



"Reaching From The Heart"



©Depositphotos

Rated #1 and Best Family Caregiving Magazine in Georgia by Google



MATTERS OF THE Heart

Georgia's Family Caregiving Magazine

THIS ISSUE:

- You Pick FourPage 4
- Nitric Oxide in Health and DiseasePage 6
- Wound Healing: The Role of Family Caregivers and Rural, Medicinal Home Remedies as Treatment in the United States Public Health Service Syphilis (USPHS) Study at TuskegeePage 8
- Don't Sell Yourself Short, It's Never Too Late!.....Page 10
- The Game Changer!Page 11
- A Matter of The Heart Advocacy: Speaking, Recommending, Arguing, Supporting, Defending and Pleading on Behalf of AnotherPage 14
- How Do I Know It Is Time To Make A Change for My Loved One & What Are My OptionsPage 16
- The Gut Microbiome: What You Need to KnowPage 18



Wound Healing:

The Role of Family Caregivers and Rural, Medicinal Home Remedies as Treatment in the United States Public Health Service Syphilis (USPHS) Study at Tuskegee

Article and Photos Provided By
Kimberly N. Carr, Ph.D, MPH



John Goode's legacy, pictured at the 20th Annual Commemoration of the May 16th, 1997 Presidential Apology of the USPHS Syphilis Study at Tuskegee, Tuskegee University

ISSN 2832-2401



9 772832 240108

National Caregivers Network, LLC

The Ultimate Resources For Family Caregivers

Tel. 478-401-4800 • Fax: 478-988-0753 • Web: www.nationalcaregiversnetwork.com

MATTERS OF THE HEART Magazine

Established 2020

1114 GA Highway 96 • Suite C-1, #177 • Kathleen, GA 31047
www.nationalcaregiversnetwork.com/magazine
info@ncngeorgia.com

EDITOR-IN-CHIEF AND PUBLISHER

Shirley A. Morman

ADVERTISING

Shirley A. Morman

GRAPHIC DESIGNERS

Christopher Dominic Jenkins
Johnny Carl Barlow

PUBLISHED QUARTERLY

CONTRIBUTING WRITERS ~EXECUTIVE ASSOCIATES

Donna D. Bellamy, Pharm.D.
Stevaughn Bush, Esq.
Dorothy Crumbly, M.S.
Dahl A. Moss, Elder, M.Div.
Joseph Foreman, LIB,
Teresa Hamilton, M.B.A.
Myldred P. Hill, Ed.D.
Chelsea J. McLendon, D.P.T.
Jettie Z. Norfleet, LPC
Kayce Raphael, Media Manager
and Associate Web Designer
Sybil Raphael, Professional Critic and Content Writer
Sonja Shavers, Ed.D.
Cheryl Wilson, M.S.
Doc Wilson, Ph.D.

Resources • Services • Products

All photos except those of writers and pages 8,11, and 13 are
copyrighted from Deposit Photos (depositphotos.com),
All rights reserved.

PRINTING

Panaprint~Macon Georgia

MATTERS OF THE HEART Magazine is a FREE on-line magazine, published quarterly (January, April, July, October), at www.nationalcaregiversnetwork.com. We offer a printed magazine copy to alliance members (businesses, religious organizations, group organizations, civic associations, professional chapters) with The National Caregivers Network Business Alliance Membership. MATTERS OF THE HEART is a subsidiary of The National Caregivers Network which is commonly referred to as ncngeorgia.com. Back Order copies of MATTERS OF THE HEART are available at \$5.25 per copy (minimum 50 copies), plus sales tax, if applicable, shipping and handling. **ONLY CHECKS ACCEPTED.** Delivery range 2-3 weeks; unless agreed in writing, an absolute delivery date is not critical in producing this project. We do not offer individual subscriptions at this time. Make your check or money order payable to National Caregivers Network, LLC and mail to:
National Caregivers Network, Magazine Subscription,
1114 GA Highway 96, Suite C-1, #177, Kathleen, GA 31047.

The Editor-In-Chief reserves the right to edit, reject or comment editorially on all material contributed. The Editor-In-Chief is not necessarily in agreement with any published article and cannot be responsible for the return of any unsolicited material. Articles "Pitched" to the Editor-In-Chief are welcomed for consideration of publication!

Reproduction in whole or in part of any text, photograph, or illustration, without written permission from the publisher, is strictly prohibited.

MATTERS OF THE HEART Georgia's Family Caregiving Magazine is published quarterly.

For advertising information contact info@ncngeorgia.com.

Address: 1114 GA Highway 96 • Suite C-1, #177
Kathleen, GA 31047

Telephone: 478-401-4800

The information published in **Matters Of The Heart Georgia's Family Caregiving Magazine** is correct to the best of our knowledge. Matters Of The Heart shall not be liable for any errors in content, or for any action taken in reliance thereon.

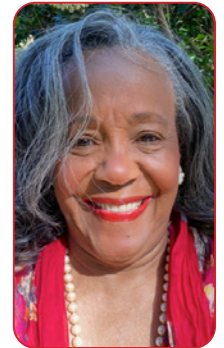
Copyright 2021-2022. **Matters Of The Heart** Georgia's Family Caregiving Magazine is a publication of The National Caregivers Network.

All rights reserved. Reproduction of any portion of this publication without written permission from the Founder, Shirley A. Morman is forbidden.

Welcome to Matters of The Heart

A Message from the Editor-In-Chief, Publisher, Shirley Morman

Caring Perspectives



Greetings!

In this Issue, I offer some perspectives across relationships so that you, our Reader, can find yourself wherever you might be in your relationship with a Loved-One or Dear-One and as you project caring for one another. I want to challenge you with Four Caring Perspectives, caring concepts no one will likely ever say to you or tell you about aging and, thoughts you may never consider. It is my earnest hope that these Perspectives will help prepare you emotionally to lead the history and legacy your elders and loved-ones left behind. As you may imagine, many thoughts and reflections may arise as we see others receiving care; there may be thoughts and feelings about who may require care in our family, among our friends and when the day might come that each of us may need to be the recipient of care. There are countless perspectives to consider regarding Family Caregiving (caring for a Loved-One-Dear-One). These Perspectives may serve as preparation for you.

Caring Perspectives:

Youth/Higher Ed

- Who do you know that needs caregiving services?
- What kind of services would be most helpful to the individual?
- How might you augment the need or what role would you play in the provision of special need?
- Utilizing a calendar, how would you best plan for the delegation of duties surrounding the family members in need?

Spouse/Children

- What does caregiving mean to you?
- How have you integrated caregiving into your life? How do you anticipate integrating caregiving into your life?
- What challenges in caregiving do you anticipate?
- What strengths do you possess that would advance your efforts?
- How can you be supported emotionally and mentally? What would be most helpful mentally and emotionally to you?

Partner/Children

- What does caregiving mean to you?
- How have you integrated caregiving into your life? How do you anticipate integrating caregiving into your life?
- What challenges in caregiving do you anticipate?
- What strengths do you possess that would advance your efforts?
- How can you be supported emotionally and mentally? What would be most helpful mentally and emotionally to you?

Siblings

- How would you imagine your role in the transition of life for a loved one?
- What challenges do you anticipate? What strengths do you bring?
- What is most important to you as an outcome or expectation as a home going for a loved one?

I do hope that these caring thoughts will inspire you to reflect on your perspectives about caring for your prospective loved-one.

Caringly yours,

Shirley A. Morman

Shirley A. Morman, Publisher & Editor-In-Chief

Email: info@ncngeorgia.com

Provided By

United States of America

United States Patent and Trademark Office



Reg. No. 5,678,895

Registered Feb. 19, 2019

Int. Cl.: 45

Service Mark

Principal Register

National Caregivers Network, LLC. (GEORGIA LIMITED LIABILITY COMPANY)
1114 Ga Highway 96, Suite C-1 #177
Kathleen, GEORGIA 31047

CLASS 45: Funeral arrangement services; Legal advisory services; Legal information services; On-site legal services; Personal concierge services for others comprising making requested personal arrangements and reservations, running errands and providing customer specific information to meet individual needs, all rendered in business establishments, office buildings, hotels, residential complexes and homes; Providing personal support services for caregivers, partners, wives and husbands of the chronically ill and/or disabled, namely, companionship and emotional support

FIRST USE 5-3-2018; IN COMMERCE 6-2-2018

The color(s) red, yellow, blue and pink and white is/are claimed as a feature of the mark.

The mark consists of a stylized red heart resting above two sets of hands. The inner set of yellow hands and the outer set of blue hands are reaching for the heart. Two (2) semi-circles envelope the two (2) sets of hands with a pink semi-circle appearing to the right and a blue semi-circle appearing to the left with a white background inside the formed circle. The word "National Caregivers Network" appears at the bottom of the design in red.

No claim is made to the exclusive right to use the following apart from the mark as shown: "NATIONAL CAREGIVERS NETWORK"

SER. NO. 87-961,229, FILED 06-13-2018



Andrei Iancu

Director of the United States
Patent and Trademark Office

Provided By

National Caregivers Network, LLC

The Ultimate Resources For Family Caregivers

Tel. 478-401-4800 • Fax: 478-988-0753 • Web: www.nationalcaregiversnetwork.com

Page: 3



©Depositphotos

You Pick Four

By Dorothy Crumbly, M.S.



Pick four of the suggestions below and start feeling better, looking better and maybe losing a little weight. Eating right is a way of life and can be challenging if not endorsed by all members of the family. If trying four of the suggestions are too difficult, start with one and be consistent. For example, if you are trying to eliminate fried, remember that the burgers at fast food restaurants are fried. The chicken sandwich at the fast food restaurant, where everyone gets good customer service, is fried unless you specify grilled chicken.

- 1. Eat fish three times a week.** For a healthy lifestyle, most health professionals recommend eating omega-3 fatty acids fish three times a week which have anti-inflammatory properties. Fish that are rich in omega -3s and relatively low in mercury include herring (fresh or pickled, mackerel (Atlantic only), sablefish, salmon (fresh, canned or smoked, wild or farmed), sardines (Atlantic), and fresh or canned bluefin tuna. Some think that any fish is good, but try to avoid fried fish of any kind and avoid all bottom feeder fish such as swai and catfish. If you can't get good fish three times a week, take a flax seed supplement which is Omega3 rich. Schedule one day a month for fried food.

Provided By

2. **Cut back on unhealthy fats.** With the cooperation of your family, cut back tremendously on saturated fat primarily found in beef, pork, lamb, dairy products and poultry skin. Bacon, sausage, salt pork, ham hocks, ox tails and cured turkey wings are saturated fats that you should try to reduce. Trans fats are often found in cakes, cookies, and chips; if these items are in the house, have family members help to decide which ones to keep and throw away. Both saturated fat and trans-fat greatly increase levels of inflammatory chemicals in the body.
3. **Cut back on sugar and juices.** More and more studies are showing that sugar and refined carbohydrates are contributing to the epidemic of diabetes and belly fat. Health officials don't know what our optimal waist size should be, but most suggest less than 40 inches for men and less than 35 inches for women (WebMD), although measurements may vary depending on race and ethnicity. Waist circumference is an absolutely vital sign in determining your health and especially your children's health. If you are buying orange juice because it is healthy, read the label. Any juice that has "made from concentrate" on the label, you are getting more sugar than juice. Don't let "sweet tea" and soft drinks make your waist expand.
4. **Get 25 grams of fiber a day.** A high fiber diet helps to control appetite and reduce inflammation. All plants contain some fiber. Among the best sources are beans, whole grains and vegetables. Research shows that people who eat beans three times a week have a smaller waist circumference. Don't forget that high fiber broccoli, cauliflower, cabbage and kale have been shown in research to lower the risk of cancer, particularly breast cancer.
5. **Eat colorful fruits and vegetables.** Produce with deep colors and intense flavors is high in flavonoids and carotenoids that prevent or delay certain kinds of cell damage. Cut raw fruit and/or veggies to make them look attractive and easy to eat; offer them to your family after you have eliminated the sugar and salty snacks from the house. Although they can be expensive serve berries as often as you can.



©Depositphotos

6. **Eat grapes.** A new study of mice, published in August 2022, Dr. John Pezzuto and colleagues found that the antioxidant in grapes improves neuron function protecting the brain from developing dementia. When the researchers compared the liver, brain and metabolic health of the mice that ate the most grapes each had a higher metabolism, longer life span, and a reduced risk for fatty liver disease. Eat grapes each day if you can afford them. If you are diabetic, know that brown grapes are high in sugar.
7. **Get enough Magnesium.** Doctors are getting much better at testing for Vitamin D, but some doctors overlooked an 18 year Harvard study of 120,000 men and women who had a 23% higher risk of type 2 diabetes than people with low magnesium levels. Magnesium relaxes blood vessels, lowering blood pressure, and keeps calcium dissolved in the blood, preventing artery-clogging calcium deposits. There are various forms of the mineral, so talk to your doctor about magnesium.
8. **Get enough exercise.** You already know that 30 minutes a day three to four times a week of aerobic exercise is adequate.

Finally, it takes time to develop and change a lifestyle. A good way to start is to take suggestions from above and work on them for a month with your family. Forget quick-start resolutions and work toward real change.

Good Luck!

Provided By

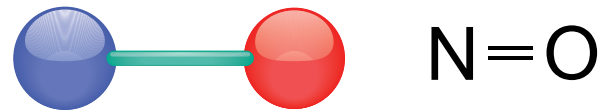
National Caregivers Network, LLC

The Ultimate Resources For Family Caregivers

Tel. 478-401-4800 • Fax: 478-988-0753 • Web: www.nationalcaregiversnetwork.com

Nitric Oxide in Health and Disease

Doc Wilson, Ph.D.



nitric oxide

©Depositphotos



Nitric Oxide (molecular structure: NO) is an important chemical (as a gas) in the human body. It is produced by endothelial cells called macrophage cells that line the inner walls of blood vessels.

The reason that one's "nitric oxide status" is important is that low levels are associated with a broad range of potential harmful effects, including:

- increased risk of blood clots
- increased risk of high blood levels of glucose (blood sugar)
- increased risk of becoming a Type 2 Diabetic
- increased risk of contracting many of the so-called autoimmune diseases
- increased risk of having a heart attack, a stroke, and/or dementia – including Alzheimer's Disease
- poor wound healing ability, and impairment of cell proliferation
- increased inflammation throughout one's body
- impaired secretion of insulin
- etc.

Fortunately, the above unhealthy potential effects can be minimized (even greatly reduced) by adopting healthy lifestyle choices with respect to nutrition and exercise. In addition, a regular sleep – wake up cycle, in which there routinely is a sufficient amount of deep sleep, would be wise to implement.

Foods That Help One's Body Produce Nitric Oxide

- beets
- nuts and seeds – such as almonds, peanuts, cashews, macadamias, pumpkin seeds, sunflower seeds ("kernals")
- noni fruit
- dark leafy greens – such as kale, spinach, and arugula
- berries – such as strawberries, blueberries, raspberries, blackberries
- pomegranates
- citrus fruits – such as oranges, limes, lemons
- garlic
- watermelon
- dark chocolate
- red wine

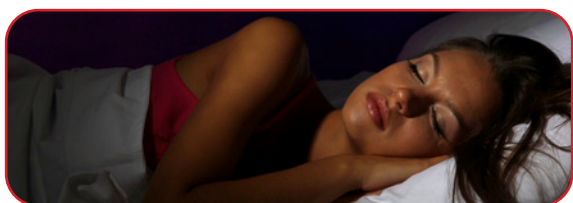


©Depositphotos

Provided By

Exercise

- Strength-Building Exercise – such as using free weights, weight resistance machines at a gym, or grocery bags containing cans of food, rocks, etc.
- Cardio Exercise – in which (if “out of shape”) one gradually works up to doing High Intensity Interval Training; this allows one to get a better, more intense cardio workout than the typical slow, low-level, steady pace that occurs by most exercisers in almost all gyms. Another benefit is that there is a much shorter cardio workout that also produces greater heart strengthening!
- **IMPORTANT NOTE:** One should make sure that their physician gives his/her OK/ “thumbs up” for an exercise program like the one delineated above – especially if out of condition!



©Depositphotos

More on Sleep

Better sleep can be attained by following a few simple guidelines:

- A Dark Bedroom by using dark, heavy drapes for all windows
- Temperature: It should be comfortably cool
- When two sleepers have different temperature preferences, the cooler temperature should be used, and the other sleeper should use an additional blanket/cover
- “White Noise” (between stations on an FM station) and/or one or more floor and/or ceiling fans will help drown out low level extraneous noise

Following the above guidelines will help strongly promote a healthier, happier life! Why not give it a try!? You have nothing to lose, and everything to gain!

REFERENCES

Borsoi, F.T., et al., December 13, 2022. Dietary phenols and their relationship to the modulation of non-communicable chronic diseases and epigenetic mechanisms: a mini-review.

Food Chemistry: Molecular Sciences (Oxford), 6: 100155 and following.

Cámara-Calmaestra, R., et al., June 7, 2022. Effectiveness of physical exercise on Alzheimer’s disease. A systematic review.

The Journal of Prevention of Alzheimer’s Disease, 9: 601-616.

Choudhari, S.K., et al., May 30, 2013. Nitric oxide and cancer: a review.

World Journal of Surgical Oncology, 11(118).

DaSilva, G.M., et al., October 14, 2021. Nitric oxide as a central molecule in hypertension: Focus on the vasorelaxant activity of new nitric oxide donors.

Biology (Basel), 10(10): 1041 and following.

Ekong, M.B., & Iniodu, C.F., June 26, 2021. Nutritional therapy can reduce the burden of depression management in low income countries: A review.

IBRO Neuroscience Reports, 11: 15-28.

Mintz, J., et al., January 27, 2021. Current advances in nitric oxide in cancer and anticancer therapeutics.

Vaccines (Basel), 9(2): 94 and following.

Oledzka, A.J., & Czerwińska, M.E., February 28, 2023. Role of plant-derived compounds in the molecular pathways related to inflammation.

International Journal of Molecular Sciences, 24(5): 4666 and following.

Phillips, C., & Fahimi, A., July 26, 2018. Immune and neuroprotective effects of physical activity on the brain in depression.

Frontiers in Neuroscience, 12.

Xu, Y., et al., September 16, 2021. Role of dietary factors in the prevention and treatment for depression: an umbrella review of meta analyses of prospective studies.

Translational Psychiatry, 11: 478 and following.

Wound Healing:

The Role of Family Caregivers and Rural, Medicinal Home Remedies as Treatment in the United States Public Health Service Syphilis (USPHS) Study at Tuskegee

Article and Photos Provided By **Kimberly N. Carr, Ph.D, MPH**



I'll begin by quoting Nobel Laureate and Pulitzer Prize-winning novelist, Toni Morrison, "Definitions belong to the definers, not the defined". It is not too often that the masses get to hear or read about the narratives of the "defined" which in this case would be the 623 rural, Blackmen from Alabama exploited by the United States Public Health Service (USPHS) in the infamous "United States Public

Health Service Syphilis Study (USPHS) at Tuskegee," from a third-generation descendant, me. As an early career public health professional and researcher with an interdisciplinary background that ranges from COVID-19 and flu vaccine hesitancy and health disparities to food systems, hunger, and nutrition, I share a unique duality in understanding the implications of the USPHS Study ("the Study") on public health and healthcare and as a descendant family member of one of the 623 men, John "Big Daddy" Goode.

While I cannot speak for all families whose fathers, grandfathers, brothers, uncles, cousins, and other loved ones were taken advantage of by the USPHS, I will briefly discuss the legacy of my great-great-grandfather John "Big Daddy" Goode, my grandmother (his granddaughter) Annie Mae "Mae Bae" (Goode) Moore as his primary caretaker, and the use of rural, medicinal home remedies such as yellow root, turpentine (boiling of green pine needles,), rabbit tobacco, sulfur, camphor, white oak, and tallow used to "treat" him. Through my great-great father's and grandmother's lived experiences narrated by me through my mother, Margaret Moore, and family historian, Oscar Goode III's first-hand accounts, I hope you, as the reader, understand the importance of how the social determinants of health (where we eat, live, sleep, play, go to school, and worship) play a major role in our healthcare, healing, and hope for better well-being.



John Goode's legacy, pictured at the 20th Annual Commemoration of the May 16th, 1997 Presidential Apology of the USPHS Syphilis Study at Tuskegee, Tuskegee University

The United States Public Health Service Syphilis Study (USPHS) at Tuskegee

I'm quite sure you have heard about the infamous "Tuskegee Experiment" or "Tuskegee Syphilis Study", which by the way are misnomers. The ethically and politically correct title is, "United States Public Health Service Syphilis Study at Tuskegee". Using this correct title demonstrates ownership of who largely conducted the "so-called" study, the USPHS, and to not further mar and stigmatize such a historic place and those still living there. I use the phrase "so-called" because no rigorous research protocols were administered, and records were not adequately kept by PHS investigators.

Provided By

The actual title of the study is, "Tuskegee Study of Untreated Syphilis in the Negro Male". The USPHS Study is the longest, non-therapeutic study that occurred for 40 years between 1932-1972 in Macon County, Alabama, and its surrounding areas. Tuskegee is the county seat of Macon County. Before the government sanctioned study, Julius Rosenwald (Jewish philanthropist and co-founder of Sears, Roebuck, & Company), conducted a study (The Rosenwald Study) via his Rosenwald Foundation to assist in helping southern, rural Blacks have a better quality of life. This occurred in the late 1920s, early 1930s. Syphilis rates at that time were very high among Blacks. Rosenwald contracted the USPHS to evaluate six counties: Glynn County, Georgia; Macon County, Alabama, Scott County, Mississippi, Albermarle County, Virginia; Pitt County, North Carolina; and Tipton County, Tennessee. Rosenwald subsequently completed his study. However, a nefarious turn for the worse occurred when the USPHS decided to conduct their study selecting Macon County, Alabama due to the area having the highest syphilis rates among the counties surveyed. Their main and only purpose was to study the natural progression of syphilis in the human body. Not to treat.

As history continues, on July 26, 1972, Associated Press reporter Jean Heller broke the story "Syphilis Victims in U.S. Study Went Untreated for 40 Years" on the front page of the New York Times. Heller was informed by PHS whistleblower, Peter Buxtun, of the egregious and unethical acts being committed. Due to public outcry, the study ended. Please note, the men were NOT INJECTED WITH SYPHILIS. Remember the title of the study, "Tuskegee Syphilis Study of **UNTREATED** Syphilis in the Negro Male." Their bodies were more valuable dead than alive. PHS investigators reasoned that these Black men were promiscuous so they would not need to intervene (i.e., inject).

Purportedly, a total of 623 were coercively recruited under the auspices of free healthcare to participate; PHS investigators did not keep accurate records. The men were unaware that they were participants in a governmental project and there was no informed consent to tell them what was going to occur. You see, the majority of these Black men were poor and illiterate and were sharecroppers and tenant farmers. In 1943, treatment in the form of penicillin was widely used to treat syphilis, yet treatment was withheld. The men, like my great-great-grandfather John, could not even receive an aspirin for a headache and were turned away from local doctors. These men suffered and so did their families watching them experience debilitating agony from the syphilis disease.

Role of Family Caregivers and Use of Medicinal Home Remedies

My great-great-grandfather John was a part of the "test" group. He was a syphilitic. John was born in the 1900s, in Russell County, Alabama in the St. Luke community near Hatchechubbee, Alabama. He was tall and biracial. His mother was Black, and father was a White landowner. They were not married. After his father passed, John inherited farmland with livestock and became a preacher. By today's standards, he had some semblance of wealth and status. John entered the Study in the early 1930s.

During his time in the Study, my grandmother, Mae Bae, primarily took care of him and tended to his syphilitic wounds. Mae Bae was the oldest of 10 children. Her siblings, now all deceased, were my great aunts and uncles. Syphilis, an infectious disease, is caused by a spiral-shaped bacterium, *Treponema pallidum* and is transmitted sexually through bodily fluids or passed from a mother to her unborn baby during pregnancy. As syphilis progresses in the human body, it produces chancres (syphilitic sores) and causes inflammation (pain in the joints), fever, red rashes, and swollen lymph nodes (glands in neck, armpit, and groin areas), to name a few.

Because treatment was inhumanely withheld and there were no other medical options, medicinal home remedies were best suited to provide non-traditional, palliative care. My grandmother made oral tonics and topical salves from plants found on their land in rural Alabama: yellow root, rabbit tobacco, turpentine (boiling green pine needles), camphor, white oak, and tallow (fatty oils from their cattle livestock). The medicinal uses of these plants and animal product aids in the alleviation of inflammation, pain, irritation, itching, and swelling. Also, anti-microbial and anti-fungal properties are exhibited. Grandmother Mae Bae would combine these different ingredients in various concoctions and apply them to John's wounds as treatment to ease his suffering.

My grandmother had a special gift of patience, care, empathy, and plant medicine. At the time, syphilis was considered a "taboo" disease because it involved sexual contact and had been associated with ungodliness and uncleanness. She spent a lot of time with him alone. I would imagine she would speak to him, tell him about the happenings of family and friends, and help him cope by attempting to heal his emotional wounds through old stories and biblical scriptures. John died in his 40s in the mid-1940s in December.

Provided By

National Caregivers Network, LLC

The Ultimate Resources For Family Caregivers

Tel. 478-401-4800 • Fax: 478-988-0753 • Web: www.nationalcaregiversnetwork.com

In closing, I continue to see the implications of the Study in public health and healthcare particularly with COVID-19 and flu vaccine hesitancy (persons either use the Study, erroneously, to justify not getting vaccinated or as encouragement to get vaccinated). Also, I have a better understanding of the role social determinants of health play among populations that have been historically traumatized in seeking medical care and trusting said system. I've learned that extra care, patience, and empathy go a long way. In future article issues, the social determinants of health and their implications on communities that are disproportionately affected by health disparities will be explained.

REFERENCES

Centers for Disease Control and Prevention. (2022). The U.S. Public Health Service Syphilis Study at Tuskegee. <https://www.cdc.gov/tuskegee/index.html>

Centers for Disease Control and Prevention. (2022). Syphilis – CDC Basic Fact Sheet. <https://www.cdc.gov/std/syphilis/stdfact-syphilis.htm>

Heller, J. (1972, July 26). Syphilis Victims in U.S. Study Went Untreated for 40 Years. <https://www.nytimes.com/1972/07/26/archives/syphilis-victims-in-us-study-went-untreated-for-40-years-syphilis.html>

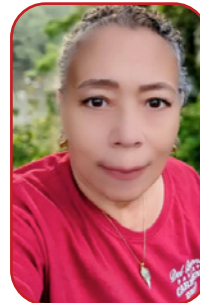
Morrison, T. (1987). *Beloved*. Vintage Books

Radoff, J.D et al. (2016). *Treponema pallidum*, the syphilis spirochete: Making a living as a stealth pathogen. *Nat Rev Microbiol*, 14(12), 744-759. doi: 10.1038/nrmicro.2016.141

Reverby, S. M. (2000). *Tuskegee's Truths, Rethinking the Tuskegee Syphilis Study*. University of North Carolina Press

United States Department of Health and Human Services. (2022). Social Determinants of Health, Healthy People 2030. <https://health.gov/healthypeople/priority-areas/social-determinants-health>

“Don’t Sell Yourself Short, It’s Never Too Late to Learn!”



By **Lisa Penman**,
Senior Strayer University

Lisa Penman is A Matters of
The Heart Magazine
College Student Intern
&
Strayer University Senior
Cybersecurity Major

Presidential Scholar (Cumulative GPA 4:00
Every Semester Since Freshman Year)

D.C. Gamma Chapter Alpha Chi

38 Year Full-Time Maryland Corporate America
Employee

As the world changes, we rely more and more on “smart phones” and computers. Although we would like to think that we are safe when we access things like devices, networks, and people, there have been several high-profile attacks, therefore, cybersecurity is vital for everyone. The use of online services will continue to grow and so should our diligence with keeping a person’s personal data private. Those who make a living breaking the law are quite sophisticated when it comes to breaking into the accounts of banks, credit card companies, as well as other data.

Because I see the world moving forward and using PC’s more, and more, I felt that cybersecurity was a field that would constantly evolve and be needed in an effort to outsmart criminals or quickly fix the damage they may cause. After all, smartphones are mini computers. You can do basically everything on a smartphone that you can do on a computer.

While we must all do our due diligence to protect our information as best as we can, it is also imperative that we have individuals who can competently work in cybersecurity to prevent data breaches or find a way to quickly correct breaches.

Provided By



The Game Changer!

Article and Photos By **Sonja Shavers, LCSW, Ed.D.**

Personal Wellness Strategist & Certified Health Coach



Many of the *Matters of the Heart* readers know that I am passionate about health and that I love to share knowledge about subjects that I believe can make a difference in the health of those in my community. You may also understand that I am troubled by the statistics that I have shared several times in my writings regarding the plight of

the Black Community as related to diabetes, high blood pressure, cancer and heart disease. The fact that these diseases are so prevalent among my people, particularly people in the south, is the reason I do what I can to change this game that we all experience called life!

I have also shared many pivotal experiences that have influenced my health journey and caused me to stay curious about the role of nutrition in my overall health. I wrote about plant powders to help us get additional fruit and vegetables in our bodies, the need to drink water, the importance of sleep and exercise. Most recently, I shared about the role of Vitamin D and its connection to disease, and asked the readers to check their own Vitamin D levels. There are so many tools available to us today and I love sharing whatever I learn to empower others.

Yet, I know that it never matters how much information is available to our readers and to our community, unless each of us does this one thing. We must make an individual decision to change our mind...change our perspectives about health and reflect that change in our behavior daily. Once we have an understanding about the depth of the famous Hippocrates' quote, *let food be thy medicine and medicine be thy food*, we can decide to integrate new knowledge about the power of food to heal or to kill based on our choices. The results will show up clearly in our health profiles!

The power of a decision can be life changing so this writing is intending to change lives! As a psychotherapist, I understand that we as individuals are complex and that we live in times where it is common to carry multi layered sets of life challenges. On any given day, one could have just survived the loss of a close relative, committed a child to in-patient rehabilitation for substance abuse, wrestled with a decision to medicate another child for Attention Deficit Hyperactivity Disorder, discovered the spouse is having an affair, learned about a new cancer diagnosis and an eviction notice after a job loss. It would be beyond amazing if I could pull out my magic wand and fix all these challenges in an instant! However, there are rarely instant fixes for such complications in life.

Provided By

National Caregivers Network, LLC

The Ultimate Resources For Family Caregivers

Tel. **478-401-4800** • Fax: 478-988-0753 • Web: www.nationalcaregiversnetwork.com

Yet, after one has been allowed to grieve over such very real circumstances, he/she can be presented with the power of choice! One can live for the rest of his/her life saying "ain't it awful" because these circumstances are absolutely awful for anyone. There is no denying that anyone should have to endure such a plight. The problem is that after acknowledging the weight and severity of the situation, the issues are still present. Therefore, we can then start the real work by introducing Cognitive Behavior Theory (CBT), which suggests that real change begins with new thinking after determining that the old way of thinking has not been effective. This oversimplified definition of CBT infers that new behavior follows new perspectives.

In the above scenario, an oversimplistic journey after some time to grieve may include processing and embracing the years of life with the relative and the memories created and the fact that the loved one is no longer in pain. As for the children, one may begin to feel blessed that treatment is available for both but that personally researching both conditions could lead to a feeling of empowerment and purpose over time. As for the marriage, the opportunity to explore the quality of the relationship allows one to ask relevant questions.

What do I want?

What does the marriage partner want?

What is my role in the challenges?

Is this worth saving?

Is this an opportunity for freedom from a stressful situation?

Is marriage counseling a possibility?

We can also explore together lifestyle changes that may help the person improve health along with other healthy habits and attitudes that support healing despite the other challenges. Processes are not instant and may be focused on simultaneously or one at a time, but attitude is definitely important in the healing process, emotionally, mentally and physically.

I have a suggestion for our readers today regarding a changing of the mind...a change in our thinking. Before presenting the change challenge, ask yourself the following:

Am I satisfied with my health status right now?

Do I lack energy after breakfast in the morning that causes me to rely on pick me ups like coffee, energy drinks

Am I experiencing burps and bloating as my body attempts to digest food?

Am I tired or sleepy even before lunch?

Do I have easy bowel movements daily?

Am I taking over the counter medications for healing (such as for headaches) that food may actually heal?

If you answered yes to any of those questions, consider this Game Changer! This change can help with brain fog (help us think more clearly), boost energy and begin the process of detoxifying our bodies and ease the digestive process. This is food that is truly medicine. You may remember that I have consistently supported whole foods, foods in their purest form as they come out of the ground or from a tree. Therefore, I am asking our readers to do 2 things. The first thing is to eat fruit on an empty stomach for the next 10 days. I know that some are saying that fruit does not agree with them even though they like it. Others may be thinking that they cannot have fruit because they were warned about the sugar in fruit. However, there is evidence (Fit for Life, 1985) that suggest that fruit in its natural state, eaten on an empty stomach is life changing and healing for the body. Fruit is a plant that some believe was the only food consumed by our ancestors many years ago. The evidence suggests that fruit does not cause the body to labor in the digestive process because it is already digested.

There are four guidelines in the Game Changer challenger:

- 1) eat the fruit on an empty stomach in the morning
- 2) eat fruit with nothing else, no toast, no eggs, nothing (some nutritionists believe fruit is digested differently than other foods so combining it often causes discomfort)
- 3) do not alter the fruit from its original state, do not heat
- 4) eat only fresh fruit
- 5) eat as much fruit as you like, of any kind, in the morning until noon if possible. Do not eat anything else after eating the fruit for at least 20 to 30 minutes.
- 6) do this challenge for 10 days.

Provided By

7) Watch the movie *The Game Changer*, streaming on Netflix!

Basketball star LeBron James, has publicly shared his perspectives on nutrition as it relates to his body's performance (38 years old NBA professional). He has also joined the team that includes Chris Paul, Arnold Schwarzenegger and others to produce the sequel to the movie, *Game Changer 2!*



If you have health questions or concerns, check with your health professional prior to participating. Fruit is whole food, without chemicals, which is more that can be said about many of the processed foods available today. For this challenge, the morning intake is the only ask. If you are tired of being sick and tired and have examined your thoughts for effectiveness, make a choice to try something new. This one simple change can make a difference in your life!

Diamond, Harvey & Marilyn (1985) *Fit for Life*, Warner Brooks Inc, New N.Y., 10020

If you are willing to take on this game changing challenge and would like to be a part of a group while doing so, please email or text me to say, "I'm in! I can be reached at:

wholefoodrich@hotmail.com or text or call 470 227 1484



Provided By

National Caregivers Network, LLC

The Ultimate Resources For Family Caregivers

Tel. 478-401-4800 • Fax: 478-988-0753 • Web: www.nationalcaregiversnetwork.com

A Matter of The Heart

Advocacy: Speaking, Recommending, Arguing, Supporting, Defending & Pleading on Behalf of Another

Myldred P. Hill, Ed.D.



While serving in the capacity of University Administrator, I was reminded of a saying "Variety is the Spice of Life!" said to be a Proverbial saying attributed to English poet William Cowper (1731-1800 in the Task (1785) on many occasions, thereby, continuing to relate and interrelate the various degrees of strategies for success, regardless the duty and responsibility, *success* was the goal. The goal of

success was necessary to develop a Guiding Principle to shape my thoughts and messages in an environment which was made up of personalities and office holders, across the spectrum of academic learning and achievement, which governed those who superintended and those who were subject to higher authorities, as the goal was to achieve and succeed. Likewise, in the role of Caregiver, individuals are expected to perform with precision and prevision, to take on tasks which involve the physical, intellectual, emotional, and social needs on a day-to-day basis, which is no small task.

Presently, it is reported that nearly 48 million caregivers are caring for someone over the age of 18. Nearly one in five (19%) are providing unpaid care to an adult with health or functional needs. More Americans (24%) are caring for more than one person-up from 18% in 2015. Approximately 39.8 million caregivers provide care to adults (aged 18+) with a disability or illness or 16.6% of Americans. (Caregiver Statistics: caregiver.org). All of the above are noted, reported and discussed daily for information purposes. The words, and reports take on emotions, actions, service, and meaning for those who are providing the services.



©Depositphotos

I was one of those until five years ago, when my spouse of 50 plus years, and 90 plus years old, became more than a statistic or a categorized group. He became a truly loved and cherished individual, linked to me body, mind and Spirit, and I became one who was needed to assume the role of caregiver. I began to assume and become consumed in the work of much he had administered expertly himself. I was his spouse, lover, confidant, and friend.

As a World War II Veteran and Korean War Veteran, with age-related and military service-connected debilitating conditions, the tasks mounted. I am Blessed to be able to perform my duties and responsibilities, with commendations from most of his doctors and healthcare providers, if not all. I do certainly take the assignments seriously. I did not think of honing or focusing on a term for aiding me to strategically internalize a framework or guiding principal until we visited a Veteran's Assessment Service office for evaluation, when the Nurse Practitioner introduced herself as his Advocate. As soon as she spoke those words she transitioned into an Angel-like personality, and began to perform likewise as an Advocate. It was at that point that I internalized who and what I am to and for my spouse and it truly makes a difference.

What is an Advocate? One who:

Speaks in favor: Physically, Intellectually, Emotionally, & Socially. Persons with physical disabilities require constant supervision for (1) mobility, - transportation, (2) personal hygiene, (3) specific impairment aids for (a) vision, (b) hearing, (b) feeding, preparation and serving (4) shopping, (5) business transactions, (6) travel, as well as many other accommodations.

Provided By

Home renovations, and modifications are high on the list. More and more homes are requiring ramps for entering and exiting.

Recommends. Persons battling Dementia, Alzheimer's, and other progressive mental deterioration, due to generalized degeneration of the brain (common cause of premature senility), are in need of Advocates to keep abreast of all areas of programs, processes, protocols, etc. on behalf of those who are dependent upon another person or persons to maintain a level of health and wellness so very important to aging loved ones especially. Family Caregivers are extremely important. While rehabilitation and nursing facilities are equipped to provide care; from personal experience, it seems of ultimate importance for someone close to the infirmed to become Advocate Extraordinaire!

Argues for a Cause. It is this service and concern which I personally believe to be a definite priority. From experience, being there for each and every Doctor's Appointment allows me to listen and observe the Physician's level of interest in providing the highest level of treatment, and to ask important questions about several aspects of my spouse's illness and recommended treatment, if and when modifications are needed and considered. I must state that most of the doctors, nurses, and practitioners have been extremely accommodating. I will add on a personal note; others can discern when family especially are truly caring and will *accommodate* when requested. Items such as hospital beds, toileting tools, and hygiene items are available and provided. **Advocacy makes all the difference!**

Supports or Defends. This Advocacy activity becomes truly a Matter of The Heart! Persons needing care truly need to enjoy a heart-to-heart relationship with the Caregiver. The level of vulnerability heightens when one person becomes totally dependent upon another for their quality of life on a day-to-day basis. In some cases, persons needing care will act in a manner to test the Caregiver's level of sincerity, love, and concern. This is an area where one cannot buy or pay for genuine and compassionate care. Simply put, how well do we "Speak Up For" our loved one? There have been times when I have had to push for and stress the importance of a needed service or change in services. It is great to remember that the person you are caring for now, cared for you! Reciprocity should be the byword-those who need it most!

Pleads on Behalf of. Again, I can speak boldly about this! As the Spouse of a Veteran with Service-Connected Disabilities, I must be able to express the plight of my husband who served his Country with truthfulness, empathy, and documented involvement in his well-being. It is I who plan, manage, and monitor and superintend his needs to ensure that none are neglected, dismissed, or ignored. **Advocacy** is the key!

All of the above bring me to the point I look forward to in each of these Articles I submit..... The Spiritual Aspect or component.

This arena is so important that I adopted the following formula many years ago, while enjoying a successful career in University Administration, concentrating on Student Affairs and as a Believer, outreach into the communities where I was privileged to serve. A Spiritual Perspective and daily walk with the Advocate of All Advocates, the Triune God.

I recall one of many Sunday School Hymns which personally, and successfully define my Advocacy: Song: I Come To The Garden Alone, by C. Austin Miles, March 1912. (1868-1946).

Chorus: "And He Walks with me, And He talks with me. And He tells me I am His own. And the joy we share as we tarry there. None other has ever known.

It is my Prayer that as you read this Article, the Spirit of The Triune God speaks to you in the most profound way possible as you are Caring for your loved one or begin to do so in the near or distant future. More likely, than not, you will be Blessed to do so.



Provided By

National Caregivers Network, LLC

The Ultimate Resources For Family Caregivers

Tel. 478-401-4800 • Fax: 478-988-0753 • Web: www.nationalcaregiversnetwork.com



©Depositphotos



©Depositphotos

How Do I Know It Is Time To Make A Change for My Loved One & What Are My Options?

Cheryl J. Wilson, M.S.
Advocacy for Seniors



There comes a time in the lives of seniors when it may be unsafe for them to remain at home. What are the signs that it may be time to look for alternatives to having a loved one living alone independently?

- They forget appointments / do not attend social events they normally attend, such as going out with friends, attending church, etc.
- Their personal hygiene is not as consistent as normal. They may be wearing the same clothes for several days.
- They sleep more than normal, and their sleep schedule may be altered. (Up all night and sleep during the day.)
- You may notice weight loss and suspect they are not eating routinely.
- They may be experiencing more falls.

Red Flags for the Caregiver

- They are not getting enough sleep.
- They had to give up a job to provide care for a loved one.

- They are not able to spend time with their family/friends. This may lead to stress in their marriage and problems with the children.
- They have no one to help carry the load.
- They are getting less patient with their loved one.
- They are resenting, always having to provide care.

What Are My Options?

- Home Health Agency
- Adult Day Program
- Long Term care

Home Health Agency:

Benefits include but are not limited to:

- Having a caregiver who focuses on the care of your loved one. They can provide one on one care that can allow your loved one to remain independent in their home.
- Sometimes, a senior is more comfortable with someone other than family providing personal care for them.

Some of the cons to bringing in a Home Health Agency include but are not limited to:

Provided By

- Sometimes, the senior feels uncomfortable having a stranger enter their home.
- The cost of bringing in a home health agency is high and may not be an option for a family.

Adult Day Programs can give the family a much-needed respite so they may continue to work or just have time to live their lives knowing their loved one is being cared for. I like the adult day program options and feel like it is a great option for many families and is one of the most underutilized services out there.

Benefits include but are not limited to:

- The senior can go from one to five days a week.
- They can go for a half day or full day (8 hours)
- Many adult day programs offer transportation to and from their site.
- Some adult day centers offer other services such as bathing, therapy, and doctor visits.
- Some adult day programs have programs tailored to individuals with dementia.
- Individuals who enjoy being around others, like the socialization offered by adult day programs.
- Some adult day programs have options to help with payment, such as Medicaid, and VA.

Long-term Care Communities may be the best option for someone when the needed care level cannot be safely provided in the home. One of the biggest obstacles with families looking into the long-term care option is that often the parent made the child promise never to place them in a nursing home, and now they feel guilty and like they are breaking a promise they made to mom or dad. I hear this often from adult children when their loved one needs the specialized care of a long-term care community. This is what I share with them: *When your parent made you promise not to place them in a nursing home, they were in good health, and you were young and did not understand the gravity of what they were asking you to do. This was not fair of them to ask you to make that promise. You did not give the illness to your loved one. They have now declined and cannot live safely alone. You have your own life to live, which includes your job, family, and children, and you don't have to sacrifice them to care for your loved one. There comes a time when the most loving thing you can do is to place your loved one in a long-term care community and become their advocate.*

When looking to place someone in a long-term care community, remember that assisted living communities and skilled nursing homes are businesses like any other business. They specialize in areas of care, and you need to make sure the home you are placing your loved one in can meet the specific needs of your loved one.

Palliative care is care given to improve a patient's quality of life with a serious or life-threatening disease, such as cancer. Palliative care is an approach to care that addresses the person as a whole, not just their disease. The goal is to prevent or treat, as early as possible, the symptoms and side effects of the disease and its treatment, in addition to any related psychological, social, and spiritual problems. When Palliative care is chosen, the individual may still elect to seek aggressive treatments such as radiation or chemo.

Hospice Care: Increasingly, people are choosing hospice care at the end of life. Hospice care focuses on the care, comfort, and quality of life of a person with a serious illness who is approaching the end of life. When it's not possible to cure the illness, or a patient chooses not to undergo aggressive treatments such as radiation or chemo, Hospice care may be the best option for the individual. Hospice care can be given in the individual's home or in a long-term care community, such as assisted living or skilled nursing home.

When the time comes, and your loved one needs additional care, the best rule of thumb is to take the least restrictive intervention possible. If they could benefit from home health or an adult day program and you can afford to place them there, try that first. Only place them in a long-term care community if the care level can only be met by placing them or if financially long-term placement is the best option.

Remember that you will also go through an adjustment period when your loved ones living situation changes. You may experience depression, anger, or anxiety as your loved one declines. You may be grieving the loss of the parent you always knew. You may experience a role reversal and now have to become the parent and take on the role of caring for them. Take a deep breath and be kind to yourself; you must allow yourself time to adjust.

Cheryl J. Wilson, M.S.
Advocacy 4 Seniors

Provided By

National Caregivers Network, LLC

The Ultimate Resources For Family Caregivers

Tel. 478-401-4800 • Fax: 478-988-0753 • Web: www.nationalcaregiversnetwork.com

Page: 17



© Depositphotos

The Gut Microbiome

What You Need to Know

Doc Wilson, Ph.D.



The Gut Microbiome comprises the roughly one trillion microorganisms (mainly bacteria, but also some viruses and fungi) that inhabit the gut, in particular the small intestine and the large intestine.

You might wonder what all the fervor is about the gut microbiome in the scientific community, as well as in communities of lay people, across the nation and around the globe. Hopefully, this article will shed some light on it, and answer any questions you may have about it.

For starters, a basic bit of anatomy needs to be considered: for every neuron (nerve cell) that goes from the brain to the Gut Microbiome, nine neurons go from the Gut Microbiome to the brain!

This might appear to sound like you might be “held hostage” by your Gut Microbiome! However, this is not a correct interpretation. **Rather, if you treat your Gut Microbiome with respect, it will reward you as stated above!**

What is respect to your microbiome? The microorganisms in your Gut Microbiome consume the food that you have eaten, and then that your stomach has digested. You may have heard the expression “garbage in yields garbage out” (often used in the context of Information Technology). The very same principle applies to your gut microbiome. Thus, if you eat and drink junk food, then the health of your body, including your brain, will be adversely impacted; consuming junk food will therefore degrade the overall power and capability of your brain and the rest of your body.

Provided By

Specific Benefits That You Might Experience from Respecting Your Microbiome

- Improved odds of your immune system successfully fighting a disease
- Improved odds of your immune system successfully fighting cancers
- Thinking more clearly, more accurately, and more creatively
- Sleeping better
- Performing better in sports and athletic competitions
- Experiencing better MENTAL HEALTH
- And so forth



©Depositphotos

The Critical Role of Nutrition

Follow these guidelines for your best nutrition:

- 4 to 5 servings (or more) of fresh or frozen fruit each day (not metal-canned fruit), and with variety
- 4 to 5 servings (or more) of fresh or frozen vegetables each day (not metal-canned vegetables), and with variety
- Maintain a 100% plant-based nutrition, including avoiding dairy (from cows) products, but dairy products from goats are OK
- Make sure that, each day, you consume 3 or more servings of nuts and/or seeds; furthermore, nuts and seeds should be eaten with each meal to enhance the absorption of oil-soluble nutrients in your food, such as lycopene (found in tomatoes, watermelons, ketchup, etc.)
- Be certain to get the minimum daily requirement of calcium to prevent osteoporosis. I favor drinking Almond Milk that has been fortified with calcium.

- Finally, if you have sufficient time each morning, eat a large brunch and avoid lunch all together. (By the way, many in past generations consumed only two meals a day. I only do two, too!)

Stress Reduction is very important. I find it interesting that many health professionals increasingly are recommending “walking in nature.” This could include walking on a nature trail, tending to your flower garden, sitting by a waterfall, lounging at a beach, etc.

Good sleep and exercise programs are also absolutely essential to producing your optimal gut microbiome, as are avoiding smoking (including marijuana, unless there is a strong medical reason) and using illicit drugs.

REFERENCES

- Behfar, Q, et al., April 28, 2022. Aging, senescence, and dementia. *Journal of Prevention of Alzheimer's Diseases*, 9: 523-531.
- Carding, S., et al., February 2, 2015. Dysbiosis of the gut microbiota in disease. *Microbial Ecology in Health and Disease*, 26.
- Cherian, L., et al., 2019. Mediterranean-DASH intervention for neurodegenerative delay (MIND) diet slows cognitive decline after stroke. *Journal of Prevention of Alzheimer's Diseases*, 6(4): 267-273.
- Granero, R. February 10, 2022. Role of nutrition on healthy mental state. *Nutrients*, 14: 750 and following.
- Rosa, J.M., et al., March 1, 2022. The role of microRNA and microbiota in depression and anxiety. *Frontiers in Behavioral Neuroscience*.
- Rucklidge, J.J., & Kaplan, B.J., November 8, 2016. Nutrition and mental health. *Clinical Psychological Science*.
- Xu, Y., et al., September 16, 2021. Role of dietary factors in the prevention and treatment for depression: an umbrella review of meta-analyses of prospective studies. *Translational Psychiatry*, 11: 478 and following.
- Zhang, X.-X., et al., April 10, 2021. The epidemiology of Alzheimer's Disease modifiable risk factors and prevention. *The Journal of Prevention of Alzheimer's Disease*, 8: 313-321.

Provided By

National Caregivers Network, LLC

The Ultimate Resources For Family Caregivers

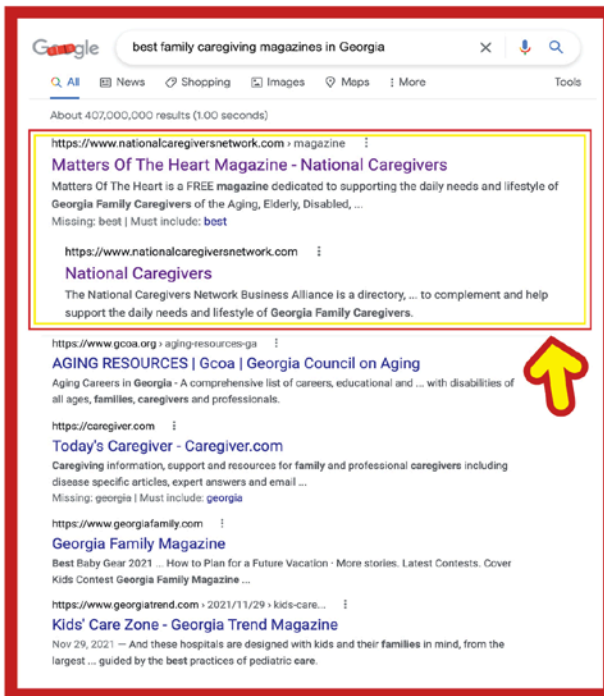
Tel. 478-401-4800 • Fax: 478-988-0753 • Web: www.nationalcaregiversnetwork.com

MATTERS OF THE HEART MAGAZINE

WE ARE #1

MATTERSOFTHEHEARTGA.COM

WHEN SEARCHING ON GOOGLE FOR THE BEST FAMILY CAREGIVING MAGAZINE IN GEORGIA!



Matters Of The Heart is a **FREE** magazine dedicated to supporting the daily needs and lifestyle of Georgia Family Caregivers of the Aging, Elderly, Disabled, Chronically Ill, Veteran, and End-of-Life Loved One. The magazine brings touching stories, helpful resources and information for caregivers and caregiving to help seniors/older adults and their families making informed decisions. We also advertise products and services to complement and help support the daily needs and lifestyle of Georgia Family Caregivers. **Matters Of The Heart** is a magazine that is published quarterly within the 13 counties that comprise Middle Georgia and its surrounding areas.

TO LEARN MORE ABOUT THE NATIONAL CAREGIVERS NETWORK, VISIT US ONLINE: WWW.NCNGEORGIA.COM



ADVERTISE WITH US TODAY: 478-401-4800

Provided By

National Caregivers Network, LLC
The Ultimate Resources For Family Caregivers