Dosha, friends –

Winter is upon us here in the northern plains, and we are all prepared for our famous winters and our sixty- to seventy-below wind chill factors! For all the ribbing our part of the country gets about the weather, being a Native from here, I appreciate our seasons and their changes, and I enjoy celebrating them with my family and friends.

Changing weather can bring with it challenges for elders who live at home, and those who care for them. Oftentimes we must pay particular attention to our environments to ensure the safety of those who live there. Prevention of falls and environmental safety is of particular concern for our elders and their caregivers in states where winter brings increased hazards. You can help better prepare your elders or yourselves by following a few safety tips:

- Always listen to weather bulletins and prevent falls by staying in during harsh and hazardous weather conditions.
- If going out cannot be avoided, be sure you (or your elders) are wearing comfortable shoes and boots that have been checked for smoothness. Smooth soled shoes increase the risk of falling on snow or ice covered ground.
- Cold weather is no excuse for putting off your exercise regimen! Remind elders that exercise improves flexibility, coordination, and balance and will strengthen legs and muscles which can reduce the risk of injuries should a fall occur.

There are many seated exercises and indoor activities seniors can do to keep themselves active.

More information on fall prevention can be found on our website, www.nrcnaa.org, as well as information on our elder wellness program, WELL-Balanced, which is aimed directly at helping elders prevent falls.

For this edition of Native Aging Visions, we were lucky enough to spend some time with Dr. Donald Warne (Oglala Lakota), MD, MPH, director of the Sanford Health Office of Native American Health. We also have updates on two of our programs; WELL-Balanced, and the “Identifying our Needs: A Survey of Elders” needs assessments, along with other great information.

We hope you enjoy this issue of Native Aging Visions as much as we have enjoyed putting it together for you.

Working with and for our Native elders is a blessing I thank my Creator for placing in my path each day. We at the NRCNA right hope we can provide support to the caregivers who commit their days to the work of helping our people live lives of grace, honor, and dignity, in as healthy a manner as possible. Nushinasha toka’nii! Wa oshi toka’nii! May Creator keep us safe, and give us good things. Aho, maacigiraac my friends.

— Twyla Baker-Demaray;
Mandan, Hidatsa, and Arikara Nation
Diabetes—Foot Care Do’s and Don’ts

From “On the Road to Wellness”
by the North Dakota Disability Health Project

People who have diabetes often have trouble with their feet. Diabetes may cause nerve damage that takes away the feeling in your feet. Diabetes may also reduce blood flow to the feet, which makes it harder to heal a sore or to resist infection. Because of these problems, infections and non-healing sores put people with diabetes at risk for amputation. One way to protect your feet is by catching foot problems early. To avoid serious foot problems, follow these tips:

Do’s:

**Wash feet daily in lukewarm (not hot) water.** Use only lukewarm water—the same temperature used to bathe a newborn baby, and be gentle. Dry your feet by patting, not rubbing, and remember to dry between the toes.

- Inspect feet and toes daily, checking for cuts, blisters, redness, swelling or nail problems. Use a magnifying hand mirror to look at the bottom of your feet.

- Moisturize your feet, but not between the toes—that can promote a fungal infection. Moisturizing will keep feet from cracking and itching.

- Cut toenails straight across. Never cut into the corners or taper the nail. Cutting nails too short can cause ingrown toe nails.

- Get foot exams. Regularly see a foot doctor to prevent the foot complications of diabetes.

- Watch for fungal infections of the feet. This may be an itchy, moist, reddened rash around the toe nails and in between the toes surrounded by tiny blisters. It is important to see your doctor if you think you have an infection.

- Be properly measured by an experienced shoe fitter when you buy new shoes. Poorly fitted shoes may cause problems that may lead to amputation. You can be fitted for diabetic shoes and socks at a durable medical supply store. Medicare will pay for diabetic shoes with a prescription from your treating physician.

- Wear clean, soft white socks, and change socks daily. When you take your socks off, check to see if there is any blood or fluid from a sore on your socks.

- Check the inside of your shoes before putting them on each time. You may not be able to feel a pebble or other object that may be in your shoe., Also make sure the lining of your shoe is smooth.
**Don’ts:**

- Don’t go barefoot, not even at home. Always wear shoes or slippers to avoid stepping on something or getting scratched or cut.

- Don’t wear high heels, sandals, or shoes with pointed toes, these types of shoes can place pressure on different parts of the foot causing diabetic ulcers. Avoid open-toed shoes and sandals with a strap between the toes.

- Don’t use a heating pad or a hot water bottle to warm your feet, wear socks to bed if your feet get cold at night.

- Don’t drink alcohol to excess. Alcohol can damage nerve cells. Drinking may lead to increased pain, numbness or burning that is associated with diabetic nerve damage.

- Don’t smoke. Smoking restricts blood flow in your feet.

- Don’t wear anything that is too tight around the legs, wearing socks with a tight band can reduce circulation.

- Don’t try to remove calluses, corns or warts by yourself. Avoid using medicated pads to treat these conditions.

**Prevention:**

- Examine your feet daily.

- The American Podiatric Medical Association (APMA) urges people with diabetes to take their socks off during every visit to their doctor.

- Have your health care provider do a complete foot exam at least once a year, and more often if you have foot problems.

- Call your doctor if you notice changes in your feet and toes.
Paula Carter, New Staff

The NRCNAA is pleased to welcome a new member to our team! Paula Carter has joined us as a research specialist. Paula has been with our team part-time for several months, but we are excited she has recently become a full-time employee with the NRCNAA.

Paula is an enrolled member of the Turtle Mountain Chippewa Tribe and is originally from Belcourt, North Dakota. Paula will be assisting with the “Identifying our Needs: A Survey of Elders” needs assessment and is also involved in starting the first Society of Indian Psychologists chapter here in Grand Forks. She has a master’s degree in counseling, and is currently working toward her doctorate degree in counseling psychology.

WELL-Balanced (Wise Elders Living Longer)

WELL-Balanced is a health promotion program designed to improve movement, encourage exercise, and help elders reduce their risk of falling. The 16 session (eight week) course includes a home safety check, fall risk screening, and a home program for use after the course in completed.

The WELL-Balanced curriculum has been tested through the use of four tribal communities that served as pilot sites. Feedback we receive from these tribes will be used to fine tune the program so we can finish developing a free toolkit that includes a video of the exercises.

To see a preview of the WELL-Balanced program, visit our website: www.nrcnnaa.org.

Needs Assessment 2010

So far, we have processed 18,000 surveys for 211 American Indian tribes, Alaskan villages, and Hawaiian homesteads across the United States.

This was a crazy year with the Title VI grant application submission date moved to the end of November. You returned a record number of completed surveys to use and we got your information out to you in a record time (One day turnaround on most groups of surveys).

There will be one more mailing associated with this cycle. If you have any questions about the numbers or would like further analysis done, please contact us.

To date there have been four cycles of the Needs Assessment. Cycle IV will be closing out March 31, 2011 and Cycle V will begin spring 2011. You can conduct the survey any time so the information is available whenever you need it for planning or documentation when a funding opportunity presents itself.

Wild Rice Hot Dish

By Jason Champagne; Red Lake Band of Chippewa

3 cups cooked chicken
3 cups cooked wild rice
1 can (10.5 oz) cream of mushroom soup
½ cup diced celery
½ cup diced carrot
1 ½ cup diced onion
1 can sliced mushrooms, drained

Combine ingredients in greased baking dish. Bake at 350 F for 1 hour.

For a healthier version, use an all-white, trimmed chicken breast, and low sodium or low fat cream of mushroom soup.
Don Warne
*By Sierra Davis; Mandan, Hidatsa, and Arikara Nation*

Don Warne, MD, MPH, is the new director of Sanford Health’s Office of Native American Health. Warne received his medical degree from Stanford University in 1995 and his Master of Public Health from Harvard University with a focus on health policy in 2002.

An enrolled member of the Oglala Lakota tribe of South Dakota, Warne grew up with the guidance of his elders—particularly his uncles who taught him a great deal about his Lakota heritage. Warne is a humble person and a figure of hope in Indian Country. He is highly respected for many reasons, one being how he incorporates Lakota values into his everyday medical practice.

During my visit with Dr. Warne, he stressed the importance of advocating for American Indian health issues. He shared, “It is important to advocate [for American Indian health issues] because it helps bring awareness and education to policymakers about issues affecting American Indian people today such as poverty, budget cuts, barriers to quality health care, and chronic funding shortages. Legislators can only make beneficial policy changes if they are educated about specific issues in Indian Country.”

Dr. Warne left me with an important message, “We are what our ancestors dreamed. We are their prayer. It’s up to us to make the changes.” While there has long been challenges facing Indian Country, people like Dr. Warne step up and tackle them with activism and creative solutions.

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**Grandparents**
*By Whitney Davis; Turtle Mountain Band of Chippewa*

When I think of my grandparents, I envision the saying, “Home is where the heart is.” For myself and my family my grandparents are our home. They bring us happiness and take away the pain that may be going on in any of our lives at the time.

My grandpa shows his love through food, so when I get the time to visit I always make sure to call ahead and let him know what I’m hungry for. My favorite dishes are his chicken and dumpling soup, his “reservation” famous meatloaf, and the breakfast he makes; it’s making me hungry just thinking about it!

My grandma shows her love in everything she does. She has a love for quilting she has shared with each child and grandchild by giving them beautiful homemade quilts. It’s nice knowing I will always have that special gift to curl up with, knowing she made it for me.

When I moved away from my parents in Michigan, I didn’t have to be homesick for very long, because my grandparents were there to help. I think this also gave my parents the courage to let me go out on my own.

My grandparents have had a huge impact on my life. I look at the hard workers they are, and it makes me want to be a better person. My mother shares a special bond with her parents; one I hope to have with my own children one day. I am grateful to have a mother who was raised by such wonderful individuals.

My grandparents are very special people, who have helped out a lot of others in need. I know that they have made a huge impact on others lives as well and I am just thankful that I get to share with readers how special these two really are to me.
Falls? Diabetes? Arthritis? Hypertension?

Help your Native Elders become WELL-BALANCED

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