed episode seems to play on in the mind, attracting attention despite conscious efforts to turn away. The suppressed thoughts even recur in dreams, according to a study published last summer.

The strength of this effect undoubtedly varies from person to person, psychiatrists say. In rare cases, when people are pathologically remorseless, they do not care about or even perceived the potential impact of a secret on others, and therefore do not feel the tension of keeping it. And those who are paid to live secret lives, like intelligence agents, at least know what they have signed up for and have clear guidelines to tell them how much they can reveal to whom.

But in a series of experiments over the past decade, psychologist have identified a larger group they call repressors, an estimated 10 to 15 percent of the population, who are adept at ignoring or suppressing information that is embarrassing to them and thus well equipped to keep secrets, some psychologists say.

Repressors score low on questionnaires that measure anxiety and defensiveness—reporting, for example, that they are rarely resentful, worried about money, or troubled by nightmares and headaches.
They think well of themselves and don’t sweat the small stuff. Although little is known about the mental development of such people, some psychologists believe they have learned to block distressing thoughts by distracting themselves with good memories. Over time, with practice, in effect—this may become habitual, blunting their access to potentially humiliating or threatening memories or secrets.

“‘This talent is likely to serve them well in the daily struggle to avoid unwanted thoughts of all kinds, including unwanted thoughts that arise from attempts to suppress secrets in the presence of others,'” Dr. Wegner, of Harvard, said in an e-mail message. The easier it is to silence those thoughts and the longer the covert activity can go on, the harder it may be to confess later on.

In some cases, far stronger forces are at work in shaping secret lives. Many gay men and some lesbians marry heterosexual partners before working out their sexual identity, or in defiance of it. The aim is to please parents, to cover their own shame or to become more acceptable to themselves and society at large, said Dr. Richard A. Isay, a psychiatrist at Cornell University who has provided therapy to many closeted gay men. Very often, he said, these men struggle not to act on their desires, and they begin secret lives in desperation. This eventually forces agonizing decisions about how to live with, or separate from, families they love. “I know that I did not pursue the orientation that I have, and know that I have always been as I am now,” one man wrote in a letter published in Dr. Isay’s book “Becoming Gay.” “I know that it becomes more difficult to live in the lonely shell that I do now, but can see no way out of it.”

When exposure of a secret life will destroy or forever poison the public one, people must either come clean and choose, or risk mental breakdown, many therapists say. Dr. Seth M. Aronson, an assistant professor of psychiatry at Mount Sinai School of Medicine, has treated a pediatrician with a small child and a wife at home who was sneaking off at night to bars, visiting prostitutes and even fighting with some of the women’s pimps.

At one session, the man was so drunk he passed out; at another, he brought a prostitute with him. “It was one of those classic splits, where the wife was perfect and wonderful but he was demeaning these other women,” and the two lives could not coexist for long, Dr. Aronson said. In a famous paper on the subject of double lives, published in 1960, the English analyst Dr. Donald W. Winnicott argued that a false self emerged in particular households where children are raised to be so exquisitely tuned to the expectations of others that they become deaf to their own longings and needs. “In effect, they bury a part of themselves alive,” said Dr. Kwawer of the White Institute.

The pediatrician treated by Dr. Aronson, for example, grew up in a fundamentalist Christian household in which his mother frequently and disapprovingly compared him to his uncle, who was a rogue and a drinker. Dr. Kwawer’s patient, the real estate developer, had parents who frowned on almost any expression of appetite, and imprinted their son with a strong sense of upholding the family image. He married young, in part to please his parents.

Both men are still getting psychotherapy but now live one life apiece, their therapists say. The pediatrician has curtailed his extracurricular activities, returned home mentally and confessed some of his troubles to his wife. The real estate developer has separated from his wife, but lives close by and helps with the children. The break caused a period of depression for everyone involved, Dr. Kwawer said, but the man now has renewed energy at work, and has reconnected with friends and his children. The secret trysts have stopped, as has the drug use, and he feels he has his life back.

“Contrary to what many people assume,” Dr. Kwawer said, “quite often a secret life can bring a more lively, more intimate, more energized part of themselves out of the dark.”


IS A LONGER WORK LIFE HEALTHY FOR YOU? Working beyond midlife offers pluses and minuses. Here are a few.

More than half of women ages 55-64 are working or looking for work—twice as many as in 1950. Many of these women are at the peak of their careers; others simply enjoy working and have no desire to quit. Fortunately for them, most jobs no longer have mandatory retirement ages, and changes in Social Security and private pension rules have made it more attractive to keep working.

Many other women work out of necessity, not by choice. A woman age 65 today can expect to live, on average, at least another 20 years. She may not have the financial wherewithal to cover another two decades’ worth of expenses. She may need a paying job to offset inadequate Social Security benefits, retirement income depleted by stock market losses, or health care costs not covered by insurance. Older women and their partners may still be paying off mortgages or their children’s college debts. Women who are single, divorce, or widowed may be worse off financially.

For these and other reasons, a growing number of women in their 50s and 60s plan to keep working at least into their 70s. Several factors influence a woman’s ability to enjoy a longer work
life. Here are some things to keep in mind.

THE BENEFITS OF WORK IN LATER LIFE

The prestigious MacArthur Foundation Study of Aging in America has identified three key ingredients to successful aging: low probability of disease and disability, high mental and physical function, and active engagement with life. Work, whether paid or unpaid, can help fulfill two out of three of these requirements. A job that challenges your intellect, requires you to take initiative and make choices, and gives you confidence in your ability to handle a variety of situations can keep your mind sharp—much as physical workouts keep your body in shape. By “active engagement with life,” the MacArthur researchers mean close personal relationships and the pursuit of activities that produce something of value, be it a product or a service, such as providing nursing care or babysitting for a neighbor. Work can provide both of these.

Working also engenders a sense of optimism about aging. In a poll conducted in 2002 among women ages 50 and over, Brandeis University’s National Center on Women and Aging found a link between working and positive attitudes toward aging. Older working women were more likely than their nonworking counterparts to feel positive about growing older, to report being in good physical health, and to anticipate a better financial future.

Finally, research suggests that people who feel they’re making a difference in a role they believe is important may live longer than those who feel less effective or valuable. So the work we choose in our later years, whether paid or volunteer, could actually extend our lives.

ON THE OTHER HAND

Not all work is good for us. Some jobs cause unrelenting stress that can make us sick. The classic model of a harmfully stressful job is one with high demands (too much to do into little time), low control (little say about how you do your work), and little support from supervisors, coworkers, or both. Studies have shown that women in such jobs can suffer a serious mental and physical decline within a few years. That doesn’t happen to women whose jobs allow them to use their skills and participate in decision-making.

A WORKING FUTURE

In a tight job market, women may feel they don’t have much choice about the work they do. But opportunities for older women appear to be improving. The reasons are complex, involving changes in social attitudes as well as legal and political efforts. But the main factors are the growth of the American economy and the relatively small number of young people entering the labor market today—compared, say, to the era of the Baby Boomers.

As a result, businesses are increasingly willing to turn to older workers, whose strengths include maturity, reliability, adaptability, experience, loyalty, and a keen desire to work. With age, it may take a little longer to learn something new or to recall things such as numbers or names on demand. But researchers have found that in most cases, practice and effort can compensate for these minor changes.

You may find this is a good time to change careers or work part-time. To maximize your chances of finding work that you like or to make your current work more enjoyable, investigate career development or training opportunities (especially in computer skills) at your work place or in your community. Your best career may lie ahead of you.

SOME HELPFUL RESOURCES


For a more extensive list of resources for older working women and women looking for work, paid or volunteer, visit our Web site: www.health.harvard.edu/women.

COFFEE: FOR MOST, IT’S SAFE

Coffee has been blamed for everything from moral turpitude to cancer. But none of the bad raps have stuck. Coffee may even be good for you.

Despite 20 years of reassuring research, many people still avoid coffee* because they worry about its health effects. Their concerns are understandable. Older studies had linked coffee to a range of health problems, including pancreatic cancer and heart disease. But this early research didn’t take into account the real culprit: cigarette smoking, which was once a common habit of many coffee drinkers.
We now know that in moderation—that is, a few cups per day—coffee is a safe beverage. New research suggests it even offers some health benefits. Unless otherwise indicated, “coffee” refers to coffee containing caffeine, not to decaffeinated coffee.

Coffee isn’t totally innocuous. Its main active ingredient, caffeine, is a mildly addictive stimulant. Getting too much may give you the jitters, keep you awake, and make you irritable. If you’re a regular coffee drinker and miss your morning dose, you may get a splitting headache. Some people develop indigestion, stomach problems, or other intestinal distress when they drink coffee. And inconclusive research suggests that high doses of coffee can contribute to bone loss. But for most people, coffee in moderation is harmless.

If you don’t enjoy coffee or it bothers you, don’t drink it. But if you consider it one of life’s pleasures, a rundown of some of the latest findings on coffee’s health effects may assuage your concerns.

**CARDIOVASCULAR EFFECTS ARE MODEST** Coffee has several cardiovascular effects.

*Constricted arteries.* The caffeine in a cup of coffee can constrict arteries that lie in areas away from the heart and lungs, such as the brain. This is one reason drinking a cup of coffee sometimes relieves a throbbing headache caused by dilated blood vessels in the brain. It’s also why caffeine is added to several over-the-counter analgesics.

*Increased heart rate.* In some people, coffee can slightly speed the heart rate.

*Increased blood pressure.* A cup of coffee temporarily boosts blood pressure, in much the same way as an activity such as climbing stairs does. But a coffee habit doesn’t cause chronic high blood pressure. And several studies have found that blood pressure changes tend to occur only in people who don’t usually drink coffee.

*Irregular heartbeat.* The American Heart Association says that caffeine (which is also found in tea, some soft drinks, and chocolate) may cause an occasional irregular heartbeat. If you think coffee affects you this way, slowly cut back on the amount you drink each day, and talk to your clinician.

*Increased cholesterol levels.* The coffee oils kahweol and cafestol can increase levels of total and LDL (bad) cholesterol. Paper filters trap these compounds, so they’re not found in most cups of coffee in America, and are a problem only for those who drink espresso, pressed, boiled, or other unfiltered coffee.

**Homocysteine.** Several studies have linked coffee consumption to increased levels of homocysteine, a substance in the blood that may increase the risk for heart disease. A Dutch study found that while caffeine alone (the amount in 4 cups of strong coffee) raised homocysteine levels by 5%, getting that amount in coffee more than doubled the effect. This suggests that compounds other than caffeine are involved. But high homocysteine levels are also associated with some nutritional deficiencies (such as low folate). In one study, coffee had no effect on homocysteine levels in people who ate a healthy diet.

**Heart disease.** The American Heart Association has concluded that moderate coffee use (which it defines as 1-2 cups per day) is not harmful. And large, long-term studies (including Harvard’s Nurses’ Health Study) have found that drinking even as many as 5-6 cups of coffee a day doesn’t increase the risk for heart disease.

**FOR WOMEN ONLY**

Many women, particularly those of childbearing age, wonder whether coffee and other caffeine-containing foods and drinks are safe for them. Fortunately, there’s plenty of scientific evidence about the effects of coffee and caffeinated beverages on women’s health.

**Fertility.** There’s no credible evidence that caffeine lowers a woman’s fertility.

**Pregnancy.** Although the evidence is somewhat mixed, low caffeine consumption (1-2 cups per day) appears to be safe during pregnancy. Most of the studies that have linked caffeine to miscarriage, birth defects, or low birth weight have either not taken into account other factors, or involved higher levels of caffeine or coffee consumption (more than 300 mg of caffeine, or more than 3 cups of coffee, per day). Last year, a Danish study published in the British Medical Journal found that pregnant women who drank 4 or more cups of coffee per day were at increased risk of stillbirth. Most authorities, including the FDA, the March of Dimes, and the American College of Obstetricians and Gynecologists, agree that pregnant women should limit their consumption of caffeine to the equivalent of no more than 1-2 cups of coffee (about 100-200 mg of caffeine) per day.

**Breast health.** Some women believe that abstaining from coffee and caffeinated beverages alleviates the symptoms of fibrocystic breast disease (a condition of benign lumps in the breast). The available research does not support this association.
**Cancer.** Over the years, some flawed studies have linked caffeine and coffee to several cancers, including cancers of the breast and ovaries as well as the pancreas and bladder. More thorough investigations carried out in the past 10-15 years have found no connection between coffee and cancer. The American Cancer Society has concluded that caffeine is not a risk factor for cancer.

**Osteoporosis.** Although caffeine can increase urinary excretion of calcium, the jury is still out on whether it’s a factor in osteoporosis. Some studies, including Harvard’s Nurses’ Health Study, suggest that drinking 4 cups or more per day can contribute to bone loss and hip fracture. On the other hand, one study of lifetime coffee drinking (amounting to 2 cups per day) found no evidence of bone loss in women who also drank at least 1 cup of milk per day. Until we know more, it’s best to avoid heavy coffee consumption. Women who regularly drink coffee and caffeinated beverages should also be sure they get adequate calcium (1,000-1,200 mg per day) from food and supplements.

**Possible benefits.**

Most studies investigating the health effects of coffee or caffeine consumption have focused on possible harms. But some large investigations have identified several potential benefits from coffee drinking.

**Diabetes.** The risk for type 2 diabetes is lower among regular coffee drinkers than among those who don’t drink coffee. In two studies, Harvard researchers found that women who drank 6 cups or more per day reduced their risk for type 2 diabetes by 30% (*Annals of Internal Medicine*, Jan. 6, 2004). This result is particularly significant because the studies tracked a total of 125,000 men and women for a dozen years of more. Similarly, Finnish scientists following nearly 15,000 men and women, ages 35-64, found that women who drank 3-4 cups per day had a 29% lower risk for diabetes, and drinking 10 or more cups per day lowered the risk even further (*Journal of the American Medical Association*, March 10, 2004). But no one is recommending that women drink 10 cups a day, or even more than 3 or 4 cups. Not enough is known about its other effects at high doses. We know that it may be harmful in some circumstances, including pregnancy.

**Gallstones.** A Harvard study found that women who drink 4 cups of coffee per day have a reduced risk of developing gallstones. Coffee may alter the metabolism of bile acids, which trigger the formation of the cholesterol crystals that become gallstones. Coffee also stimulates gallbladder contractions, which may curb stone formation.

**Colon cancer.** Several studies have found a reduced risk of colon cancer in people who drink 4 or more cups of coffee per day, compared with those who rarely or never drink coffee. German researchers reported last year that they identified an antioxidant in coffee called methylpyridinium, which boosts the activity of enzymes that may discourage the development of colon cancer. The compound is found in both regular (caffeine-containing) and decaffeinated coffee.

**Cognitive function.** Research involving older men and women participating in the Rancho Bernardo Study found that lifetime coffee intake is associated with better performance by women (but not men) on several cognitive tests. No relationship was found between cognitive function and decaffeinated coffee consumption.

**Performance.** Caffeine has been shown to improve endurance performance in long-duration physical activities such as running, cross-country skiing, and cycling. Studies suggest this effect occurs at doses of 2-9 mg of caffeine per 2.2 pounds of body weight. This is about the amount of caffeine found in 2-5 cups of coffee.

**Liver disease.** Researchers at the National Institute of Diabetes and Digestive and Kidney Diseases have found a strong association between coffee drinking and a reduced risk for liver damage in people at high risk for liver disease. This includes heavy drinkers of alcohol, people with hepatitis B or C, and those with iron overload disorders, such as hemochromatosis. The highest consumption, more than 2 cups of coffee per day, was correlated with the greatest benefit.

**Parkinson’s disease.** Several large studies have shown a reduced risk for Parkinson’s disease in coffee drinkers. Although most of the data come from research in men, a 2001 Harvard School of Public Health study found that women who consumed 1-3 cups of coffee per day had a 50% reduction in risk for Parkinson’s disease, with no increased benefit at higher levels of intake.

**The upshot**

Those who view their morning coffee as a guilty pleasure can banish their misgivings. The latest research discounts the notion that moderate coffee consumption—which we interpret to be about 2-4 cups per day—causes significant or lasting harm. Indeed, some studies suggest that coffee and caffeine may offer some real health benefits.

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**STAYING ALERT WITH COFFEE**

Many of us like to drink a cup or two of coffee in the morning to get going, and perhaps take another cup in the afternoon. But new research suggests that you’ll stay more alert, particularly if you’re fighting sleep deprivation, if you spread your coffee consumption over the course of the day. For instance, if you usually drink 16 ounces in the morning, try taking a 2-ounce serving every hour or so.

Excerpted from the September 2004 issue of the Harvard Women’s Health Watch® 2004 President and Fellows of Harvard College. Individual subscriptions ($72.00 per year) and bulk subscriptions (reduced rates on 10 or more copies per month) available. Contact the Harvard Women’s Health Watch, P.O. Box 420068, Palm Coast, FL, 32141-0068.
PUBLIC BENEFITS: A NEW SERVICE AT THE HUNTER COLLEGE EMPLOYEE ASSISTANCE PROGRAM

Many working people do not realize that they or members of their families may be eligible for public benefits program or advocacy services related to their housing, health care, or emergency needs. Now, Hunter College employees have an opportunity to learn more about public benefits, understand the public benefits system and find out if they or a member of their family may be eligible for one or more services.

ACES, the Advocacy, Counseling and Entitlement Services Project of the Community Services Society, trains, and places volunteers in social service settings to provide this kind of information. ACES volunteer Sheila Salmon, is at the Employee Assistance Program at Hunter College one day a week to help people find the answers they need and to assist in filling out application forms about these and other programs:

- Food Stamps
- Public Housing
- Crime Victim Services
- Social Security Disability Insurance
- Senior Citizens Rent Increase Exemption Program
- Medicare HMO Plan
- Social Security Benefits

Do you know? Your taxes help pay for many benefit programs. Even if you are working, you may be eligible for certain government benefits. Some benefits depend on your income. Some are available to everyone regardless of income.

- Victims of a crime may be entitled to reimbursement for non-covered medical services; repair or replacement of essential personal property lost as a direct result of a crime; and transportation costs for necessary court appearances in connection to prosecution of a crime.

- A surviving divorced spouse who was married at least 10 years before the divorce to a person eligible for Social Security is entitled to all the Social Security benefits of a widow or widower. Receiving benefits does not impact on the amount of benefits to any other eligible family member.

- You may be eligible for an exemption of the school portion of your property tax through the New York State Tax Relief Program (STAR) if your primary residence is an owner occupied home, cooperative or condominium apartment. No income limits are required.

- If you are temporarily disabled and cannot use mass transit, you may be eligible for Access-A-Ride, which will provide pick-up and drop-off service in any of the five boroughs.

You can discuss these issues and other concerns with: Sheila Salmon, ACES Volunteer, Tuesdays, 11AM to 3PM, Room West 1335, 212-772-4051 at the Hunter College Employee Assistance Program. This is a free and confidential service available to all Hunter College employees and their families.

The Hunter College Employee Assistance Program is pleased to offer the following lunch-time seminars. All Hunter College Faculty and Staff are welcome to attend. Feel free to bring your lunch!

LUNCHTIME SEMINAR SERIES

Demystifying the College Admissions Process- This seminar, targeted for high school students, in their freshman through junior years, as well as their parents, uses a step-by-step approach to demystify the college admissions process.

Seminar I- will focus on the selection process, including areas such as: self-assessment; application evaluation; college agendas; timeline for standardized exams (SAT I, ACT) as well as both the student’s and parent’s roles within the process.

Seminar II- will focus on the application process; application components; extracurricular activities; powerful essay writing; inclusion of supplemental materials; the importance of strong counselor and teacher recommendations and evaluations; productive campus visits; skillful campus or alumni interviews; ways to demonstrate interest.

- This is a two-part seminar-attendees must sign up for both sessions.

Wednesday, March 9th and 16th, 1:30-2:30PM, 415HW. Presenter: Bev Taylor, College Admissions Consultant

New York’s 529 College Savings Plan-Make Saving for College Easy!

Be ready when the bell rings for you or your loved ones to go to college or graduate school! This seminar will outline:

*How to enroll
*How to invest directly through the Hunter College payroll
Your investment options
Qualifying for free money for college through Upromise Rewards program* New York State income tax deduction; federal and state income tax-deferred growth. **Wednesday, March 23rd, 1:30-2:30PM, 415 West. Presenter: Peter Dao, Program Manager Upromise, Inc.**

Retirement: Life After Work-As people reach retirement age many discover that ending a career is a major life transition. While retirement often means a new beginning, it also involves the loss of identity, community and income—issues that aren’t always easy to deal with. This seminar presents options for the “new” retiree or those thinking of retiring. Explore your dreams and hopes about retirement and plot your life in the liberated zone. **Wednesday, April 6th, 12:30-1:30PM, WEST 1337. Presenter: Barbara Rubin, PhD, Professor Emeritus, New Jersey University, has contributed to the book: Women Confronting Retirement: A Non-Traditional Guide published by Rutgers University Press, 2003 and has written and conducted workshops on the subject of retirement.**

Feng Shui- Come join us for an informative and practical exploration of Feng Shui. Michelle Greenhouse will teach us the basics of Feng Shui and its benefits for our physical and mental health. Combining over 14 years of design skills with Feng Shui, she uses her expertise to create harmony, serenity and balance to enhance any living/working space. Don’t miss this unique opportunity to learn how you can create balance with your environment. **Wednesday, April 13th, 12Noon-1:00PM, WEST 1337. Presenter: Michelle Greenhouse, certified Feng Shui consultant, Black Sect Tibetan Feng Shui School.**

What You Need to Know About Medicare-This seminar will provide you with information regarding Medicare benefits. *Eligibility for benefits, *Facts about Medicare,* Planning for retirement. **Wednesday, April 20th 12:30-1:30PM, WEST 1337. Presenter: Kelli M. Singleton, MPA, Special Assistant, Office of the Regional Administrator Centers for Medicare & Medicaid Services (CMS)**

What You Need to Know About Social Security- This seminar will provide you with information regarding Social Security benefits. *Eligibility for benefits, *Facts about Social Security, *Planning for retirement.**Wednesday, May 4th, 12:30-1:30PM, WEST 1337. Presenter: Roberto Romero, Field Representative, Social Security Administration.**

All seminars are held at the Hunter College 68th Street campus.

To register for the seminars, please call Ms. Beverly Webb-Taylor at (212)772-4051 or via email:bwebbta@hunter.cuny.edu

*Email registration*please remember to include your first and last name, name of department and telephone number. Thank you.

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