

# Biofeedback Matters®



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## Culturally Sensitive Health Care

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A few years ago when I first heard of the Association of



the Association of Black Psychologists and attended their annual conference in Los Angeles, CA I didn't quite understand why there needed to be a separate psychology group for black psychologists. Last year I did a presentation at the conference and assisted in another. This year I co-presented with two psychologists. After spending time, talking

with, and working with people who are part of the group I am starting to understand more. There are differences

in cultures and life experiences that can greatly affect how mental health services can best be provided to clients. This reminds me of a

conversation that I had with a Veterans Administration hospital psychologist. She was telling me about the challenges of working with veterans who had experienced military conflict and

had seen and done



things that the average civilian has not. The history of black people in the USA is different than the history of other

people. There are things that African Americans have dealt with and on some level continue to deal with that others may

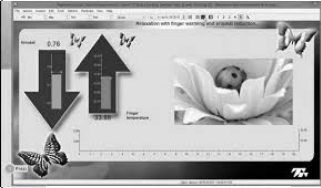
not. Sensitivity to this fact can be important in therapy. Another thing that can be very important in a client's self image is a better knowledge of the

history of their culture going further back than Martin Luther King Jr. and Harriett Tubman. This requires some study of African history. Gaining an understanding of where we came from, how our ancestors lived, and how they contributed to civilization, technology, medicine, religion, and psychology can help people understand themselves better which can help in the therapy process.

This was my second time working with Denise Hatter-Fisher, Ph.D of Otterbein College in Ohio at the ABPSi conference. I helped her last year by doing a live demonstration of HRV Biofeedback during her presentation. This year the name of the presentation was *Belief System Analysis (BSA)*



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## ? Care, The Health Care Debate

Obamacare, TrumpCare, Does anybody care? What will we end up with as a health care plan in the USA? As of today the answer is no more clear than it was on election day. John McCain past the deciding thumbs down, no vote last night on the latest of the repeal bills. Once



again it seems that the lawmakers will have to go back to the drawing board. I believe that most people agree that we all want access to healthcare that is sufficient to meet our needs at a price we can afford. It is not enough to just have a policy. It must be one that offers coverage for the care that we commonly need and the care that we could possibly need if we become very sick. To cover everyone in that way is expensive and someone has to pay the bill. A possibly longer term issue to resolve is taking measures to bring down the cost of care overall. If healthcare wasn't so expensive then insurance could be more affordable. Whether it is better to repeal and replace or to fix the law that is currently in place is obviously a complex question that is difficult to resolve. One of the most potentially effective ways to reduce the cost of healthcare would be to keep people well. Fewer sick people means fewer doctor and hospital visits and less cost to insurance companies. There are some conditions that medications are pre-

scribed for and the patient continues to take the drug indefinitely. Consider things like ADHD, Anxiety, Tension and Migraine Headaches, Hypertension, and Insomnia. Consider the financial cost to the insurance companies for many years of these medications. One patient may be on multiple medications at the same time. Multiply this by the number of patients and then add in the fact that the insurance companies are for-profit organizations and will make sure that they are charging enough to make a profit.

What if a patient was able to avoid acquiring the condition in the first place? A great deal of

money could be saved. What is after acquiring one of those conditions a patient was referred for non-drug therapies that have been shown to be effective prior to starting medication therapy? In many cases the cause of the symptom could be resolved and medication avoided altogether. In other cases medication use could be reduced or only temporary. This could also save a lot of health care dollars. Even surgery could be avoided in some cases of conditions like incontinence and back pain. With the Affordable Care Act there were some improvements in coverage for mental health which was a plus. A continuing problem has been sometimes lower than reasonable reimbursement for mental health services. I hope that there will be improvements in

coverage for mental health and related services including biofeedback. We have seen many instances in the news of violence that sometimes happens when people who need mental health services don't get them. Other problems including educational, social, family, and career problems can also result when people don't get the care they need. More serious and expensive medical problems can result if people don't get preventative care when they are not sick. Things like stress management, nutritional education and coaching, and exercise programs are among the types of services that should be a big part of the healthcare system and should be covered by a combination of insurance companies, gov-

ernment, business, and the



public in my opinion. The potential savings could bring the overall cost of healthcare down and make it more affordable for everyone. Another area that seems to finally be getting more attention is the drug addiction epidemic. The government seems to obviously be losing the "War on Drugs". It seems that a lot more people are in jail for using or selling drugs. This hasn't stopped people from selling or using drugs though. Now that more middle and upper class people are using and many dying from overdoses the need for new solutions is becoming more apparent. This also needs to be addressed in the new plan for healthcare. We should be making sure that our government representatives know what we are thinking about this topic.

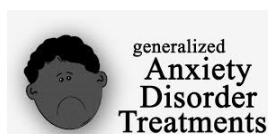


## Culturally Sensitive Health Care continued

*& Biofeedback:  
A Culturally Relevant Protocol  
For Blacks With GAD.*

During the presentation Dr. Hatter-Fisher defined GAD, General Anxiety Disorder and Belief System Analysis (BSA).

According to Leahy & Holland (2000) Blacks are at greater risk for GAD than the general population along with women

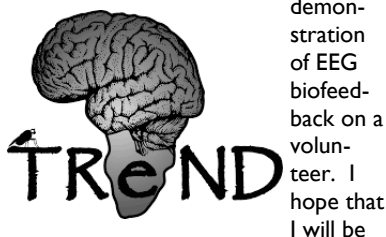


and young adults. Also, actual or perceived discriminatory acts or experiencing race based victimization can contribute to symptoms (Soto, Dawson-Andoh & BeLue, 2011; Graham, Calloway & Roemer, 2015). Higher levels of physical conditions like hypertension could be linked to higher levels of certain kinds of stress. (Markell et al. 2014).

Dr. Hatter-Fisher used a combination of a modified form of CBT (Cognitive Behavior Therapy) with an Afrocentric/optimal worldview. She also used thermal and HRV biofeedback with a case example which was part of the presentation. I also did a demonstration of Temperature and HRV Biofeedback and we had the participants do a temperature biofeedback exercise.

The other presentation was with Tony Jackson, Ph.D. We talked last year about doing a presentation at the conference this year. He put together an excellent presentation which I contributed to and did an EEG demonstration during the presentation at the conference. The name of this presentation was Neuroscience: African Science. Dr. Jackson began the presentation by talking about African origins of brain science

going back to Egypt. He talked about stress and the effects on the brain, the relationship of natural rhythms to brain science, and introduced the idea of neurofeedback training. Dr. Jackson talked about racism related stress which he referred to as Persistent Traumatic Stress Disorder. Some of the sources of stress included in the list included poverty related racism, socio-political oppression, economic oppression, and violent assault or murder related to racism. Some of the other things presented were the negative plasticity that can take place in the brain due to chronic stress as well as the chronic sympathetic activation that can happen due to stress. The attendees really seemed to enjoy the live

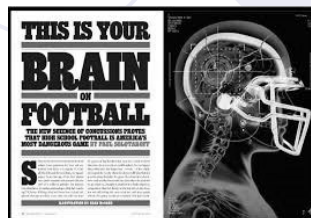


demonstration of EEG biofeedback on a volunteer. I hope that I will be able to work with these doctors again as well as others who expressed an interest in additional neurofeedback work that can be done in areas that they are working on. I'm already looking forward to next year.

This also reminds me of a conversation that I had with a Hispanic therapist this spring at the Southeast Psychological Association. He was telling me about some of the cultural issues that he and his colleagues deal with when working with Hispanic and other minority clients. Each cultural group can have differences that are important to consider during mental health or medical therapy. Consider differences in social interaction, history, diet, traditions, etc. All of these can be important to keep in mind.



## New CTE Study from Boston University on CTE (Chronic Traumatic Encephalopathy)



I'm a big sports fan and this is one of my most difficult times of the year, the period after the NBA basketball finals and the start of the NFL football season. I like baseball but not as much. I am a NY Football Giants fan and a Pittsburgh Steelers fan. Yes it is possible to be both! Call me, we can debate it if you like.

Some of the information in this recent study is showing that there can be a higher risk of brain damage for people who played football at any level not just college and professional. Even kids who played in high school and then stopped are at higher risk.

CTE can only be diagnosed after death so more research has to be done to see what can be detected in live athletes. EEG brain mapping and other brain imaging technologies will become part of the answer I am sure, even if it doesn't come from within the sports world. It may have to come from the medical field and from players themselves and family members demanding the information. Although I love watching football and I played in junior high school I am concerned about the brain health of the athletes. Some of the symptoms players often suffer from during their lives include impulse control problems, rage, mood disturbance, and thoughts of suicide according to Dr. Ann C. McKee, head author of the study. Neurofeedback may help improve some of these symptoms.



## Biofeedback/ Neurofeedback

### Seminar Schedule

BCIA Certification

### Biofeedback

**October 20-22, 2017**

Hawthorne, NY

**January 19-21, 2018**

Miami, FL

**Fees: \$1,195**

BCIA Certification

### Neurofeedback

**August 19-21, 2017**

**Dec 2-4, 2017**

Hawthorne, NY

January 23-25, 2018

**Fees: \$995**



Dr. Robert Reiner will be teaching a session on combining Virtual Reality with Biofeedback for Phobias and trauma on

**September 11. \$297**

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914-762-4646 to register





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## Hypertension Control

Over the past few years my blood pressure has become a concern. It is under control though it has crept up from the levels I had been used to many years ago. Both of my parents had issues with hypertension and I am an African American male so I am in the higher risk section of the population. I've been working with a medical doctor who practices both eastern and

western medicine who takes a lot of time discussing my health with me and takes into account lifestyle, exercise, stress, weight, blood work and more. I just finished doing about 30 sessions of temperature biofeedback on myself and have achieved about 96 degrees. Now I am doing a series of Heart Rate Variability sessions. After that I will do a series of Alpha training sessions. Besides biofeedback

here are a list of other recommendations. I'm currently reading this book too. I'll give a summary later.

### Reduce Blood Pressure Naturally



1. Drink Green Smoothies
2. Eat Ruby Grapefruit
3. Drink 2 litres of water per day
4. Exercise 1 hour each day
5. Eats lots of fruit and vegetables
6. Maintain a healthy weight
7. Manage stress
8. Increase potassium rich foods, such as bananas, tomatoes and zucchini
9. Replace iodise salt with Himalayan salt
10. Take up yoga & meditation

Harry L. Campbell



***"Summer afternoon, summer afternoon; to me those have always been the two most beautiful words in the English language."***  
— **Henry James**

