

# Senior citizens 'an endangered species' in Hollywood

BY ALYSSA ROSENBERG  
THE WASHINGTON POST

It's no surprise that Hollywood worships youth and that, as actresses in particular get older, their careers can come to a premature end.

That's not simply bad news for the job prospects of aspiring Meryl Streeps or Ruby Dees of the world. As a new report from the Media, Diversity and Social Change Initiative scholars Stacy Smith, Katherine Pieper and Marc Choueiti suggests, "seniors on screen are an endangered species in cinematic storytelling."

There are a few older characters who make it to the big screen, of course. Eleven percent of the 4,066 characters who had lines in the 100 top-grossing movies of 2015 were 60 or older. That might not sound like a lot

relative to the actual U.S. population, but Smith and her colleagues argued that it "was a good year for seniors in ensemble films" — one where movies such as "The Second Best Exotic Mari-gold Hotel" boosted overall totals.

Who are these fictional seniors, and how do they spend their time?

72.8 percent of the characters were male, and 82.1 percent of them were white. They were overwhelmingly heterosexual. 61.6 percent of them had jobs, though older men were more likely to be depicted as working than women. White male characters were more likely to have prestigious jobs than characters of color, and women were generally shut out of the top ranks of fields such as law, journalism, politics, and science and technology.

Fictional seniors don't tend to be particularly religious, though 65 percent of older Americans report that their faith is "very important." Only a third of them pursued hobbies and activities on screen. And movies tend to depict seniors as disengaged from technology, even though 74 percent of Americans older than 65 own cellphones and 58 percent of them are online.

Very few of these older characters, just 10.5 percent, were depicted as having health issues. But in a grimmer finding, older characters who died on screen overwhelmingly had violent deaths. 79.2 percent of those characters who succumbed were shot, stabbed or crushed (the study's authors counted accidental violence, such as traffic accidents, in a separate category).

And more subtly, 52.6 percent of the movies that featured senior characters also included comments that the researchers interpreted as ageist. Many of those comments were spoken by other characters to older people, but in a number of movies, older characters made self-deprecating or diminishing comments about their own age.

There are clear gaps between the way Hollywood sees older people and the way they see themselves. Humana, the health and wellness company, surveyed 2,000 people 60 and older about whether they felt they were depicted accurately in movies and, explained Dr. Yolangel Hernandez Suarez, "the answer was a resounding no. They thought themselves to be more healthy in mind and body, more connected, and more savvy than

they were portrayed in film."

As a physician, Hernandez is concerned that negative portrayals of older people may diminish the optimism that's been connected to more positive health outcomes. And she worries that younger people will take the wrong lessons from movies, too.

"As someone whose success is so rooted in the mentorship of other women and how important that was to me in my career, I am concerned that when younger people go to films, they do not see women in positions of power, whether that's in politics, or business, or medicine," she said. "They would never think to look out to another woman because they don't exist in that world. I find that particularly troublesome."

Smith suggested that the

limited portrayals of older people on screen might be linked to the fact that only a few actors — and especially, only a few women — are considered viable stars as they age.

"The sell-by date, as we know, for women on screen is 40," she pointed out. "My hunch is that the Judi Denches, the Maggie Smiths, are pushing the same stories and getting work often, which is fantastic, but it is a narrow view." She also cited Kevin Costner and Liam Neeson, both of whom appeared in two films in 2015, as examples of "a rinse-and-repeat ... with the same actors in powerful roles."

"If you want to project a dynamic view of aging," Hernandez argued, "it's simply missing in action on screen in cinematic content."

## Parents may misuse results of infant genetic testing

BY KATHRYN DOYLE  
REUTERS

When parents find out their newborn carries a gene mutation linked to cystic fibrosis, many use the information unexpectedly or inappropriately, according to a new study.

More than 30,000 people in the U.S. are living with cystic fibrosis, an inherited condition causing mucus buildup in the lungs, lung infections and difficulty breathing, according to the Cystic Fibrosis Foundation. Two copies of the mutated gene, one from each parent, are normally required to cause the disease.

Newborn screening can identify infants with cystic fibrosis and those who carry just one mutated gene without being affected. In the case of an infant found to be a carrier of one mutated gene, parents are offered genetic counseling and testing to see which of them was the source and is therefore also a carrier.

Some of the additional, or incidental, information from newborn screening, like carrier status, may be valued and

used, said lead author Dr. Yvonne Bombard, a genomics and health services researcher in the Li Ka Shing Knowledge Institute of St. Michael's Hospital in Toronto.

"Where additional — incidental — information is not clearly understood, it could create risks leading to unintended consequences such as those that we found in our study," Bombard told Reuters Health by email.

In the new study, the researchers surveyed mothers whose infants tested positive for a CF gene mutation at the time of newborn screening, including some whose babies were later found not to be carriers of the gene mutation after all.

Researchers sent surveys again one year later, asking whether and how the mothers had talked to other relatives about the results, whether mothers had had carrier testing themselves and if their child's carrier status had influenced their decision to have additional children.

Just over half of the 246 mothers who received the sur-

veys returned them at the start of the study, and just under half returned the second set of surveys at the one-year point. At the beginning of the study, 77 mothers said their child carried the mutation, 30 said their child had no mutations, 20 did not know and 4 said testing was pending.

Among responding mothers, 55 percent had themselves been tested. Fifteen women intended to get tested and by the second survey, six of them had followed through.

More than 90 percent of mothers of carriers told their relatives that they may carry the cystic fibrosis gene, but 65 percent did not expect the results to influence their own family planning in the future.

Unexpectedly, some mothers of non-carrier children also told their relatives that they might be carriers.

Among mothers of carrier children, some told both sides of the family that they could be at risk, despite not knowing

which parent was the carrier. "We're letting everybody know, but we didn't feel like we needed to do the testing ourselves to narrow down exactly who to give the information to," one mother said in an interview that was part of the study.

Telling all relatives about a cystic fibrosis mutation, rather than just the side with the mutation, may lead to more

testing and counseling services than necessary, the authors write in *Genetics in Medicine*.

"These results indicate a need for improved parental understanding of the implications of non-carrier results," the study co-author Fiona A. Miller of the University of Toronto said by email.

Some parents reported testing other children for carrier status, which also conflicts

with guidelines, Miller said.

"It appears that a baby's carrier status for the cystic fibrosis gene may in some cases have a major bearing on their parent decisions but will not always do so," she said. "The study was not long-term enough to explore whether the baby — as an adult — gets accurate access to this information or uses it in their own reproductive decisions."

## Parents of children with cancer face difficult decisions

BY ANDREW M. SEAMAN  
REUTERS

Parents of children with cancer face difficult decisions, and a new study suggests that about one in six of them look back on some of their choices with a great deal of regret.

Often, doctors can recommend a clearly preferable treatment. But sometimes, the study's lead author pointed out, parents may need to decide things like whether their child should take part in a clinical trial, or whether the child should have surgery.

Parents may feel as if they have no control when their child is first diagnosed with cancer, and making decisions about treatment is the one thing they can do, said Dr. Jennifer Mack, a pediatric oncologist at the Dana-Farber Cancer Institute and Boston Children's Hospital.

"We wanted to try to understand what parents experience and when they look back on their decisions, how they feel about them," she said.

Mack and her colleagues surveyed 346 parents of children with cancer at two U.S. medical centers (one parent per family). The parents completed the surveys within 12 weeks after the cancer was diagnosed.

Fifty-four parents, or 16 percent, had a high level of regret about their decisions, the researchers report in the *Journal of Clinical Oncology*.

About a third did not regret their decisions and would make the same choices again, and 45 percent had mild regret, the researchers found.

Communication factors were tied to how parents felt about their decisions. Parents were less likely to feel regret if they reported receiving high-quality information, detailed information about prognosis, trusting their child's doctor or being comfortable in their decision-making role.

Blacks, Hispanics and other non-white parents were also more likely to experience a high level of regret than

white parents, the researchers found.

Even when communication was similar for white parents and parents of other races, the non-white parents still felt more regret, Mack said.

"There are probably other factors at work for racial and minority families that we need to understand," she said.

It's important to do more research and understand these connections to make the process better, said Mack.

The researchers caution that the tool used to measure regret tends to lump parents without strong feelings into the high regret category. Mack also said they didn't account for the children's roles in treatment decisions.

She said it's important for parents to have ongoing conversations with their children's doctors and not feel rushed or pressured into decisions.

"Sometimes there is urgency, but often there is time to keep having these discussions," said Mack. "Parents should feel empowered to do that."

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