



City of Ypsilanti

# Senior Center News

Ypsilanti Senior/Community Center (734) 483-5014

August 2014

## Regular Daily Schedule

### Monday

9:30 Exercise w/Mark  
10:30 Line Dancing  
11:45 Lunch  
12:30 Euchre

### Tuesday

10:30 Art/Craft  
11:45 Lunch  
12:30 Knitting and Crocheting Group  
12:30 Water Color

### Wednesday

9:00 Exercise w/ Mark  
10:30 Writers Group  
10:45 Gentle Fitness  
11:45 Lunch  
12:30 Bingo  
12:30 Art

### Thursday

10:00 Drama  
11:45 Lunch  
1:00 – 2:30 Yoga

### Friday

9:30 Exercise w/Mark  
10:45 Gentle Fitness  
10am -2pm Massage  
(By appointment)  
1:00 - 2:30 Yoga

### Saturday

10:00-noon – Quilting



## Corn Roast Dinner August 2, 4:30-6:30

Join us for our annual Corn Roast Dinner on Saturday August 2, 2014! This fundraiser helps to support the Ypsilanti Senior/Community Center. Tickets cost \$8 per person, and tickets for children under the age of 10 are \$4.

### Volunteers Needed

The Senior Center needs volunteers for the following upcoming events:

**Corn Roast Dinner** - August 2, 2014. Help is needed with setting up, cooking, serving, and cleaning up.

**Heritage Festival** - August 15, 16, 17, 2014. Help is needed with setting up, taking down, and selling raffle tickets for our Quilt Raffle.

If you are available to volunteer for either of these events, please stop by the center to sign up.

The center will be closed on Tuesday August 5 due to the elections.

Labor Day is early this year. We will be closed on September 1 to celebrate the holiday.

## August Art Programs Tuesdays, 10:30 – 11:30 am

**Art for the Ages** - These classes are for all ages and family friendly. There is no cost but donations for supplies are always welcome. There will be a sign up sheet at the center so we can plan for supplies. To sign up either stop by or call 483-5014

On August 12 join us for felting! Learn a wet felting technique to make beads, balls, or logs from fleece that came from sheared sheep. We will use fleece, soap, and water. We may get wet, so please dress appropriately.

On August 26 let's start beading! Make a bracelet using the beads you made in the felting workshop, or use the many beads that are on supply at the center. We will learn about stringing beads and adding simple closures.

Join us on Tuesday mornings to work on warping the looms. There are two looms that we would like to warp over the summer to prepare for fall weaving.

## Tuesdays, 12:30 – 2:00 pm

Tuesday afternoons the knitting/crochet group will take a little summer break. It will return late August.

**July Art Programs**  
**Wednesday, 10:30 – 11:30 a.m.**

Writers Group Wednesdays 10:30-11:30 a.m.

**Wednesday, 12:30 a.m. – 2:00 p.m.**

**Art for Everyone**

This month the Wednesday Art Group will be making altered books. An altered book is a form of mixed media artwork that changes a book from its original form into a different form, altering its appearance and/or meaning.

**Out to Eat Bunch**  
**Friday, August 22, 2014**  
**11:30 a.m.**



The group is going to The Bomber on Friday, August 22 at 11:30 am. It is located at 306 E Michigan Ave, Ypsilanti, MI 48198. Sign up at the center and as always arrange your own transportation.

**Meet the Interns!**

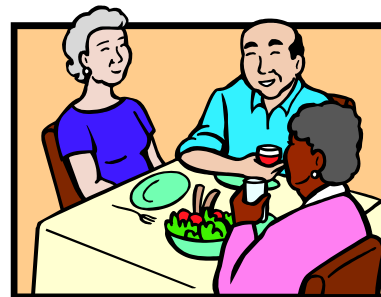
My name is Gina Mann, and I am a student at Eastern Michigan University. I am currently working on a Bachelor's degree in Speech-Language Pathology with a minor in Gerontology. I will then move onto working towards a Master's degree in Speech-Language Pathology. In the future I would like to work with older adults, and I am very pleased to have the opportunity to meet and get to know everyone here at the Senior Center.

**Velvet Weatherspoon**

Hello, my name is Velvet Weatherspoon and I am interning here at the Ypsilanti Senior Community Center for the summer. I recently graduated from WCC with my degree in Human Services. I have been working in the senior community for over 12 years, it is a true passion of mine. I am thankful for the opportunity to work with everyone here at the Ypsilanti Senior Community Center and I look forward to continuing to volunteer here. I am also available on Wednesday's to help anyone with computer and cell phone questions.

**Heritage Festival**  
**August 15-17, 2014**

Stop by and visit the Center's booth at the Heritage Festival! The Senior Center will sell raffle tickets to win a beautiful quilt made by the quilting group. Tickets are available for purchase for \$2 each, or \$5 for three tickets. If you are unable to attend the Heritage Festival and would still like to purchase a ticket, please stop by the Senior Center in advance. Tickets are also available for purchase at the Corn Roast Dinner. The winning ticket will be drawn at 5:00pm on August 17, 2014.



**Pot Luck Tuesday, August 19, 2014 at 11:45 a.m.**

**Mental Health Systems Survey Talk**

Join us for a great meal and good conversation! The Senior Center will provide chicken salad sandwiches. Ice cream will be provided by Meridian Visiting Physicians. Sign up to bring a side dish or contribute to the main course. After our meal, Todd K. Favorite, Ph.D., the Director of the University of Michigan Psychological Clinic, will talk about creative longevity and positive aging.

This talk will focus on the impact of psychological stressors as we adjust to changes in a life after years of dedication to careers and families. The following key topics will be discussed: the value of close relationships, taking control and living with intentionality, engagement in community and networking, and discovering meaning and purpose in each stage of life.



### From the Director

There will be many fun-filled events in August. Be sure to join us at the corn roast on Aug 2. This is always an exciting community event. There will be great corn and hot dogs and conversations.

Mark your calendars for the Heritage Festival on August 15, 16 and 17. We will have a booth where we will sell raffle tickets for the quilts that were made by our Saturday quilters. We can use volunteers to sell the tickets at the festival. The quilts will be on display in our booth.

### Exercise Classes

Exercise all summer long! Thanks to a grant the center received from the Ann Arbor Area Community Foundation, the exercise classes sponsored by WCC Emeritus will continue this summer.

The Gentle Fitness class is sponsored by the YMCA and will also continue during the summer on Wednesday and Friday as usual.

***Monica Prince***

### August and September Birthdays



//////Linda Taylor,//////	August 1
Carolyn Marshall	August 5
Lillian Lawrence	August 10
Kathleen Lawrence	August 19
Lorenzo Brown	August 20
Barbra Patterson	August 21
Willie Coats	August 22
Norma P. McCuiston	August 29
Kathy Thomas	August 31
Cora Hubbard	Sept 4
Edna Massey	Sept 10
Jane Munro	Sept 12
Alna Delores Washington	Sept 13
Sandra Glencer, LaRita Freeman	Sept 16

City of Ypsilanti  
Senior/Community  
Center  
in Recreation Park

Phone: 483-5014  
Fax: 480-0380

[seniorcenter@umich.edu](mailto:seniorcenter@umich.edu)

web : [ypsiseniorcenter.org](http://ypsiseniorcenter.org)

*Home of the  
Ypsilanti Senior Center  
Our Mission:*

*To provide opportunity  
for positive, safe,  
structured recreational,  
educational and  
networking activities  
targeted towards  
Seniors and the  
community that  
supports them.*

### MEET THE STAFF:

**Monica Prince – Senior Center Director**  
**Nancy Tomczak – Assistant**  
**Deborah Finley – Senior Aide**

### SENIOR CENTER HOURS

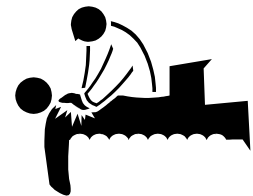
Monday, Wednesday, Friday 9:00 am – 2:00 pm  
Tuesday, Thursday 10:00 am – 2:00 pm  
Saturday (quilting) 10:00 am – 12:00 noon



**Nutritious, delicious** served weekdays at noon.  
**Suggested cost share for seniors age 60 and up: \$3.00**  
**Call to reserve lunch at least one day in advance.**



The foot nurse will be at the center on **Thursday, August 7, 2014 from 10-2**. Please call Robbi Duda (734) 741-8586 to make an appointment.



Sissel Bridges offers Norwegian massages at very reasonable prices every Friday at the center from 9:00 – 2:00 pm. Call to make an appointment.

## DSM-5 Self-Rated Level 1 Cross-Cutting Symptom Measure—Adult

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Sex:  Male  Female Date: \_\_\_\_\_

If this questionnaire is completed by an informant, what is your relationship with the individual? \_\_\_\_\_  
 In a typical week, approximately how much time do you spend with the individual? \_\_\_\_\_ hours/week

**Instructions:** The questions below ask about things that might have bothered you. For each question, circle the number that best describes how much (or how often) you have been bothered by each problem during the **past TWO (2) WEEKS**.

	During the past <b>TWO (2) WEEKS</b> , how much (or how often) have you been bothered by the following problems?	None Not at all	Slight Rare, less than a day or two	Mild Several days	Moderate More than half the days	Severe Nearly every day	Highest Domain Score (clinician)
I.	1. Little interest or pleasure in doing things?	0	1	2	3	4	
	2. Feeling down, depressed, or hopeless?	0	1	2	3	4	
II.	3. Feeling more irritated, grouchy, or angry than usual?	0	1	2	3	4	
III.	4. Sleeping less than usual, but still have a lot of energy?	0	1	2	3	4	
	5. Starting lots more projects than usual or doing more risky things than usual?	0	1	2	3	4	
IV.	6. Feeling nervous, anxious, frightened, worried, or on edge?	0	1	2	3	4	
	7. Feeling panic or being frightened?	0	1	2	3	4	
	8. Avoiding situations that make you anxious?	0	1	2	3	4	
V.	9. Unexplained aches and pains (e.g., head, back, joints, abdomen, legs)?	0	1	2	3	4	
	10. Feeling that your illnesses are not being taken seriously enough?	0	1	2	3	4	
VI.	11. Thoughts of actually hurting yourself?	0	1	2	3	4	
VII.	12. Hearing things other people couldn't hear, such as voices even when no one was around?	0	1	2	3	4	
	13. Feeling that someone could hear your thoughts, or that you could hear what another person was thinking?	0	1	2	3	4	
VIII.	14. Problems with sleep that affected your sleep quality over all?	0	1	2	3	4	
IX.	15. Problems with memory (e.g., learning new information) or with location (e.g., finding your way home)?	0	1	2	3	4	
X.	16. Unpleasant thoughts, urges, or images that repeatedly enter your mind?	0	1	2	3	4	
	17. Feeling driven to perform certain behaviors or mental acts over and over again?	0	1	2	3	4	
XI.	18. Feeling detached or distant from yourself, your body, your physical surroundings, or your memories?	0	1	2	3	4	
XII.	19. Not knowing who you really are or what you want out of life?	0	1	2	3	4	
	20. Not feeling close to other people or enjoying your relationships with them?	0	1	2	3	4	
XIII.	21. Drinking at least 4 drinks of any kind of alcohol in a single day?	0	1	2	3	4	
	22. Smoking any cigarettes, a cigar, or pipe, or using snuff or chewing tobacco?	0	1	2	3	4	
	23. Using any of the following medicines ON YOUR OWN, that is, without a doctor's prescription, in greater amounts or longer than prescribed [e.g., painkillers (like Vicodin), stimulants (like Ritalin or Adderall), sedatives or tranquilizers (like sleeping pills or Valium), or drugs like marijuana, cocaine or crack, club drugs (like ecstasy), hallucinogens (like LSD), heroin, inhalants or solvents (like glue), or methamphetamine (like speed)]?	0	1	2	3	4	

## WHODAS 2.0

### World Health Organization Disability Assessment Schedule 2.0

36-item version, self-administered

Patient Name: \_\_\_\_\_ Age: \_\_\_\_\_ Sex:  Male  Female Date: \_\_\_\_\_

This questionnaire asks about difficulties due to health/mental health conditions. Health conditions include **diseases or illnesses, other health problems that may be short or long lasting, injuries, mental or emotional problems, and problems with alcohol or drugs**. Think back over the **past 30 days** and answer these questions thinking about how much difficulty you had doing the following activities. For each question, please circle only **one** response.

Numeric scores assigned to each of the Items:							<i>Clinician Use Only</i>								
							1	2	3	4	5	Raw Item Score	Raw Domain Score	Average Domain Score	
In the last 30 days, how much difficulty did you have in:															
<b>Understanding and communicating</b>															
D1.1	<u>Concentrating on doing something for ten minutes?</u>						None	Mild	Moderate	Severe	Extreme or cannot do		30	5	
D1.2	<u>Remembering to do important things?</u>						None	Mild	Moderate	Severe	Extreme or cannot do				
D1.3	<u>Analyzing and finding solutions to problems in day-to-day life?</u>						None	Mild	Moderate	Severe	Extreme or cannot do				
D1.4	<u>Learning a new task, for example, learning how to get to a new place?</u>						None	Mild	Moderate	Severe	Extreme or cannot do				
D1.5	<u>Generally understanding what people say?</u>						None	Mild	Moderate	Severe	Extreme or cannot do				
D1.6	<u>Starting and maintaining a conversation?</u>						None	Mild	Moderate	Severe	Extreme or cannot do				
<b>Getting around</b>															
D2.1	<u>Standing for long periods, such as 30 minutes?</u>						None	Mild	Moderate	Severe	Extreme or cannot do		25	5	
D2.2	<u>Standing up from sitting down?</u>						None	Mild	Moderate	Severe	Extreme or cannot do				
D2.3	<u>Moving around inside your home?</u>						None	Mild	Moderate	Severe	Extreme or cannot do				
D2.4	<u>Getting out of your home?</u>						None	Mild	Moderate	Severe	Extreme or cannot do				
D2.5	<u>Walking a long distance, such as a kilometer (or equivalent)?</u>						None	Mild	Moderate	Severe	Extreme or cannot do				
<b>Self-care</b>															
D3.1	<u>Washing your whole body?</u>						None	Mild	Moderate	Severe	Extreme or cannot do		20	5	
D3.2	<u>Getting dressed?</u>						None	Mild	Moderate	Severe	Extreme or cannot do				
D3.3	<u>Eating?</u>						None	Mild	Moderate	Severe	Extreme or cannot do				
D3.4	<u>Staying by yourself for a few days?</u>						None	Mild	Moderate	Severe	Extreme or cannot do				
<b>Getting along with people</b>															
D4.1	<u>Dealing with people you do not know?</u>						None	Mild	Moderate	Severe	Extreme or cannot do		25	5	
D4.2	<u>Maintaining a friendship?</u>						None	Mild	Moderate	Severe	Extreme or cannot do				
D4.3	<u>Getting along with people who are close to you?</u>						None	Mild	Moderate	Severe	Extreme or cannot do				
D4.4	<u>Making new friends?</u>						None	Mild	Moderate	Severe	Extreme or cannot do				
D4.5	<u>Sexual activities?</u>						None	Mild	Moderate	Severe	Extreme or cannot do				

Numeric scores assigned to each of the items:							Clinician Use Only							
							1	2	3	4	5	Raw Item Score	Raw Domain Score	Average Domain Score
In the <u>last 30 days</u> , how much difficulty did you have in:														
<b>Life activities—Household</b>														
D5.1	Taking care of your <u>household responsibilities</u> ?						None	Mild	Moderate	Severe	Extreme or cannot do		20	5
D5.2	Doing most important household tasks <u>well</u> ?						None	Mild	Moderate	Severe	Extreme or cannot do			
D5.3	Getting all of the household work <u>done</u> that you needed to do?						None	Mild	Moderate	Severe	Extreme or cannot do			
D5.4	Getting your household work done as <u>quickly</u> as needed?						None	Mild	Moderate	Severe	Extreme or cannot do			
<b>Life activities—School/Work</b>														
If you work (paid, non-paid, self-employed) or go to school, complete questions D5.5–D5.8, below. Otherwise, skip to D6.1.														
Because of your health condition, in the past <u>30 days</u> , how much <u>difficulty</u> did you have in:														
D5.5	Your day-to-day <u>work/school</u> ?						None	Mild	Moderate	Severe	Extreme or cannot do		20	5
D5.6	Doing your most important work/school tasks <u>well</u> ?						None	Mild	Moderate	Severe	Extreme or cannot do			
D5.7	Getting all of the work <u>done</u> that you need to do?						None	Mild	Moderate	Severe	Extreme or cannot do			
D5.8	Getting your work done as <u>quickly</u> as needed?						None	Mild	Moderate	Severe	Extreme or cannot do			
<b>Participation in society</b>														
In the <u>past 30 days</u> :														
D6.1	How much of a problem did you have in <u>joining in community activities</u> (for example, festivities, religious, or other activities) in the same way as anyone else can?						None	Mild	Moderate	Severe	Extreme or cannot do		40	5
D6.2	How much of a problem did you have because of <u>barriers or hindrances</u> around you?						None	Mild	Moderate	Severe	Extreme or cannot do			
D6.3	How much of a problem did you have <u>living with dignity</u> because of the attitudes and actions of others?						None	Mild	Moderate	Severe	Extreme or cannot do			
D6.4	How much <u>time</u> did you spend on your health condition or its consequences?						None	Some	Moderate	A Lot	Extreme or cannot do			
D6.5	How much have you been <u>emotionally affected</u> by your health condition?						None	Mild	Moderate	Severe	Extreme or cannot do			
D6.6	How much has your health been a <u>drain on the financial resources</u> of you or your family?						None	Mild	Moderate	Severe	Extreme or cannot do			
D6.7	How much of a problem did your <u>family</u> have because of your health problems?						None	Mild	Moderate	Severe	Extreme or cannot do			
D6.8	How much of a problem did you have in doing things <u>by yourself</u> for <u>relaxation or pleasure</u> ?						None	Mild	Moderate	Severe	Extreme or cannot do			
General Disability Score (Total):											180	5		

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