



Elderly Expression

Lincoln University Cooperative Extension
Paula J. Carter Center on Minority Health & Aging

The Missouri Institute on Minority Aging (MIMA) will be held on August 3, 2006 on the campus of Lincoln University, in Jefferson City. MIMA is the only provider/consumer-training forum in dedicated solely to examining the health, and health-delivery issues facing minority older individuals. The objectives of the are to sensitize providers in the aging, social service, and public healthcare system to elder diversity and current health issues impacting minority older individuals. MIMA includes cultural competency training and educational workshops on aging, health issues and concerns. If you have questions, or are interested in attending please call the Center (573) 681-5530.

Minority Health Video Conference

The Lincoln University Cooperative Extension/ Paula J. Carter Center on Minority Health and Aging is proud to present a series of 8 video conference presentations dealing with health disparities, cultural competency and working with ethnic populations. The videos will be generally shown on the last Wednesday of the month from February 2006 –September, 2006.

Video presentations include:

- Health Disparities**: From Civil Rights to Human Rights (February 22),
- Epidemiology of Diabetes**: Prevalence, Complications and Health Services Disparities (March 22),
- False Promises & True Disparities**: Why Healthy People 2010 Will Fail (April 26),
- Voices of Wisdom**: Seniors Coping With Disaster (May 24),
- It Takes A Whole Indian Village**: Decreasing Health Disparities In Indian Country (June 28),
- The Health Of U.S. Pacific Islander Populations**: Emerging Directions (July 26),
- Preventing HIV Among Women**: Diffusing A Group And Community Level Intervention Part 1 (August 30),
- Preventing HIV Among Women**: Diffusing A Group And Community Level Intervention Part 2 (Sept. 27).

These presentations were secured from the University of North Carolina, Chapel Hill School of Public Health Research Institute and Videoconference on Minority Health. The presentations will be held in Room 100, Allen Hall on the Lincoln University campus. Each presentation is scheduled to begin at 10:00 a.m., and will end at noon. There will be light refreshments available.

Inside this issue:

- Slow The Aging Process 2
- Medicare 3
- Smoking: A High Risk Choice 4
- Understanding Asthma Treatment 5
- A Whole Lot Of Meds 5
- Energy Assistance 6



Coordinator
Treaka Young

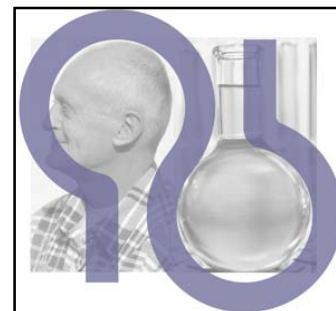
From the desk of Treaka Young...

There are many of important issues facing Missouri's minority, aging population not the least of which are the changes in the Medicare program. While there are some benefits, there is still a lot of confusion as to what these benefits entail. That's why we, at the Paula J. Carter Center on Minority Health and Aging are making ourselves available for training, or to point you in the right direction. Make sure you get all the answers to your questions whenever you talk to someone about insurance

coverage. Another important article in this edition of Elderly Expression deals with medication. Talk with your doctor about how your prescription, and non-prescription drugs fit in the new Medicare, Part D. Mark your calendars for February 22, 2006. The Center has secured an exciting group of videos which are coming to the Center that will run through September. Do not forget the Missouri Institute on Minority Aging in August 3, 2006. There are many valuable resources just waiting for your use. We look forward to helping you.

Stay Well.

Treaka



Get moving to slow aging

Even among the elderly, moderately exercising can slow mental aging, according to a study published in the Dec. 28, 2004, issue of *Neurology*, the journal of the American Academy of Neurology. A 10-year study of healthy European men between the ages of 70 and 90 directly correlates mental deterioration to reduced activity. Men who increased physical activities such as walking, gardening, bicycling and sports showed no lapses in mental alertness. During the same period, mental decline was more than 2-1/2 times greater in men who cut activity by an hour or more a day, compared with those who maintained the same activity level.



Coordinator Treaka Young speaks with U.S. Senator Jim Talent (R-MO) about changes in Medicare.

More on Medicare

The new Medicare Prescription Law went into effect January 1, 2006 giving seniors access to comprehensive, voluntary prescription drug benefits. The law can be confusing to the same seniors it is supposed to help. U.S. Senator Jim Talent (R-MO) recently held a town meeting in the Inman Page Library on the

campus of Lincoln University to discuss the changes. Talent continues to hold Town Hall meetings across the state. Medicare beneficiaries can now enroll in a Medicare Prescription Drug Plan, or a Medicare Advantage Plan that offers drug coverage. While there are many new insurance company plans, not every plan is comprehensive covering every drug, or with every pharmacist enrolled. The Paula J. Carter Center on Minority Health and Aging will provide informational meetings to address changes in the Medicare coverage. If you would like to attend, or want additional information, call the Center at (573) 681-5530.

A frequently asked question about Medicare prescription drug coverage.

I have prescription drug coverage from my former employer. Will I be able to keep it, or will Medicare prescription drug coverage replace it?

Joining a Medicare drug plan is your choice. You aren't required to join a Medicare plan, and you shouldn't join until you are sure how it would affect your retiree coverage. In some cases, if you join a Medicare drug plan, you could lose your retiree health coverage as well as your prescription drug coverage. On the other hand, in many cases your retiree plan will work with Medicare to provide your prescription drug coverage.

Source: <http://questions.medicare.gov>

Smoking: A High Risk Choice

According to a report in the January 26, 2006 New England Journal of Medicine, Native Hawaiians and African Americans who smoke cigarettes are putting themselves at a higher risk of lung cancer than whites, who have a higher risk than Japanese Americans and Latino smokers. The study included around 180,000 participants with a wide variety in ethnicity. African Americans and Native Hawaiians had a higher risk of lung cancer among the subjects who smoked less than 30 cigarettes a day. Researchers found the gap was particularly evident among the smokers who smoked 10 or fewer cigarettes a day. White smokers and Japanese American/Latino smokers were 55 percent and 79 percent less likely to develop lung cancer than black smokers. The racial differences were observed in both men and women participants, and for all lung cancer subtypes. The report states the differences between ethnic groups may be in how the nicotine is metabolized, but additional studies are being planned to better



Outreach Worker Shirmere Singleton offers a blood pressure screening as a part of the IAHMUMS program

High Blood Pressure Remains A Problem

While high blood pressure is a problem for many Americans, it appears to be a more of a threat to Hispanic blacks than it is to Hispanic whites. A new study reports there is a tendency to group all Hispanic Americans into one ethnic category. This practice may hide the problem of high blood pressure among black Hispanics. For the study, the term “Hispanic” described diverse groups of Spanish-speaking people of any racial background. Of the more than 20,000 participants in the study, nearly one-quarter said they had high blood pressure, with the condition being more prevalent among non-Hispanics than Hispanics...about 25 percent versus 17 percent. However, at a 30 percent rate, black

Hispanics were at a greater risk than their white counterparts. The disparity among Hispanic Americans was also evident in the fact that higher-income, better-educated black Hispanics still had a higher blood pressure rate than lower-income, less-educated white Hispanics. According to the report, if Americans are serious about eliminating health disparities in this country, race among Hispanics cannot be ignored. The report was published in the medical journal *Ethnicity and Disease*.



Understanding Asthma Treatment

Dr. Michael K. Paasche-Orlow, of Boston University School of Medicine has found many individuals with asthma, lack the skills to properly manage their disease. They are not knowledgeable about asthma medication and often do not know how to

use metered dose inhalers (MDIs) correctly. However, these patients have no difficulty learning and retaining instructions about their asthma regimen and MDI technique. These findings came as a result of an examination between inadequate "health literacy" and difficulties learning and retaining instructions about medications and appropriate MDI technique in 73 adults hospitalized for severe asthma at two inner-city hospitals. Inadequate health literacy was also associated with lower asthma medication knowledge and worse MDI technique before instruction. According to Paasche-Orlow, this should be considered as a wake-up call about patient education needs in general, not just for those with inadequate health literacy. The study report can be found in the American Journal of Respiratory and Critical Care Medicine.

A Whole Lot Of Meds

According to government statistics published recently, about half of all women in the U.S., and 40 percent of all U.S. men are using, or have recently used a prescription drug. The information was based on a survey done between 1999 and 2002, and finds that 54 percent of white, non-Hispanic women, and 43 percent of white, non-Hispanic men were using prescription drugs at the time. Fewer blacks and Hispanics used prescription medicine. Nearly 44 percent of black women and 35 percent of black men were using prescribed medicine, while nearly 38 percent of Mexican-American women and nearly 26 percent of Mexican-American men were taking medicine.





Energy Assistance

Even though it has been a relatively mild winter, Missouri weather can change almost at the drop of a hat. When the mercury drops, heating bills, and worries rise. If you're concerned about being able to pay your heating bills, there is help. The Missouri Low Income Energy Assistance Program (LIHEAP) has two components: Energy Assistance (EA) and Energy Crisis Assistance. EA is designed to help pay heating bills for those Missourians needing assistance from October through March. Applications will be accepted through March 31, 2006 in Community Action Agency offices throughout the state...unless funds have all been obligated prior to that date. Applicants must be responsible for paying home heating costs, be U.S. citizens or aliens legally admitted for permanent residence, and do not have available resources in excess of \$3000.

Maximum Monthly Income Limits			
Household Size	Income Limits	Household Size	Income Limits
1	\$997	5	\$2,355
2	\$1,337	6	\$2,695
3	\$1,676	7	\$3,034
4	\$2,016	8	\$3,374

If you think you are eligible for Energy Assistance and you wish to apply for the benefits, you need to bring 5 things with you:

- Documentation of Social Security numbers for all people in the house
- Your most recent fuel bill
- Proof of all income sources for all people in the house
- Proof of age, if 65 or older
- Proof of the amount (s) of any cash and securities owned by your or other people living in the house.

Energy Assistance is NOT limited to only home owners. If you are renting there are several methods of eligibility. The Low Income Home Energy Assistance Program is designed to help you. If you have any questions, or want to apply, you can contact the nearest Community Action Agency, (573) 634-2969, or on the internet: (<http://communityaction.org>).

“Promoting Healthy Aging for Minority and Underserved Seniors”

Our Mission is to provide leadership in addressing the health, social, and psychological needs of Missouri’s minority and the underserved elderly populations. This can be accomplished through education, research-based information, policy analysis and the use of technology as strategic tools.

We have information concerning arthritis, cancer, diabetes, healthy eating, heart disease, and many other topics. This information focuses on specific health concerns of people who are African American, Native American, Asian/Pacific Islander American, or Hispanic/Latino American.



Some material is available in Spanish.

We would be happy to talk with you and send you information.



I’m very pleased with each advancing year. It stems back to when I was forty. I was a bit upset about reaching that milestone, but an older friend consoled me. ‘Don’t complain about growing old- many, many people do not have that privilege.’

**Earl Warren (1891 – 1974)
Chief Justice
U.S. Supreme Court**

Some Handy Resources For You!

Paula J. Carter Center - 1-573-681-5530

Community Action Agency communityaction.org 1-573-634-2969



Medicare 1-800-633-4227 www.medicare.gov

Mo Dept. of Health/Sr. Services 1-573-751-6400 www.dhss.mo.gov

Alzheimer’s Assoc www.alz.org Medline Plus: www.medlineplus.gov

Mid-Missouri Alzheimer’s Assoc. 1-800-693-8665 www.midmoalz.org



Paula J Carter
 Center on Minority Health and Aging
 215 Allen Hall
 900 Chestnut Street
 Jefferson City, MO 65102



**Lincoln University Cooperative
 Research and Extension**

P.O. Box 29
 Jefferson City, MO 65102
 (573) 681-5543 Phone

Lincoln University of Missouri, and the U.S. Department of Agriculture cooperating. Dr. Steven Meredith, Interim 1890 Administrator, Cooperative Extension. Distributed in furtherance of Food and Agriculture Act, 1977 PL 95-113 Section 1444 and 1445, as amended by PL 97-98. December 22, 1981. Publications are distributed without regard to race, color, national origin, sex, age, religion or handicap.

Lincoln University is an 1890 land-grant institution and is part of the Missouri state system of higher education. Founded in 1866 by enlisted men and officers of the 62nd and 65th Colored Infantries, Lincoln University has expanded its mission to embrace the needs of a broader population reflecting varied social, economic, educational, and cultural backgrounds. This is the unique purpose that Lincoln University fulfills in higher education.

This publication is funded by:



LUCE/PJCCMHA Staff

Treaka Young, M.A. M.Ed	Coordinator
Deborah Jenkins, M.A.	Research Assistant
Edna Chavis, Ph. D.	Gerontology Consultant
Mark McCarthy, B.S.	Information Specialist
	mccarthy@lincolnu.edu

Community Outreach Workers

Shirmere Singleton	Cole County
Sandra Jones	Pemiscot County
Ollie Hall	St. Louis City
Brian Valentine	Moniteau and Callaway Counties

Please call us at:

Phone: (573) 681-5530
 Fax: (573) 681-5546

Visit our Website at:

www.luce.lincolnu.edu/PJCCMHA.htm

The newsletter is also available online at the website