

Robeson County Schools NEWS AND BRIEFS

INDIAN EDUCATION PARENT COMMITTEE MEETS

Parents and representatives of the Title IV Part A Indian Education Committee met Monday, Oct. 22, at 7:30 p.m. in the board room at the Robeson County Board of Education. The committee reviewed by laws and federal rules and regulations governing Parent Advisory Committee (PAC) elections and received staff progress reports from Ms. Dorothy Blue, Coordinator of Educational Enrichment; Glenn Burnette,

Coordinator of Resource Center; and Anthony Locklear, Coordinator of Support Services. The committee established Nov. 12 as the date for a Title IV Public Hearing and as the next PAC meeting. Oct. 29 was set for the appointed ballot tabulation committee to count returned mailed ballots.

In addition, the PAC received a report from Mr. Donald Locklear, Director of Operations, on the FY85 needs assessment prioritization plans and proposed planned activities. Ms. Ruth Dial Woods, Asst. Supt., reported

on necessary budget revisions and plans for the Nov. 6-11 National Indian Education Association Convention (NIEA) to be held in Phoenix, Arizona. Members to attend the NIEA are Lockie Carter, Dick Tracy Hunt, Lynette Deese, Barbara Barnes and Vanessa Jones.

TITLE IV PROJECT STAFF ATTENDS CONFERENCE

The Title IV Part A Indian Education project staff recently attended the Regional Technical Assistance Conference (TAC) conducted by the Region I Technical Assis-

tance Center of Washington, DC.

The two-day workshop provided current and potential Title IV project personnel training in learning styles inventories, constructing test praction, techniques for Title IV counselors to assist students in coping with personal problems which affect academic performance, effective use of resource materials; Title IV Computer Assisted Instruction; Organization and implementing a peer tutoring program for Indian students, reinforcing science related skills through culture-based curriculum, and values identification process.

The two day workshop attended by Ms. Ruth Dial Woods, Asst. Supt.; Donald Locklear, Director of Operations; Dorothy L. Blue, Coordinator of Educational Enrichment; Anthony Locklear, Coordinator of Support Services; Glenn Burnette, Coordinator of Resource Center; Caffe Kremis and Verdice Locklear, Computer Systems Managers.

Continuing Education Credits from George Washington University were available to interested participants.

ATTENDS WORKSHOP ON TEST CONSTRUCTION
Supervisor of Social Stu-

dies Curriculum, Ms. Jackie Sherrod, of the Robeson County School System recently participated in the regional workshop entitled "Evaluating and Selecting Standardized Norm-Referenced Tests," conducted in Whispering Pines, NC.

The threefold objectives for the workshop provided guided training in developing and understanding the criteria for evaluating norm referenced tests, and developing skills in applying procedures for matching tests with curriculum content by subject and grade level. Hands on experiences in the evaluation and selection of tests was provided in smaller group sessions. The product of the smaller group involvement provided a set of review summaries and guides for tests that may be used by the Annual Testing commission as a recommendation to the Statewide Testing Program for future adoption.

Regional research consultants along with Dr. William J. Brown, Special Assistant for Research of the N.C. State Department of Public Instruction, conducted the Oct. 24-25 workshop which also offered certificate renewal credits for participants.

TO YOUR GOOD HEALTH

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Carolyn Emanuel, MPH
Executive Director

TREATMENT DROPOUTS

Diagnosing the hypertension is only half the battle. The other half is making sure you follow the doctor's advice, keep appointments, and take your medications.

Patient compliance is a major problem in controlling high blood pressure. A study by Dr. Joseph A. Wilber of Emory University Medical School indicates that close to 50 percent of patients with mild or moderate hypertension drop out of regular care. Doctors find they must telephone or send reminders to these patients to keep their appointments. This is important because untreated high blood pressure is as much a "silent killer" as cancer of the uterus. It is just as vital to continue to make followup appointments after a high blood pressure diagnosis as it is after an abnormal Pap smear.

Various studies have shown that the longer a patient has had hypertension, the less likely he is to remain on treatment. Several reasons have been found.

1. The patient is feeling well and he doesn't see the necessity for spending the time or the money for doctor bills and medication.
2. He has been told that his blood pressure is "controlled" and misunderstands this to mean "normal."
3. He lacks motivation to continue.
4. He lacks knowledge about the condition.
5. He doesn't like the side effects that may occur at various times with the drug treatment.
6. He is unable to follow complicated or even uncomplicated treatment schedules or he may have poor medicine taking habits. It has been suggested that a clock be drawn on the labels of the drug bottles and times at which the pills are to be taken be circled.

Dr. David Satcher, trying to determine the barriers to

hypertension control in the south-central Los Angeles area, discovered these false notions:

1. A feeling that hypertension means "a feeling or state of tenseness or nervousness." The association between stress and hypertension only serves to further this confusion. Many feel they only become hypertensive after getting excited. Many others feel that hypertension in children means "hyperactivity." In short, many people think of hypertension as a purely physiological state rather than as an illness with a physiological base.

2. A belief that hypertension is an acute problem and can be cured by diet and drugs. This accounts for many people stopping their medication as soon as they "feel better."

3. A belief that high blood pressure produces symptoms, such as severe headaches and dizziness. This means that there is no need to have the blood pressure checked as long as those symptoms are not present.

4. A belief that high blood pressure affects only aged people.

Dr. Norman M. Kaplan of Dallas, an authority on hypertension, believes that only one percent of treatment failures can be blamed on medication and procedures not working. In his view 99 percent of the time when treatment fails, the patient cannot or will not cooperate fully.

Dr. Charles L. Curry, chief of the cardiovascular division of Freedman's Hospital in Washington, DC, believes one way to keep patients in treatment is to make the complications of hypertension more vivid.

"A majority of patients who die from heart failure in our hospitals have high blood pressure," he says. "Eighty percent of our patients with strokes have hypertension. A third of people with heart attacks have it and another

third are borderline."

Dr. Curry finds that messages that tend to slightly alarm the patient while enlightening him are inclined to be the most helpful in preventing drop outs. Many patients don't realize the significances of possible complications, he warns. They don't understand that a stroke means they could be paralyzed and that a heart attack means they could die.

Dr. Curry puts some of the blame on doctors themselves. On the whole, he says, doctors tend to react to elevated blood pressure in one of three ways. One group will tell the patient, "Your pressure is slightly up. You should relax and have it rechecked." The trouble is, the patient never gets it rechecked. Another group of physicians will say to the patient, "Your pressure is up. You need medication right away." They could be wrong, Dr. Curry says, because the elevation may be an isolated event. The third type of doctor says nothing because he does not think anything needs to be done about mild elevations.

In Dr. Curry's belief, the patient who shows an elevated pressure should be encouraged to come back for repeated measurements and the course of treatment taken from there.

Dr. Curry himself never paid much attention to hypertension until he joined the staff at Freedman's Hospital. He first learned that his predecessor, a well-known cardiologist, suffered from severe hypertension, yet frequently forgot to take his medication. One day he died of complications of the disease.

Then he learned more people were dying from the complications of hypertension than from many of the other diseases he had spent most of his life studying. In Washington's inner city, where Freedman's Hospital screens about 5,000 people a year in community programs, the rate of hypertension was almost three out of every ten people. Among young men, age 18 to 30, the rate was 12 out of every 100. Among Black patients, hypertension is the leading cause of death.

Players of the Week

Players of the week for the Hoke County game were Bradie Locklear and Ritchie McCrimmon. Both are linemen and have had to play both offense and defense all year.

Locklear, a 6'3" 220 lb. senior tackle, has averaged five individual tackles and two assists per game and is the most improved lineman. He has been co-captain for the last five games.

Locklear also throws the shot put in track. His goals are to attend Elon College and major in business administration.

McCrimmon, a 6'1" 225 lb. junior tackle, has averaged five individual and three assisted tackles per game and has recovered two fumbles.

He also throws the shot put in track and is a member of the wrestling team. He plans to major in business education in college.



Some say holding your breath when a mosquito lands on you traps the insect there until you exhale again.

"The country of every man is that one where he lives best."
Aristophanes

COACH'S CORNER

PARADOX OR THE PARADOXICAL IN SPORTS

A phenomenon or a leveling off in performance is the bane of all athletes and coaches. It is usually due to the underdog picking up his performance. The champ on top is performing at his high level but the underdog realizes his level of performance level is just too low to overcome the individual or team that is winning and by superhuman effort out performs the favored team or individual. What happened? Everybody wants to know. The simple explanation is. When you're "King of the mountain" there is no place to go but down. The human phenomenon of regression takes place. Our muscles

atrophy, our minds "block out," our concentration goes, we over press and try too hard. We underpress and lose. So to keep the perspective we win some and lose some. We can't win them all as the Yankees found out. Nebraska lost to Syracuse, the Cubs to San Diego, etc.

What brought this wrie up on was the fact that our Lady Braves won the volleyball league championship and lost in the tournament. They are real champs and we all respect them more as a result of their set-back.

Ken Johnson

A Social Note

A SOCIAL NOTE
H. Kelly Deese of Agusta, Ga. recently visited with his parents, Mr. and Mrs. Elbert Deese of Route 3, Rowland.

Dr. David Satcher, trying to determine the barriers to

Southern Interiors

says:

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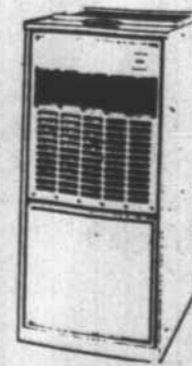
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