



HEALTHIER BLACK ELDERS CENTER

Promoting Successful Aging in Detroit and Beyond

SUMMER 2012

MISSION

A core goal of the HBEC is to encourage older African American adults to consider participating in research projects that have been approved by the HBEC.

In the past, researchers have been hampered by difficulties recruiting older African Americans to be involved in research projects. Research is critical to understanding why African Americans are at much higher risk of developing certain diseases and why these diseases have a greater impact on their health and longevity.

The HBEC has worked to correct this problem by creating a Participant Resource Pool or PRP.

If you agree to be part of the PRP, the Center guarantees that:

All research projects meet the highest quality federal, state and university standards



Your information will be handled with the strictest confidence



You will be considered for research that is of interest to you



You have the right to decline a research project for any reason at any time



Allon Goldberg, Ph.D., of Wayne State's Mobility Research Lab, assesses the balance and fall risk of HBEC reception attendees.

Much Gain in Learning About Pain

by Cheryl Deep

Everyone has felt it, but few are good at describing it. Pain. It's a major diagnostic clue for doctors and the most prevalent symptom of most diseases. But doctors can't make the most of pain – or help us control it – until we learn to describe it in ways they can understand.

Carmen R. Green, M.D. is HBEC director and an expert in pain. As a professor of anesthesiology, obstetrics and gynecology at the University of Michigan, she sees more than her fair share of it. So when it came time for the Healthier Black Elders Center (a joint project between WSU's Institute of Gerontology and U-M's Institute for Social Research) to host its free, an-

INSIDE

- Communicating pain to your physician
- Techniques to ease the pain

nual reception to educate older Detroiters about important health issues, Dr. Green made a suggestion. Dozens of participants had asked about the topic at previous events; and now was the time to teach older African Americans about that frightening four-letter word "pain."

The topic proved popular. *360 Degrees of Living Well with Pain* featured

SEE PAIN ON PAGE 2



HEALTHIER BLACK ELDERS CENTER (HBEC)

University of Michigan and Wayne State University

Michigan Center for Urban African American Aging Research: A National Institute on Aging Grant Program



Pain, Pain Go Away

by Lisa Ficker, Ph.D.

There is no single “right way” to deal with chronic pain. Each person needs to experiment with a variety of approaches to find what works best for them. When a serious pain problem first occurs, often the initial impulse is to give up activities. This social isolation contributes to feelings of depression and many pain patients experience anger and even a spiritual

crisis as they wonder “Why me?” If the pain is severe enough to disrupt sleep, that can contribute to feeling irritable and depressed. Many people don’t realize that the experience of pain can be made worse by inactivity, focusing on the pain, or having a blue mood.

Here are some tips for learning to manage chronic pain:

Dr. Ficker is a clinical psychologist who helps chronic pain patients learn coping skills and manage the emotional aspects of their pain.



#1 Acceptance

It is normal to feel confusion and many negative emotions when a person realizes their pain has become chronic. It is OK to feel anxious, sad, angry, resentful, and to wonder why this has happened to you. Sometimes people feel they are being punished or blame themselves. I always encourage my chronic pain patients to get to know other people who are living with pain. Remember that human beings struggle through a variety of challenges through no fault of their own. For better or for worse, this is life! Acceptance means adjusting your life and your activities, not giving up on living.

#2 Challenge Negative Thoughts

Thoughts profoundly influence our

NEXT PAGE

PQRST's of Pain

- Provokes** – What causes the pain to start or worsen?
- Quality** – Is the pain sharp, dull, stabbing, burning, crushing?
- Radiates** – Does the pain move out from its original location?
- Severity** – Where does it rate on a scale of 1 (least) – 10 (most)?
- Time** – When did it start? How long did it last?

Learning about Pain

continued from page 1

physicians, a dentist, pharmacist, and community members in panel discussions about the impact of pain on men and women. More than 400 guests, ranging in age from 55 to 94, attended the June 5 event at Greater Grace Conference Center. “This is America,” Dr. Green said in her keynote address. “We have methods to treat pain. No one should be suffering.” Dr. Green taught guests the PQRST pain alphabet to help them describe pain to their

doctor (see above).

Panelists talked about arthritis (nearly half of all persons over age 65 have it) and fielded questions about pain relievers like Vicodin, aspirin, Tylenol and Benadryl. They discussed the dangers of over-the-counter pain medications and the lack of regulation of herbal remedies. Experts cautioned that chronic or persistent pain requires a physician’s care. “Don’t try to fix it yourself by taking more Advil,” John Flack, M.D. and associate chair of clinical research at WSU, warned. “Pain is a symptom. Something is wrong.”



The event is the primary outreach activity of the Michigan Center for Urban African American Aging Research (MCUAAAR), a federally funded initiative to engage more scholars in investigating the health issues endemic to minority aging and to improve the health of minorities. The goal is to decrease health disparities in African Americans, such as higher rates of diabetes, stroke, heart disease and certain cancers. Nearly 200 participants took advantage of the free health screenings for blood pressure, cholesterol, glucose, hearing, dental, and falls risk.

mood and our experience of pain. Remember that pain comes and goes – it rarely stays the same all the time. If you tell yourself things like, “I’m always in pain” or “This will never get better,” your mind will focus on the pain and tense your muscles, which actually increases the pain! Learn how to monitor and challenge these sorts of internal negative messages. One useful tool is a “pain diary” in which you write down your thoughts and feelings. If you find yourself thinking “I’m going to be miserable all day,” challenge this idea. Try saying to yourself, “I’ve got some pain this morning, so I’ll do relaxation exercises then find ways to distract myself.”

#3 Relaxation

It is natural to tighten muscles and tense your body when you feel pain; however, this response often makes

the pain worse. Following are some relaxation exercises that can increase your body awareness and decrease the tendency to tense:

Deep, abdominal breathing: Sit in a comfortable chair or lie down and place your hands just below your belly button. Take a deep breath and imagine a balloon inside your abdomen filling with air. As you slowly exhale, focus on feeling your belly deflate. Your hands should move up and down with each breath.

Progressive relaxation exercise: Starting with your feet and legs, tense each muscle then relax it. Move all the way up your body to your face. Pay attention to how it feels as you relax each muscle.

Mental vacations: Take a deep breath in. Think the word “relax” as you exhale and allow all the tension to flow downward from the muscles of

your face and neck to your arms and legs, then out your hands and feet. Hold that feeling of relaxation for 10-15 seconds and repeat 5-20 times per day, as often as you need to. It can also be helpful to visualize a lovely place, like a beach or sitting by a brook, experiencing the details through all five of your senses. How does it smell? What sounds do you hear? Who is with you?

#4 Distract Yourself

The experience of pain can be lessened by refocusing your mind on something else. Try some of these distraction techniques:

Focus on the environment: Listen to music, watch TV, play a game of solitaire (electronically or with cards), focus your eyes on an object and study all its details.

Rhythmic activity: Sing a favor-
SEE PAGE 4



Community Advisory Board members plan the 10th annual HBEC Health Reception. Shown here with smiles and a sense of accomplishment. Left to right are John Villa, Precious Everett, Dorothy Bell, James Bridgforth, Ethel Ambrose, Eugene Odom, and Johnetta McLeod.

MCUAAAR is a collaboration between WSU’s Institute of Gerontology (IOG) and the University of Michigan’s Institute for Social Research (ISR), funded through the National Institute on Aging. Peter Lichtenberg, Ph.D., director of the IOG and co-director of MCUAAAR takes special pride in the accomplishments of the Healthier Black Elders Center. “For over a decade we have been partnering with older adults in new ways to promote aging healthier,” he said. “We have substantially increased the numbers of Detroit seniors willing to participate

in research and raised the level of dialogue focused on the needs of urban black elders.”

James Jackson, Ph.D., directs the ISR and co-directs the MCUAAAR with Dr. Lichtenberg. The greater than 82% of participants who report that the event causes them to improve their health habits is especially gratifying to him. “Getting people to change behavior is always difficult,” he said. “We teach them that small changes matter.”

The HBEC annual reception has educated more than 6,000 older African Americans since its inception in 2002,

administered thousands of health screenings, and possibly saved a few lives with early detection of blood pressure and blood glucose emergencies. This year’s evaluations, returned by 98% of guests, confirmed the continuing value of the program. A 64-year-old woman wrote, “Thank you for all you do for us. I have no insurance and the health screenings were very valuable to me.” Another woman, age 76, wrote, “I believe and know that knowledge is power. We have to take responsibility for our health. These receptions are empowering for me.”

ite song, name all 50 states, make up a rhythm with your fingers and repeat it, then try creating variations and adding them.

Dramatic image: Imagine rescuing a child from a housefire or accident and feel your pain as part of your heroic act.

Healing image: Identify your specific pain sensations and visualize a soothing mental image. If you have pain that burns, imagine cool water flowing over it. If you have tightness, imagine light stroking that breaks up the band of pain. Find whatever image works for you.

#5 Keep Moving

Staying active means different things to different people but in most cases, being as active as possible actually helps the condition (for example, arthritis). Sometimes it takes a lot of emotional effort to press through the pain to stay active, whether that means doing chair or arm exercises, taking a walk, or climbing up a flight of stairs. When you are active, be sure to give yourself a pat on the back! You are actually help-

ing to maintain your current level of independence and functionality.

#6 Talk to Your Doctor

Be sure to tell your physician about the pain you are experiencing, especially if you find yourself feeling overwhelmed with feelings of depression or ever think of hurting yourself. Medications can help with these feelings and counseling may also be helpful. Many local hospitals also offer support groups for people with chronic pain. If your doctor has prescribed pain medication, be sure to keep track of how it is working or not working and tell your doctor. Because many pain medications are narcotics and can be addictive, carefully track how many pills you take and be honest with your doctor if you find yourself “self-medicating” and wanting to take more than prescribed. You must also avoid any and all alcoholic beverages when you are taking such medications.

As you deal with chronic pain, don't forget to have fun! Everyone needs a daily dose of healthy pleasure in his or her life. Keep a long list of things

you like to do for whenever you start to pay too much attention to the pain. Don't feel guilty for having fun when you “should” be doing something “productive.” If you are doing anything that relieves the pain, you ARE being productive. Realize that persons dealing with chronic pain often must prioritize their lives because of limited energy. You may not be able to do everything that you want to do, and that is okay. Pace yourself so you don't become overly tired. Ask yourself each day, “What is the most important thing to do today?” Then be flexible as you learn to focus on your life, instead of your pain.

Dr. Ficker is a clinical psychologist who helps chronic pain patients learn coping skills and manage the emotional aspects of their pain. Her private practice is in Southfield and she can be reached at (313) 664-2530 or (248) 613-9699.

HBEC PILOT SCHOLAR SPOTLIGHT

HBEC is the community outreach component of the Michigan Center for Urban African American Aging Research (MCUAAAR). Federally funded since 1997, MCUAAAR is a joint program between the University of Michigan and Wayne State University. One of the main objectives of the MCUAAAR is to provide mentoring and funding for ethnic minority junior faculty who want to conduct aging and health research. To date, 47 pilot scholars have completed the program. At right, is a summary of one of this year's studies.



Sonya R. Miller, MD

Pilot scholar Sonya R. Miller, M.D., wants to better understand how older black and white women with disabilities navigate aging. Mentored by HBEC Director Carmen R. Green, M.D., Dr. Miller is conducting the “Exploring Health and Healthcare among Older Black Women with Disabilities” study to learn how this group defines being healthy and to identify, if any, unique health concerns of these women. According to Dr. Miller, “This information will enable us (healthcare professionals) to provide healthcare in a more patient-focused and effective manner.” Dr. Miller's participants will complete questionnaires about their general health, pain, sleep and quality of life; create photo journals of their health experiences and experiences of being healthy; and select two or three of those photos to discuss within small groups.

HEALTH WATCH



CAB Member Promotes Eating Safe Fish



HBEC Community Advisory Board (CAB) member James Bridgforth talks with men and women fishing along the Detroit River about the Eat Safe Fish project. The project is a collaboration between the Wayne State Department of Biological Sciences and the Michigan Department of Community Health. Eat Safe Fish trains older adults and youth mentees from the Detroiters Working for Environmental Justice (Scott Mason pictured above) to become River Walkers who hand out literature and educate people on the three C's of fishing: Choosing fish with lower chemicals, Cleaning fish to remove chemicals, and Cooking fish to reduce chemicals. The project is funded through the Erb Family Foundation. For more information, contact Donna Kashian at 313-577-8052, or dkashian@wayne.edu.



Detroit comedian Horace Sanders offers a touch of lunchtime fun to the serious business of the Healthier Black Elders Center annual health reception.

Spoonful of Comedy Sweetens Health Education

by Cheryl Deep

The event was *Living Well with Pain*, but the only moans coming from the lunchtime audience were shrieks of laughter. Detroit comedian and CBS Star Search champion Horace Sanders had the crowd of 370 seniors doubled-over with jokes about marriage, clothes, food and family. He teased the ladies about style. "Why is it when a man's pants are too short, they're called flood pants? But when a woman's pants are above her ankles, they're called *Capris*?"

Horace has entertained guests at the annual Healthier Black Elders event for three years. He generously waives much of his fee because he loves the crowd of elders and had a close relationship with his own grandparents. His humor connects well as he tells stories about his 84-year-old father who likes to turn clichés on their head. "Someone says, 'Life is short,' and my dad calls back, 'Not if you marry the wrong person, it's not.' You tell him it's a small world and he'll say, 'Not if you ain't got a car. Go up to folks at a bus stop in Detroit and tell them it's a small world. They'll chase you into the street.'"

Horace's good-natured teasing adds a touch of fun to the serious business of the Healthier Black Elders event: educating African American seniors about their health, encouraging them to get regular check-ups, and participating in research. He's proud to be associated with an event that has reached more than 6,000 seniors since 2002, performed thousands of free health screenings and saved a few lives with early detection of blood pressure and blood glucose emergencies.

Horace and his family relocate to Los Angeles this year to pursue his comedy dreams and acting opportunities for his daughters, but he vows he'll be back for HBEC. "We got to keep our nanas and pappas healthy," he said. "We need them."

Older Adult Women Are Healthier Through Volunteerism

A recent article published in the *Journal of Gerontology: Social Sciences* revealed that women over 60 years of age who volunteered in elementary schools are more physically fit and burn more calories than their more sedentary counterparts.

The study, led by Erwin Tan, Ph.D., of Johns Hopkins University suggests that the country's investment in community programming has a dual benefit... it also facilitates public health.

"For our volunteers," Dr. Tan said, "volunteering with children may be as good for their health as a gym membership. For our children, the wisdom that our older adults have is priceless." The ar-

ticle went on to quote Dr. Tan, "due to their enjoyment of working with children, the volunteers may be more willing to keep up this approach in the long term, compared with traditional exercise programs."

Dr. Tan explained that the focus on African American women was due to their prevalence in the two community groups from which the study participants were recruited,

but he said the results are likely the same for all older people.

This study and others on related topics of activity and older populations show that everyday activity interventions can appeal to older adults' desires to remain socially engaged and productive in their post-retirement years. At the same time, these activities provide measurable physical and cognitive health benefits.

FREE SENIOR PROGRAMMING – The HBEC is looking for community groups of 40 or more older adults that would like to host a lunch and learning forum for the 2012/2013 program year.

The 1-1/2 hour program includes lunch, gift card drawings and presentations by two aging experts. To learn more, call Patricia Rencher, community education coordinator, at 313-664-2626.

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VOLUNTEERS NEEDED! – If you or someone you know is looking for a quality volunteer experience, consider interviewing older adults for research participation. Commitments range from once a week to once per month.

To learn more, call the HBEC-PRP at: 313-664-2604.