



HEALTHIER BLACK ELDERS CENTER

TO REGISTER ONLINE FOR THE 2014 HBEC RECEPTION [CLICK HERE](#) OR CALL CALL: 313-577-2297



Tuesday, June 10, 2014
Health Reception
Only \$5⁰⁰ • Lunch Provided

Registration Extended to
FRIDAY, MAY 30

HBEC 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

Tests and Screenings Available at this Year's Reception



- Blood Pressure
- Cholesterol
- Chiropractic
- Dental
- Diabetic Shoe Fitting
- Falls and Balance
- Hearing
- Glucose
- Cognition & Memory
- Vision

Know Your Numbers: Learn All about Diabetes at Health Event

The statistics are staggering: Twenty-seven (27.2 to be exact) of every 100 Michiganders diagnosed with diabetes between 2008 and 2010 were African American. According to the Michigan Department of Community Health, those numbers are expected to rise.

“We thought it made sense to highlight this impending epidemic to our Healthier Black Elders Center family,” said Community Liaison Core Co-Director Carmen R. Green, MD. According to Dr. Green, *What Are Your Number? Diabetes from Head to Toe*, the title of this year’s June 10 health reception is a response to what’s been called “the diabetes bulge.”

“We’re covering the basics,” adds

Dr. Green, “and we are highlighting some of the lesser known factors associated with diabetes management.”

The morning panel discussion features ophthalmologist Paula Anne Newman-Casey, MD, nutritionist Robin Nwanko, RD, from the University of Michigan, and HBEC Community Advisory Board member Johnetta McLeod. A *How the Affordable Care Act Changes Affect You* presentation will be provided by health care consultant Sharon Williams.

Dr. Stephanie Lucas, of St. John Providence Health System, will give the keynote address. Dr. Lucas is an endocrinologist specializing

SEE DIABETES 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

WAYNE STATE
 UNIVERSITY

PRP Members Respond Impressively to Cognition Study

Participant Resource Pool members are responding in record numbers to the University of Michigan Memory and Aging Project cognition study.

Launched by the University of Michigan Alzheimer and Disease Research Center last summer, in partnership with the HBEC, the

study aims to enhance science's understanding of the earliest signs of memory or thinking changes by evaluating naturally occurring changes in behavior and health status over time.

Study participation is limited to those experiencing early signs of memory changes as well as healthy

older adults age 55 and older.

A study partner is highly encouraged to accompany volunteers to all study visits and to communicate changes in subject's health status over the period of the study.

If you have any questions about this study, contact the Healthier Black Elders Center at 313-664-2604.

Diabetes from page 1

in diabetes.

"Dr. Lucas' team," adds Dr. Green, "focuses on providing care using lifestyle changes to minimize medication requirements. The unique thing about the center is its commitment to coordinating care with patients and their other health care providers.

One way to minimize medication, adds Dr. Green, is consistent exercise. Many people, however, are unable to keep up with their regular exercise because they either don't enjoy it, or have a problem finding time to exercise. We think we have a possible solution: Tai chi.

According to Tai Chi instructor Darryl Mickens, "Tai Chi is enjoyable, and to many, it's almost addictive. It's a gentle exercise that has been shown to be useful in preventing and managing diabetes."

Mickens says people with diabetes who exercise regularly have better control over their blood glucose levels. Major problems that can result from diabetes include heart disease, visual impairment, and stroke. These can be prevented through diet and exercise. Tai Chi focuses on building strength, balance and flexibility through slow,

fluid movements combined with stress-busting mental imagery and deep breathing

"Tai Chi" said Dr. Green, "is useful for everyone. Scientific studies have also shown it to have beneficial effects on cardio-respiratory fitness, muscular strength, bal-

ance, arthritis, peripheral circulation, reduced tension, and anxiety. . . it's highly recommended for older adults."

To register for the annual event, click the blue button below or call 313-577-2297



HBEC LUNCH & LEARN Men's Forum

Men & Aging: Myths & Facts was the topic at the Nov. 5, HBEC Men's Forum, where Dr. James S. Jackson, HBEC Co-Principal Investigator discussed male-centered health questions with a group of 57 men in the Greater Christ Baptist Church.

The *Michigan Alzheimer's Disease Center* was also on hand providing private memory and cognition screening. (R to L) Edna Rose, PhD, RN, MSW, BC, minority outreach coordinator; Arijit K. Bhaumik, BA, CCRP, senior clinical trial coordinator; Stephen Campbell, LLMSW, research coordinator, Sarah Shair, MA, research assistant; Bruno Giordani, PhD, associate director, and Henry Paulson, MD, PhD, director.



HBEC Pilot Scholar Spotlight

The goal of the Michigan Center for Urban African American Aging Research (MCUAAAR) program is twofold: to increase older adults' participation in research (Healthier Black Elders Center) and to increase the number of underrepresented researchers - through mentorship and funding - to become productive scholars focusing on the health and aging of African American older adults.

Following are the research profiles of three 2013/2014 MCUAAAR scholars:



CHIVON A. MINGO, PhD
Assistant Professor, Gerontology Institute
Georgia State University

Chronic Disease Self-Management Program: Utilization Preferences among Older Community Dwelling African Americans in the Atlanta Region

Upon diagnosis of a chronic disease like diabetes, heart failure, or hypertension, physicians routinely suggest patients attend a Chronic Disease Self-Management Program. The programs generally meet weekly for six weeks in community settings such as senior centers, churches, or hospitals and people with different chronic health problems at-

tend together. Two trained leaders, one or both of whom are non-health professionals with chronic diseases themselves, facilitate the classes.

Dr. Mingo is researching whether these classes help or present barriers to older African Americans. "In particular, we want to know if the course's design and delivery are suited for this population. We are also evaluating the feasibility, acceptability, and appropriateness of delivering the classes in community-based organizations not connected to the Aging Services Network, such as faith-based organizations." Dr. Mingo's data collection is in progress and recruitment is ongoing.



TAM PERRY, MSW, PhD
Assistant Professor, School of Social Work
Wayne State University

Leaving Home in Late Life: A Post-Move Study of African American Elders and their Kin in Detroit

Moving from one's home can be fraught with concerns of independence, access, choice, and the unknown. While some research has studied older adult relocation due to health and death of a spouse, limited attention has been paid to understanding the process of moving during adulthood and the diverse experiences it brings. "While moving at any age can be challenging, relocation in

later life is a social experience that often involves reconciling one's past and one's possessions, and planning for future needs," says researcher Tam Perry who aims to uncover the critical criteria that older adults employ when identifying and selecting a new residence.

According to Dr. Perry, "this work is particularly important because older adults need to anticipate and plan for the possibility of health decline, changes in mobility, and the altering of kin and peer networks." Considering neighborhood distress and decline in Detroit, says Dr. Perry, it is also critical to examine relocation in an urban context and its relationship to health and well-being.



WASSIM TARRAF, MBA, PhD
Assistant Professor, Institute of Gerontology
Wayne State University

Patient Centered Medical Home Experience and Healthcare Disparities Among Near-Old and Older Race/Ethnic Minorities in the US: Findings from the Medical Expenditures Panel Survey

While there is great need for improving the health

care experiences of all older adults in the United States, enhancing the quality of care through personal physician-directed care is especially needed for African Americans and Latinos. Dr. Tarraf's research examines whether primary care experiences that are consistent with the Patient Centered Medical Home (PCMH) principles reduce care inequalities and enhance health care efficiencies, national-

SEE BACK PAGE

Save the Date



Tuesday, June 10, 9:00 am - 2:00 pm • COST: \$5⁰⁰ • Lunch Provided

HBEC ANNUAL HEALTH RECEPTION: *What's Your Number?? Diabetes from Head to Toe*

LOCATION: Greater Grace, 3500 W. 7 Mile Rd. Detroit, MI 48219

TO REGISTER ONLINE FOR THE 2014 HBEC RECEPTION [CLICK HERE](#) OR CALL CALL: 313-577-2297

Scholar from page 3

ly, among older racial and ethnic minorities.

The Patient Centered Medical Home is an enhanced primary care model. It is a team based approach to health care delivery led by a primary care (family or internist) physician and provides comprehensive and continuous medical care to patients with the goal of maximizing health care qual-

ity and health outcomes. "It is an approach to providing patient centered comprehensive care and can potentially improve the quality and satisfaction with health care while reducing costs," explains Dr. Tarraf. Care coordination, he added, is an essential component of the PCMH model requiring additional resources such as health information technology and appropriately trained staff to provide coordinated care through team-based models.

Dr. Tarraf found that there are some distinct disparities among racial and ethnic groups that must be addressed. "As a first step, policy initiatives," said Dr. Tarraf, "aimed at addressing accessibility to personal physician-led health care are especially needed." Dr. Tarraf believes that the PCMH model has the potential to be a valuable national model to reduce existing inefficiency in use of health care services and enhance patient satisfaction with care.