

HEALTH

Why are black men afraid of therapy?

By Mitchell E. Gibson, M.D.,
Special to Sentinel-Voice

Carl is a 47-year-old Black attorney. He is married, has two beautiful children, and a net worth of well over \$3 million. Tonight, after work, Carl plans to go home, have dinner with his family, make love to his wife, then retire to his study where he will place a revolver to his head and end his life. No one will know why he did it.

In 1994, over 2,000 black men killed themselves. The vast majority of them did not seek potentially life-saving psychotherapy or talk to anyone about the stresses which led to such a desperate act.

Traditionally, black males have made up a very small percentage of the outpatient populations of most mental health practices. Yet, the stresses on the African-American male in the United States are enormous. They include high rates of unemployment, divorce, incarceration, a homicide rate 20 times the national average and shortened life-expectancy (64.6 years).

With all these pressures, why then do black men shy away from getting therapy?

As a black male psychiatrist, I have seen first hand both sides of the issues which plague black males.

In my practice, it is a rare occurrence to see a black male voluntarily come into therapy for any reason. However, when they do, it is often with much fear and trepidation.

The fact that I am a black male helps to some degree, but the same issues continue to surface as reasons for their general

ANALYSIS

resistance and fear.

The multitude of environmental and social stressors which are unique to the American black male have served to weaken our collective conscious and unconscious mind energies.

The system which is designed to protect and defend black men from this assault has at times been the instrument of many unspeakable legally sanctioned acts i.e.; public lynchings, police brutality, racially discriminatory public policies and a spate of experiments such as Tuskegee.

This often fatal irony has left an indelible mark on the most basic survival instincts of every black male in America. In effect, each and every time a black male interfaces with the system, i.e. through the courts, the police, and the medical system, at some level he believes that his life will be endangered. Unfortunately, this fear has all too often been based on bitter past experiences, either vicarious or direct.

Faced with these pressures and the perception that medical/psychiatric help could lead to further loss of control over one's life and well-being, the American black male more often than not will choose to avoid the conflict all together and take matters into his own hands if necessary. Such an approach could be viewed as a form of fatal narcissism which could ultimately allow a problem to grow to

unnecessarily large proportions.

However, when faced with historically ambiguous and often ambivalent support systems, narcissistic self-preservation and self-determined action is a logical alternative. In other words, "I can do bad by myself" seems to be a reasonable point of view.

In the hands of an experienced, competent, practitioner, psychotherapy can have remarkably positive life-changing effects. I have witnessed this from the perspective of my own therapy and from doing therapy with thousands of clients. There are some useful suggestions which might help combat the fear about going to a therapist.

1. Pick a therapist that you think you might be able to trust. Church groups, state licensing boards, colleagues and friends are useful sources.

2. After you have chosen a therapist, make a pact with yourself to see him or her at least once.

3. Write down all of your fears about the therapy and discuss them with the therapist in the first session. Be honest about your fears and expectations and give the process a chance to work.

4. Tell one close friend or associate that you are seeing a therapist. There are still a great many negative stereotypes surrounding psychotherapy and sharing the fact that you are seeing a therapist with the wrong person can lead to shame and embarrassment. However, the support of a good and caring friend can add to the healing process.

Fight the flu: Get your shot today

James L. Phillips, M.D.
Special to Sentinel-Voice

If you want to avoid the flu this year, get a flu shot now.

Most doctors and community health clinics receive an annual supply of flu vaccine in September in order to vaccinate people before flu season begins.

According to Dr. W. Paul Glezen of Baylor College of Medicine's Influenza Research Center in Houston, flu season usually begins after Thanksgiving. But, as happened in 1991, it can come earlier. This year, Baylor's Flu Center predicts a moderately severe flu season.

It takes two weeks for the

Whether we like it or not, the flu comes around each year. Make getting a flu shot part of your annual fall schedule.

vaccine to become fully effective, so the sooner you get vaccinated the better. It's not a full "guarantee," but the vaccine does give you an 85 percent chance of avoiding the flu.

The elderly are the largest group at high risk for the flu. Each year, thousands of people, most of them elderly, die from

pneumonia resulting from influenza. Many of these death could be prevented by the flu vaccine.

Other groups at risk include people with heart disease; lung disease, including asthma and chronic bronchitis; diabetes; chronic kidney disease; chronic anemia, including sickle-cell anemia; and immune-system

disorders. People not in high risk groups also can get the shot to minimize their chances of catching the flu.

If you or a loved one get the flu, brace yourself for about five days of illness. Symptoms appear suddenly and include fever, muscle pain, severe weakness and fatigue, sore throat and dry, hacking cough.

Flu patients need plenty of rest and fluids. To reduce fever and pain, adults may take aspirin or aspirin substitutes. Children should take acetaminophen if needed.

Whether we like it or not, the flu comes around each year. Make getting a flu shot part of your annual fall schedule.

**IT ALWAYS PAYS TO ADVERTISE
CALL TODAY 380-8100**

Davey Deals

**AUTOS • BIKES • BOATS
1717 FREMONT at BRUCE**



SHELDON WELCH

**E-Z FINANCING & LOW PAYMENTS
HOME OF THE \$300 DOWN**

**WE SELL 'EM FAST
CUZ WE SELL 'EM CHEAP 474-7777**

**Refinance Now
While Rates Are
At Their Lowest!!**

- Cashout For Debt Consolidation
- Reduce Your Term From 30 Years to 15 Years
- Home Improvement Loans
- Equity Loans Available
- Free Pre-Qualification Available
- Less Than Perfect Credit, OK

Call Crystal Cole
Senior Loan Officer
Profed Mortgage

501 S. Rancho Dr., Suite B-10
366-1266 • Pager 391-7474
Mention This Ad and Receive \$200 OFF CLOSING COSTS!
(Offer Expires September 30, 1997)



**STATE MONEY
AVAILABLE
STATED INCOME
CONSTRUCTION
LOANS**

Quality of life key for Rett patients

Special to Sentinel-Voice

HOUSTON — The devastating effects of a neurological disorder discovered only in the 1960s, can be eased by improving patients' quality of life, say Texas researchers.

Rett Syndrome, which results in delayed body and brain development, and associated health problems, often seems a hopeless diagnosis for parents of affected girls.

"While it's true that there is no cure for Rett, there are tremendous advantages to getting proper therapy, nutritional assessment and getting placed in appropriate school programs," said Dr. Daniel G. Glaze, an associate professor of Baylor College of Medicine and a physician at Texas Children's Hospital. "All of these things greatly improve these patients' quality of life."

Other effective therapies include music therapy which helps calm patients, hippotherapy or horseback riding which improves balance, and exploring other means of communicating such as using eye movement rather than voice. Rett Syndrome is particularly difficult on parents due to the manner in which it develops. Most infant girls with Rett are healthy during their first one to two years of life.

They rapidly develop the signs of Rett Syndrome — loss of speech and poor hand movement such as incessant wringing of hands, seizures, rapid breathing or apnea, and poor weight gain. The latter problem often makes Rett patients appear malnourished.

"We recommend balanced, high-calorie diets to help them achieve appropriate weight and height gains," said Rebecca Schulz, a Texas Children's Hospital nurse practitioner at Methodist Hospital's Bluebird Circle Clinic and Baylor's Rett Center. Schulz and Glaze are currently following 200 Rett patients at Bluebird. Many families benefit from meeting with other Rett families.

"It helps them to keep up with new treatment options, therapies and in general, provides a wonderful network of support," said Linda Harness. Harness and her husband, Bob, have a 25-year-old daughter, Becky, who was diagnosed at age 13.

Rett Syndrome affects girls and women of all ethnicities and is a leading cause of neurological problems among females. It was first described by Dr. Andreas Rett of Vienna, Austria in 1965. Current research centers on determining the genetic basis of Rett Syndrome and the causes of growth failure, as well as new drug therapies.

For more information, call the Rett Center at Baylor, 713-798-7388, the International Rett Syndrome Association at 1-800-818-1895, or Research for Rett, Inc. at 1-800-422-RETT.

NEVADA BUSINESS SERVICES



**Helping Southern Nevadans
obtain job skills and a job!**

If you need training or other assistance to help you find employment, call our offices today.

646-7675

(TDD 638-1159)



NBS
NEVADA BUSINESS SERVICES



A Human Resource and Career Training Service

Equal Opportunity Employer/Program; Auxiliary aids and services available upon request to individuals with disabilities.