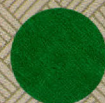


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WIC NEWS

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Special Supplemental Nutrition Program for Women, Infants and Children

FEB 10 1997

November 1996
Volume 5, Number 9

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Breastfeeding Peer Counselors



*Mom-to-mom advice
and encouragement*

THE SEVEN HABITS OF HIGHLY EFFECTIVE PEOPLE

Covey Leadership Center ©

Article 9 in a series

Habit 5: Seek first to understand, then to be understood

By Judith Cayton Devin
Training Specialist

Seeking to understand others before seeking to be understood is the fifth habit in Stephen Covey's *Seven Habits of Highly Effective People*.

In the *Seven Habits* training that we conduct across the state, participants focus on understanding as being one of the most useful and important principles in relating to people.

Listening is the key to understanding. Listening is not the same thing as hearing. Hearing is when sound waves hit the ear drum. Listening adds the dimension of understanding. There are different levels of listening and accompanying levels of understanding, each appropriate at certain times.

Ways of listening

Besides ignoring or non-listening, the most superficial level of listening is "pretend listening." We may nod our heads while another person is speaking, but we continue to go on about our business, thinking our own thoughts.

Sometimes we listen selectively, perking up only when we hear a key word or a subject that interests us.

Sometimes we listen attentively and get the facts. The deepest level of listening and understanding comes from empathetic listening, which is trying to understand the speaker's thoughts, feelings, and point of view.

Empathetic listening is not necessary in every conversation. It is useful when we are not sure we understand, when we are not sure the other person feels understood, and anytime there are strong emotions involved. When an upset or distressed participant is confronting you, try empathetic listening.

Barriers to understanding

The key is to listen sincerely for understanding. Most of us listen with the intent to answer, not to really understand. That is a barrier to truly understanding the other person's point of view.

We're usually too busy giving advice, interrupting, asking questions, figuring out why the other person is saying what they're saying, deciding if we agree or disagree with their points, or formulating our own answer to really listen to understand. The problem is that we can't give good advice or create a good answer to a problem until we understand it fully.

After you and the speaker are sure that you understand the speaker's point of view, you can state your own viewpoint. Chances then are more likely that you'll be listened to.

—
"Take a tip from nature —
your ears aren't made to shut,
but your mouth is."

"We learn nothing
by speaking."



Anonymous

Texas WIC News

Published monthly by the



Texas Department of Health
Bureau of Nutrition Services
1100 West 49th Street
Austin, Texas 78756
(512) 458-7444

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Texas

WIC NEWS

Special Supplemental Nutrition Program for Women, Infants & Children

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Cover: *Breastfeeding peer counselors provide mom-to-mom assistance to WIC participants across the state. Cover design by Christine Grether.*



Project 7

Electronic bus ads target 'captive audience'

Try to summarize the WIC program in 20 words or less. That's exactly what staffers at Project 7 in Dallas did, and they put their ideas on scrolling electronic message boards in 643 public buses in the metropolitan area.

The message display board is located directly behind and slightly above the bus driver. "Bus passengers can't help but look at it," says Marie Zaczkowski, M.S., R.D., Project 7's program manager. "It's right in

WIC: Working for people.

their line of vision. Plus, there's not much to do when you're riding a bus, so we have a captive audience."

The Transit Network, a company licensed to advertise inside the city buses, estimates that the Spanish and English WIC messages reach about 155,925 bus riders daily. The WIC messages are displayed 60 times a day every day of the week. "We get an astonishing amount of coverage," says Zaczkowski.

She says The Transit Network designed a WIC food logo to run with the messages, which are changed periodically. Current messages tie in with other WIC marketing slogans, such as "WIC: Working for people." The ads include the phone number for the main WIC office in Dallas.

The messages ran from April through September at a cost to Project 7 of \$33,024. Zaczkowski and her staff are evaluating the response to determine if they

Project 12



WIC mom Alejandra Fernandez of Pharr proudly tends to her five healthy babies: April, Poala, Cesar, Jose, and Brenda. The quintz, born in January, are all still being breastfed by Fernandez.

want to continue the program. "I would like to continue," she says. "Maybe next time we will pair the electronic messages with a display ad inside the bus. We may even do something where people can tear off more information, such as the phone number."

She says the bus message boards are an effective way to reach a new population. "The response is worth the cost of advertising," she says. "We hope to get the message out to a new group."

Project 48

Promotion takes to the airwaves

Project 48 breastfeeding peer counselor Maria Rodriguez and WIC field supervisor Dolores Shahroodi appeared on the Pasadena morning radio talk show "Woman to Woman" on station KXYZ to promote breastfeeding and WIC services in August.

"The talk-show format provided a wonderful opportunity to promote WIC and breastfeeding," Shahroodi says. "Listeners were able to call in and get their questions answered during a live broadcast. Response from the audience was great, with most of the questions asked pertaining to breastfeeding."

Rodriguez graduated from Project 48's peer-counselor training program in July.



New South Houston clinic opened

In August, Project 48 opened the Harris County WIC Center at South Houston. "Extensive outreach in the area and lots of elbow grease by the WIC staff have contributed to getting the new site off to a great start," says Vickie Bowie, Project 48 director.

Helping to set up a new clinic, from left, are south-side WIC field supervisor Dolores Shahroodi, staff members Maria Martinez, Sandra Giraldo (on top of the ladder), Carolyn Perez, and Sharon Ramirez. Site supervisor Carol Harris is beneath the ladder.

Employees of Quarter

Two Project 48 were honored this spring when they were named Employees of the Quarter for the first quarter of this year.

Staff member Sharon Ramirez from the Baytown clinic was nominated by her co-workers for her "exceptional employee behavior." Ramirez was recognized for going beyond her duties to be helpful to participants.

Nutritionist Nelida Williams from the Southeast clinic was the second employee named for the award. She was nominated by staff members for her professionalism, dependability, knowledge of WIC subjects, and team spirit.

Ramirez and Williams received their awards at the June quarterly meeting for Nutrition Services.



Employee of the Quarter Sharon Ramirez received flowers along with her award.



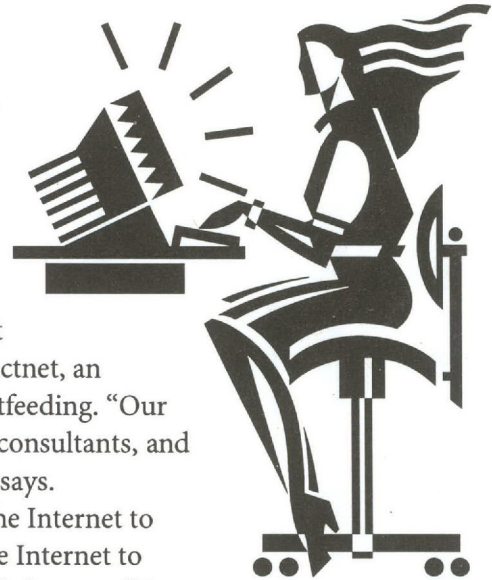
Project 74 Brownwood WIC goes on-line

Staff members at Project 74 in Brownwood have a lot more information at their fingertips now that they have access to the Internet and the World Wide Web at their clinic.

WIC director Georgia Harris says staff members use the Internet to post and receive messages on Lactnet, an interactive newsgroup about breastfeeding. "Our breastfeeding educators, lactation consultants, and peer counselors love Lactnet," she says.

Harris says staff members use the Internet to directly benefit clients. "We use the Internet to research and look up information," she says. "For example, one of our mothers had a question about postpartum depression. We did a search for the mom and found what resources were available to her."

"Access to the Internet and the World Wide Web empowers us to provide



answers we would not be able to get if we did not have this resource," says Harris. She gives the example of the USDA World Wide Web site, which lists more than 5,000 foods and each of their components, such as calories, vitamins, and minerals. She says she looked up broccoli and printed out a list of more than 25 components.

Harris urges other Texas WIC clinics to get on the Internet. "Budget it as part of your communications costs. It's the way to do business in the '90s. It's a great resource to have," she says.

Harris plans to establish a World Wide Web page for her local clinic and to link it to similar sites on the Internet.

Georgia@web-access.net is Harris' e-mail address.

There is no higher religion
than human service.
To work for the
common good
is the greatest creed.



Woodrow Wilson
28th president of the United States
1856-1924

Project 59



Belinda Sonora, at left, holds onto her son Francisco after he receives his immunizations at Project 59 in San Antonio. Francisco was one of the first WIC patients to receive a coupon for a free ice-cream cone from immunizations nurse Mary Benavidez. Immunizations clerk Rosemary Carrisal looks on.

Project 81

Rockdale clinic welcomes new one-stop neighbors

To welcome its new neighbors into the One-Stop Center in Rockdale, Project 81 staffers recently hosted an open house. WIC has had a clinic at the One-Stop Center since January 1995.

With additional services now at the center, Milam County residents can receive other health-care services besides WIC. They can also renew their driver's licenses and conduct business with a justice of the peace.

Other state agencies included in the One-Stop Center include the Texas Department of Human Services, the Texas Workforce Commission, and the Texas Department of Public Safety Driver's License Bureau.

Other services include the Milam County Health Department, the veterans' service office, the Hill Country Community Action Association's Family Planning office, and the justice of the peace for precincts 3 and 4.

WIC L.V.N. Stephenie Nelson, immunizations community-service aide Dalia Garza, and community-service aide Raye Obermiller serve clients two days a week at the One-Stop Center site.

Jubilee Days

Garza, Nelson, and Obermiller also set up an information table for the Rockdale Jubilee Days in June. All three staff members visited with people who stopped by to ask about the three magnetic boards full of information about WIC, breastfeeding, and immunizations.

At the event, Garza, Nelson, and Obermiller also handed out stickers and coloring sheets for Project 81's coloring contest.

In July 1993, Susan Wallace, center, is joined by newly trained peer counselors in celebrating their graduation.



Project 87

Breastfeeding leader remembered

Susan Wallace, who was instrumental in starting Project 87's peer-counselor program three years ago, died July 10. She is survived by her husband, David, and three children.

Wallace, a lactation consultant, had been the local La Leche League leader and had volunteered at the WIC clinic in Nacogdoches for several years before the peer-counselor program began in Project 87. In 1993, after completing the Peer Counselor Trainer Workshop, Wallace immediately trained 10 WIC mothers to become the region's first set of breastfeeding peer counselors.

"Susan was a warm and compassionate breastfeeding advocate and helped many women in the community in nursing their babies. She promoted breastfeeding since the birth of her first child," says Shannon O'Quin, Project 87's breastfeeding coordinator. "If it were not for Susan, we may never have gotten the breastfeeding peer-counselor program implemented."

Project 13

Laredo's Cedar clinic wins August poster contest

To celebrate Breastfeeding Awareness Month in Laredo, Project 13 clinics competed in a bulletin-board contest. Each clinic designed a poster with a message to promote breastfeeding.

The Cedar clinic's three-dimensional design won "because the judges said it was a simple and direct message about breastfeeding," says Beatrice Duarte, R.D., Project 13 director. The design incorporated an actual hat, shirt, baby bottle, baby blanket, and doll to encourage mothers to breastfeed.

The Ladrillera clinic's design promoted breastfeeding as "the gift we all share." Paper cutouts showed a nursing mother in a rocking chair under a tree with two older children playing beside her.

The Farias clinic developed a "WIC Hall of Fame for Breastfeeding Babies." Baby photos were displayed with lace frames, cotton clouds and shooting foil stars.

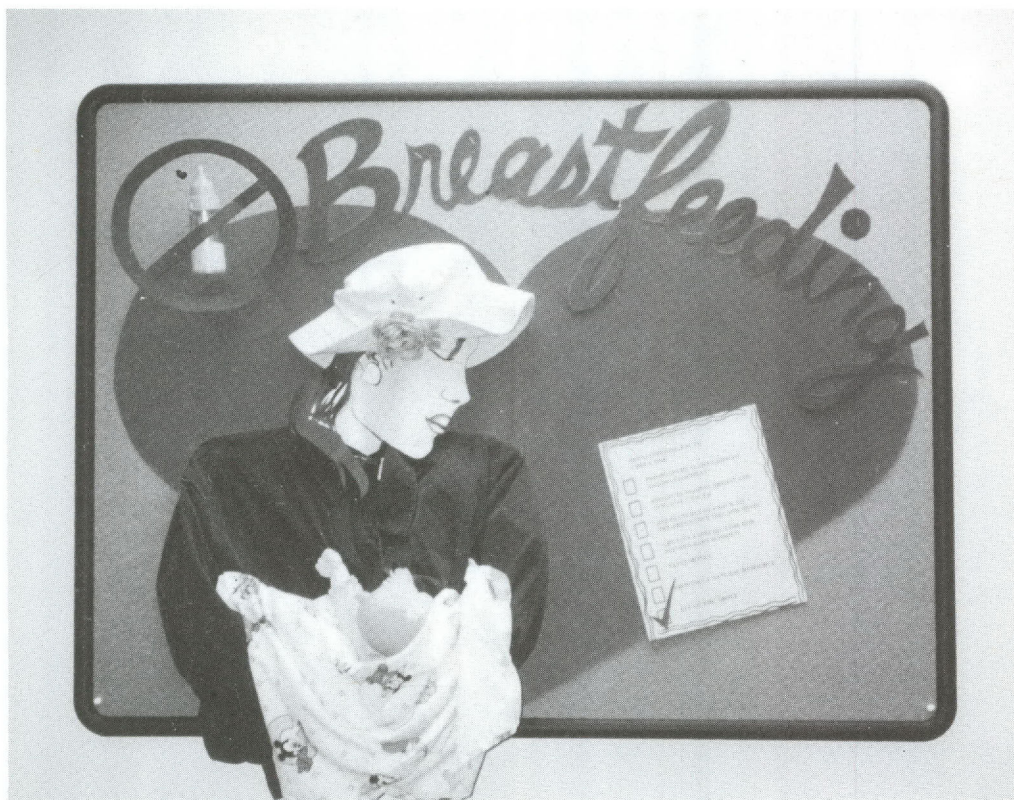
The Santo Nino Neighborhood clinic featured an Olympic theme in its "Winning Results of Breastfeeding" bulletin board.

Serving as judges for the bulletin-board contest were La Leche League representatives Melissa Cigarroa and Sandra Taylor, as well as El Cenizo/Rio Bravo Community Center coordinator "Toro" Martinez.

*To be a hero or a heroine,
one must give an order
to oneself.*



*Simone Weil
French philosopher
1909-1943*



The Cedar clinic's three-dimensional design won Project 13's bulletin-board contest.



From left, third-place winner Mireya Staples, second-place winner Leticia Pena, and first-place winner Valita Edwards show delight with their cash prizes.

Project 39

Tyler staffers win cash in referral contest

As part of the state-sponsored Precious Jewels Challenge to increase client participation in Texas WIC, Project 39 director Cassie Boucher organized a two-month referral contest among employees.



She designed referral cards for employees to hand out to potential eligibles wherever they could be found in May and June: in grocery stores,

neighborhoods, laundromats, restaurants, churches, etc.

At the Tyler and Jacksonville clinics, staff members used “jewels” to decorate drop-off boxes for clients to return the referral cards.

Community-service aide Valita Edwards won the grand prize of \$100 after referring 111 new clients to Project 39.

Community-service aide Leticia Pena referred 77 new clients. She won second place and \$40. Immunizations community-service aide Mireya Staples referred 63 new clients. She won third place and \$10.

“The awards ceremony was really exciting for the staffers,” says Boucher. “We’re all proud of the hard work done by the winners and all other staff members who participated.”

Project 12

Hospital recognizes Weslaco peer counselor

Knapp Medical Center in Weslaco recently awarded Project 12’s breastfeeding peer counselor Juanita Gomez a certificate of appreciation for her 118.5 hours of volunteer service.

Gomez works through the volunteer program at the hospital to teach mothers how to breastfeed their babies. She discusses feeding options with new mothers; and for those who choose to breastfeed, she shares information on how to breastfeed, offers hints, explains the advantages of breastfeeding, and clarifies the myths about breastfeeding.

Gomez was featured in the June 5 issue of Knapp Medical Center’s newsletter. The article also listed other services offered by WIC to mothers and their children.

In August, Gomez completed Phase 1 of the Intensive Course in Breastfeeding and was certified as a breastfeeding educator.

*The best portion
of a good man’s life
is his little, nameless,
unremembered acts
of kindness and of love.*



William Wordsworth
English poet,
poet laureate (1843-1850)
1770-1850



Project 7

Two new sites were opened recently in Dallas by Project 7. The phone number for both is (214) 670-7200, and the mailing address for both is:

2377 N. Stemmons Highway
Suite 400
Dallas, Texas 75207.

1. A mobile clinic in Seagoville opened May 9, serving clients at Seagoville High School from 9 a.m. to 6 p.m. on the second and fourth Thursdays of each month. It's located at the Balch Springs Recreation Center from 9 a.m. to 6 p.m. on the second and third Thursdays of each month.
2. WIC Site No. 34 opened on Nov. 1, co-located with the WIC administration office. It's open from 8 a.m. to 5 p.m. on weekdays except for Wednesdays, when it's open from 11 a.m. to 8 p.m.

Project 29

A new WIC clinic opened Sept. 5 at the Fort Bend Family Health Center at 601 Calhoun in El Campo. Its hours are from 8 a.m. to 7:30 p.m. on Tuesdays, and from 8 a.m. to 5:30 p.m. on Thursdays. Its phone number is (409) 543-8512, and its mailing address is:

WIC Program
2407 N. Richmond
Wharton, Texas 77488.

Project 48

Two new clinics were recently opened in Houston by Project 48. The mailing address for both is:

Harris County Health Dept.
WIC Program
2223 West Loop South
Houston, Texas 77088.

1. The Northside WIC clinic opened Aug. 28. Its hours are from 9 a.m. to 3 p.m. on the first and third Thursdays of each month, as well as on the second and fourth Tuesdays. It's open from 9 a.m. to 4 p.m. on

all Wednesdays. Its phone number is (713) 439-6145.

2. WIC services at the Northside PEP Center began Oct. 8 at 13601 Woodforest in Houston. The clinic is open from noon to 4:30 p.m. on the first and third Tuesdays of each month. Its phone number is (713) 941-5035.

Project 87

See Project 93, second item.

Project 93

1. On Aug. 28, Project 93 director Lisa Robinson resigned and was replaced by acting WIC director Valeria James.
2. WIC services in Morris, Van Zandt, and Wood counties were transferred Sept. 1 from Project 87's regional supervision to Project 93 of Upshur County:
 - a. The Canton clinic in Van Zandt County is open from 10 a.m. to 7 p.m. on Mondays and from 8 a.m. to 5 p.m. Tuesdays through Fridays. The clinic's phone number is (903) 567-6732, and its address is:
700 N. Trade Days Blvd.
Canton, Texas 75103.
 - b. The Lone Star clinic in Morris County serves clients from 8 a.m. to 5 p.m. Mondays through Fridays, except the second Monday of each month, when hours are from 8 a.m. to 6:30 p.m. The clinic's phone number is (903) 656-3650, and its address is:
Route 1, Box 227-A
Highway 259 North
Daingerfield, Texas 75638.
 - c. The Quitman clinic in Wood County is open from 8 a.m. to 4 p.m. Mondays through Fridays, with staffers working through lunch. The one exception is the first Tuesday of each month, when hours are from 10 a.m. to 7 p.m. The clinic's phone number is (903) 763-4123, and its address is:
213 W. Bermuda
P.O. Box 1269
Quitman, Texas 75783.

Outreach UPDATE

By John Koloen, Staff Writer

Participation reaches record high

A total of 661,644 women, infants, and children received WIC services in August. This monthly total was the highest number of participants ever served by Texas WIC.

The greatest increase in participation occurred in San Antonio and Fort Worth-Tarrant County, where six local agencies added 5,910 new participants.

Fourteen Texas WIC local agencies each grew by more than 200 clients.

Evaluating summer media campaign

During the eight-week Texas WIC media campaign in August and September, 2,836 potential eligibles who saw or heard one of the ads called WIC's toll-free phone line to check on eligibility requirements.

Uncounted others exposed to the campaign either called their local WIC agency or just walked into WIC clinics.

The campaign was conducted in Austin, Dallas-Fort Worth, El Paso, Houston, Laredo, San Antonio, and Waco.

Reaching out to (512) 458-7532

The main phone number for the outreach section at the state agency has changed from (512) 458-7669.

The new phone number for ordering outreach materials and reaching outreach staffers is (512) 458-7532.

Special note: WIC outreach coordinator Marsha Walker has a new name, the same now as her husband's and daughter's. Please address new requests to *Marsha Canright*.



Breastfeeding advocates Judy O'Conner, left, Georgia Harris, Linda Richardson, Laurie Coker, Shannon O'Quin, and Enedina Hernandez gather at the Texas Healthy Mothers Healthy Babies exhibit booth at the ILCA conference.

Texans join other breastfeeding advocates at international conference

By Laurie Coker
Breastfeeding Promotion Specialist

More than 1,000 breastfeeding advocates representing 16 countries gathered in Kansas City, Mo., in July to attend the annual conference of the International Lactation Consultant Association (ILCA). Speakers defined the roles of lactation consultants in international efforts to promote breastfeeding.

An international look

Sunera Thobani of Toronto, with the National Action Committee on the Status of Women, gave the keynote address, "Breastfeeding as a Women's Issue." Her talk addressed the evolution of the status of women and how it has affected a woman's choice to breastfeed.

Other speakers included Chloe Fisher of Oxford, England, who talked about her recent experiences in promoting infant feeding in war-torn regions of the former Yugoslavia. She brought home to her listeners the effect of war on children and how breastfeeding can literally mean life or death for babies born during a war.

Kiran Saluja, deputy director of the California WIC program, updated the conferees on the successful strategies used by her state to promote breastfeeding through WIC.

Contributions from Texans

Katherine Dettwyler of Texas A & M University, co-author of *Breastfeeding: Biocultural Perspectives*, spoke on the cultural context of breastfeeding in the United States and the social attitudes that

affect the choice to breastfeed.

WIC conferees from Texas included Shannon O'Quin from Project 87, Georgia Harris and Enedina Hernandez from Project 74, and Laurie Coker from the state agency. Texas WIC exhibited information on the National Breastfeeding MediaWatch campaign and met with Maryland WIC staff on coordinating efforts between states to support MediaWatch activities.

World Breastfeeding Day

Breakout sessions included a group of 20 breastfeeding promoters who met to talk about World Breastfeeding Day and how it is celebrated in their countries. World Breastfeeding Day packets with ideas and materials for celebrating this event are available for \$25 from INFACAT at (416) 595-9819. ILCA also has a packet for \$5, available at (312) 541-1710.

Texas WIC is putting together a third packet that other states and countries may use for future World Breastfeeding Day themes and include in future packets. Although the 1997 theme for World Breastfeeding Day has not yet been announced, Texas WIC is field-testing "Breastfeeding Protects the Planet" as its 1997 slogan. We plan to develop 1997 materials on this theme for use in Texas WIC clinics.

Next year's ILCA conference will be held Aug. 10-13 in New Orleans. In 2000, plan to attend it in Melbourne, Australia.

The best in Texas

TALWD awards outstanding peer counselor

By Callie Jones
Staff Writer



Jana Dunaway of Longview, center, was named the best peer counselor in Texas by TALWD's Breastfeeding Committee. With her are Project 87 breastfeeding coordinator Shannon O'Quin, R.D., L.D., left, and Lee Ann McDaniel, R.D., L.D., supervisor of Project 87's Longview clinic.

with WIC, says Bennett, Dunaway led her group of counselors in designing a system to track and contact all pregnant and breastfeeding mothers in the local WIC program.

Dunaway, a breastfeeding WIC mom, was recruited into the peer-counselor program in July 1994. After being trained, she began work the following month as a peer counselor at the Longview clinic.

This February, she attended the Peer Counselor Trainer Workshop in Austin and conducted her first training session in April for nine potential peer counselors.

Obstacles

Dunaway was expecting her third child in September and was confined to bed rest for the last few months of her pregnancy. But that didn't stop her from helping new breastfeeding mothers.

"I turned over my files to the other peer counselors I trained and they pretty much did everything," Dunaway says. "I handed out my home phone number to a few people before I left. It's not required to give out your home phone

Jana Dunaway of Project 87's Longview clinic has won the 1996 Outstanding Peer Counselor Award. The award was established this year by the Texas Association of Local WIC Directors Breastfeeding Committee to celebrate World Breastfeeding Day on Aug. 1.

Texas WIC has about 350 active peer counselors working at 43 local agencies and 33 hospitals. The program, begun five years ago, trains breastfeeding WIC moms to counsel other WIC moms about breastfeeding.

"Because our peer counselors have a big impact on breastfeeding numbers and getting moms to breastfeed, we wanted them to be recognized for their efforts," says Barbara Khaleeq, chair of the TALWD Breastfeeding Committee. Khaleeq also directs Texas WIC Project 20 in Plainview.

Achievements

Dunaway was nominated by Project 87 director Susan Bennett, who says Dunaway "has become known by her peers as the 'team leader' of the peer counselors." During Dunaway's first six months of employment

number, but what good is it if people can't reach you? So some people called, and I would help them over the phone."

Project 87 breastfeeding coordinator Shannon O'Quin, R.D., L.D., and staff members from the Longview clinic made a special trip to Dunaway's home to present her with a framed certificate of her award.

"I'm honored, really. But I don't do this for the recognition," says Dunaway. "I love it, and I believe in what I'm doing. I want all mothers to take the opportunity to breastfeed, and I'm able to help a few to do it, especially during those first few days and first few problems. If they make it through the first few problems, they are more likely to continue to breastfeed."

The TALWD committee also presented Dunaway with a sterling silver, heart-shaped pin with a mother and baby etched on it. She says she can't wait to get back to work to wear it.

But that may be awhile. On Sept. 9, Dunaway gave birth to a healthy son. She says that her doctor recommended two months recovery time to recuperate from complications during birth.

Keeping focus

Although she won't be in the clinic every day, Dunaway still encourages her co-workers and other peer counselors to focus on what is important.

"It gets wild and hectic in the clinics, and there's a lot going on, but you need to focus and remember what's important — the ladies. Don't let other things bother you," she says. "It's a very personal thing to help a family start breastfeeding. It's a great honor to be that important in someone's life."

Khaleeq says the Outstanding Peer Counselor Award was a one-time project of this year's TALWD Breastfeeding Committee. It will be up to next year's committee to decide whether to continue the award, she says.

Peer counselors take the spotlight

TALWD Breastfeeding Committee chair Barbara Khaleeq invited each local agency to nominate one peer counselor for the Outstanding Peer Counselor Award. Committee members then voted on who best met their criteria. Besides Dunaway, other nominees included:

Martincela "Marty" Jorge

from El Paso's Project 28. Jorge has been a peer counselor since 1994. While raising her three children, she attended college and graduated with a degree as a medical assistant.

Ngozi Tilley

from Project 7 in Dallas, who was trained as a peer counselor in 1992. Because Tilley didn't have a work permit, she volunteered her time as a peer counselor until she was hired in September 1993. She works about 35 hours a week at prenatal clinics, the Martin Luther King Jr. WIC site, and with new WIC mothers at Methodist Hospital. She also answers the breastfeeding help line two days a week. Tilley has three children and is a student at North Lake Community College, majoring in computer information systems.

Annette Torres

from Project 51 in San Patricio County. Torres has blossomed from a shy WIC mom to an active peer counselor working 10 hours a week at the WIC clinic in her area. In addition to her peer-counselor responsibilities, Torres volunteers with the Head Start program and is taking parenting classes through the community-action agency.

Celestina C. Ukaegbu

from Houston's Project 26. Ukaegbu has eight children and recently earned a master's degree in food and nutrition/child development. She graduated magna cum laude with a grade-point average of 3.65 and was named to the dean's honor list in May of 1995. She works as a peer counselor two days a week in a local WIC clinic.

Don't judge when counseling pregnant teens

By Laurie Coker
Breastfeeding Promotion Specialist

She was a popular A student, active in several school-sponsored activities, and dating a varsity football player. But life changed drastically when she became pregnant. Her parents asked her to live elsewhere, the baby's father abandoned her, and school policy ended her extracurricular activities. A tenacious teen, she found a cheap apartment, got a job, and obtained her G.E.D. through night school.

"It just never occurred to me to breastfeed," she says. She'd never known anyone who had breastfed. When her son was 2 weeks old, he woke up in the middle of the night hungry and crying. "It was 2 a.m. and we had no money, no car, no phone, and no formula. My baby was screaming and I was desperate, so I put him to my breast. He started nursing, which seemed to calm him, and I still had milk," she says. "He's 2 years old now and still breastfeeds. He hasn't been sick since. And after I started breastfeeding him, I began to feel more like a real mother! I didn't get as exasperated with him when he was fussy."

Today, the young mother is a college sophomore, living on her own, and determined to succeed as a parent and student. With support from a caring, knowledgeable breastfeeding counselor, other pregnant teens could be successful like her. In some teen mom's cases, the breastfeeding counselor may be the only person in the teen's life to affect her choices in a positive way.

Reaching the teen mother

Diane Van Hoose, R.N., of Pebble Beach, Calif., teaches workshops for Health Education Innovations Inc. about counseling pregnant teens. Her workshops are popular because health-care providers have many pregnant patients who are 18 and younger. Babies born to teens are at a higher risk for low birthweight, being premature, dying within the first month of life, dying within the first year of life, sexually transmitted diseases, sudden infant-death syndrome, dehydration, and diarrhea. "Young, formula-fed babies are especially at risk for diarrhea, says Van Hoose, "because opened cans of formula are left sitting on a counter, home remedies are used by grandma, and formula concentrate is incorrectly mixed."

A major factor in a teen mom's decision to breastfeed is whether her mother had breastfed her, and whether the teen's mom is supportive of her daughter's breastfeeding.

When teens receive counseling on breastfeeding and parenting, they should be encouraged to have a discussion with the family they plan to live with about how they intend to raise and discipline the child. Counseling the infant's dad and the young mom's family is

also important.

In counseling teens, Van Hoose stresses respect. "Be a non-judgmental, respectful listener. Show the teen the same respect you would show an adult. *Respect her confidentiality.* Teens pick up our values from what we do, not what we say. Give praise in prenatal visits and in the hospital. Give rewards every time she shows up to her visit on time — a sample box of detergent at one visit, a comb or hair clip at another."

**Be a nonjudgmental,
respectful listener. Show
the teen the same respect
you would show an adult.**

Lecturing is the least effective teaching pathway for teens. The most effective is discussion with other adolescents, which is why peer-counselor programs are so successful. "And visual aids are a requirement," says Van Hoose. "Written handouts are good for reviewing later when they need to." She also recommends role-playing.

Counselors can affect teen behavior during pregnancy by having the teen mom pretend she is the fetus. Ask her what she wants to eat today, and have her fetus "respond." Then, have her provide

her baby with answers to the following questions:

- ◆ What are five reasons why prenatal care is important?
- ◆ What's the worst thing about being pregnant?
- ◆ What's the best thing about being pregnant?
- ◆ Why finish school anyway?
- ◆ What are five reasons why you are going to breastfeed?

If you are counseling a teen who is determined not to breastfeed, do not just send her home with instructions and cans of formula. Watch her mix the formula and level off the exact amount. Go over the proper way to mix formula exactly. Talk about the health dangers involved in preparing, mixing, and storing formula — and continue to emphasize the ease, convenience, and safety of breastfeeding.

Lactation consultant Elizabeth Puzar of San Jose, Calif., counsels teen moms on breastfeeding. Advice from her on the Internet includes:

- ◆ Cover all of the basics in each meeting as well as one in-depth topic.
- ◆ Dispel the myths and clarify the misunderstandings.
- ◆ Invite the teen moms to bring guests.
- ◆ Keep the group active.
- ◆ Emphasize benefits to the mom.
- ◆ Have them practice discreet nursing.
- ◆ Assume they know nothing.
- ◆ Stress breastfeeding as the one thing only *they* can give their baby.
- ◆ Bring a breastfeeding teen mom and her baby to your meeting.

- ◆ Leave them your card and knowledge of your availability.
- ◆ Give freebies (stickers, buttons, pamphlets).

Tips for Pregnant Teens, a brochure developed by Texas WIC, was mailed this month to WIC clinics and teen-parenting instructors with the Pregnancy Education and Parenting program. Advice is included on nutrition, breastfeeding, returning to school, and parenting. The brochure provides information on additional resources as well as an insert, "Things To Do First," for teens to keep handy.

Readers who would like to order the brochure or additional books about counseling pregnant teens are invited to contact Laurie Coker at (512) 406-0744.

*It is with our judgments as
with our watches;
no two go just alike,
yet each believes
his own.*



Alexander Pope
English poet
1688-1744

Teen pregnancy in the United States

- ◆ Each year in the United States, one out of every eight female teens, ages 15 to 19, becomes pregnant.
- ◆ In 1991, this age group experienced 1.1 pregnancies.
- ◆ One out of 15 male teens fathers a child.
- ◆ In 1988, 3 percent of 14-year-old girls became pregnant.

Source: *Contraceptive Technology*, 16th Rev. Ed., 1994.

Teen pregnancy in Texas

- ◆ 43.3 percent of pregnant teens in 1994 received late prenatal care (after first trimester) or no prenatal care.
- ◆ 6.9 percent (22,069 babies) of total Texas births in 1994 were born to teens 17 and younger.
- ◆ In 1993, the teen birth rate in Texas for ages 15-17 was the fourth highest in the nation.
- ◆ In 1995, 53,498 babies were born to Texas mothers younger than 20; 65 percent of these moms were unmarried.
- ◆ 13.1 percent of all Texas teen births in 1994 were repeat births.

Source: Texas Department of Health; statistics from the Bureau of Vital Statistics prepared by the Division of Planning, Research, and Information Systems Management in the Bureau of Women and Children.

Reading books to children incorporated into Plainview nutrition lessons

By Elaine Goodson, M.S., R.D., L.D.
Nutrition Education Specialist



At Project 20 in Plainview, children and parents learn about nutrition together. Their new lessons are based on training sessions held in Austin this year. Project 20 director Barbara Khaleeq and former staffer Hermie Zapata, along with Elaine Goodson from the state office, attended the sessions on how to read effectively to children.

The training, sponsored by the Public Broadcasting System, won a "Golden Elmo" award from the Children's Television Workshop.

With information from the training, Khaleeq developed two lessons for children and adults, and Goodson is working on three that will be ready for statewide distribution next spring.

How the lessons work

Khaleeq selected several children's books on nutrition. They were field-tested by being read in a local day-care center, whose staff told her which books had held the children's attention.

She then developed two lessons that incorporate reading the books to children. These lessons from Project 20 are *Please Pass Up the Salt* (SP-020-01) and *Milk from Cow to Carton* (SP-020-02).

Copies of these two lessons can be ordered from Delores Preece at the state agency. Preece can be reached at (512) 458-7440.

Khaleeq is using her lessons in a variety of ways. As a regular group lesson for children, the lesson consists of a staff member reading a book to children and discussing it with them while parents listen in. Parents as well as children thus learn about nutrition, and parents acquire additional parenting skills by observing the reading activity.

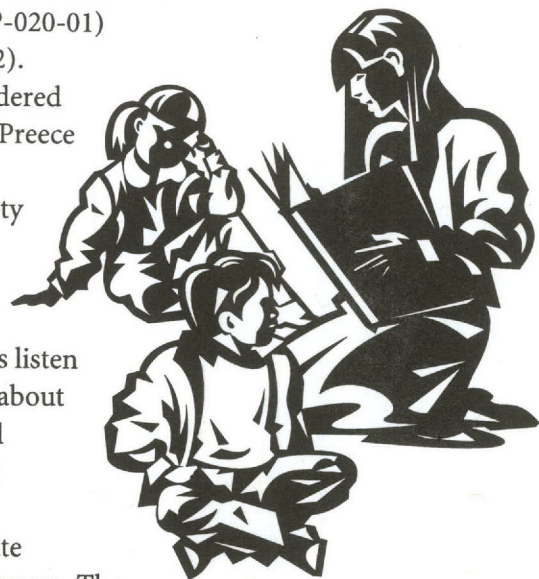
The lesson is also used as a class for late arrivals, and as a take-home, self-paced lesson. The take-home lessons are popular with working parents and WIC moms who are high school and college students, says Khaleeq.

A WIC client can pick up the take-home lesson at one visit to the WIC clinic and then return it by the next visit. In most of the sites using the lesson, parents return the books two weeks after borrowing them, Khaleeq says.

Parents and children also complete a questionnaire about the take-home lesson that goes into their WIC records.

Khaleeq suggests that each local agency's administrative office set up a library to loan books to clinics on a rotating basis. Khaleeq is available at (806) 293-0182 to answer any questions about her lesson plans.

The state agency has prepared a listing of children's books on nutrition. This list is available from Goodson, who can be reached at (512) 458-7444.



What do we live for
if it is not to make
life less difficult
to each other.



George Eliot
English novelist
1819-1880

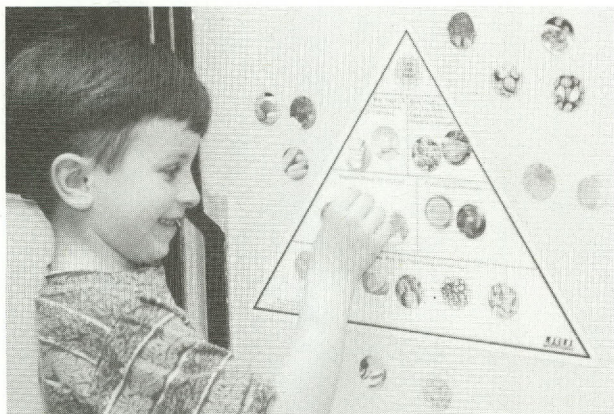
Magnets attract kids, adults to food groups

Texas WIC nutrition educators can use a magnetic teaching tool designed to make individual counseling and nutrition-education sessions more interactive and effective. NutritionTracker's magnetic pyramid board and smaller magnets representing samples of food groups can be used to help show clients how many fruits and vegetables they have to eat and what food groups they're missing.

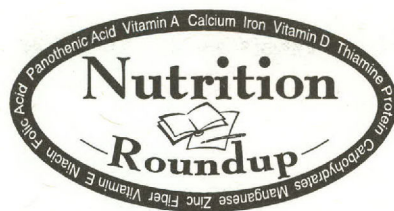
During individual counseling sessions, a staff member could ask the parent or child to place the magnetic foods into the proper food groups. This not only raises awareness about the food groups but also shows clients which foods are missing from their diets.

The NutritionTracker can also be an effective visual aid for teaching the 5-A-Day recommendations. If the participant's diet record shows that she had the recommended servings of fruits or vegetables, she can use the special "I ate five today!" magnet.

The NutritionTracker also can be used as a visual aid in nutrition-education classes.



The NutritionTracker magnet set makes nutrition education fun for kids.



By Rachel Jule, Nutrition Education Specialist
Laurie Gallun, Nutrition Education Intern
and Lisa Forsee,
former Nutrition Education Intern

NutritionTracker, manufactured by MagnaTracker Co., costs \$19.95 each, plus \$3 shipping.

Mention this article, and you'll be given a 20 percent discount. Orders of 10 or more qualify for a 30 percent discount.

To order, call (800) 585-1126, or write to:
MagnaTracker Company
3134 Hannah's Pond Lane
Herndon, Va. 22071

Surf the net for nutrition news

A fast and exciting way to keep up with new nutritional information is by "surfing the net." If you have access to the Internet at home, work, or your local library, all it takes is a little practice to gather all sorts of nutrition information from the many databases available.

Start by connecting to a search engine such as Infoseek or Yahoo.

To save time and energy, it is helpful to narrow your search as much as possible and to be specific. For example, if you are searching for information on planning a low-fat meal, search for "low-fat cooking" or "healthy recipes" rather than "meals" or "low-fat."

Remember, there is no perfect index to the Internet. You may have to try several databases and search for various key words before you find what you're looking for. Although this takes patience and a little imagination, you will find that it is much more convenient and a great deal more exciting than the library ever was.

To get yourself started, try these Web sites:

<http://www.eatright.org>

The American Dietetic Association home page offers access to a practical food and nutrition reading list, ADA's good nutrition reading list, and information about ADA and its publications.

<http://www.yahoo.com/health/nutrition>

Yahoo has more than 200,000 resources listed by topic. Search with key words and phrases to narrow your information search.

<http://www.nal.usda.gov/fnic>

The Food and Nutrition Information Center contains a Web page for WIC materials.

<http://www.os.dhhs.gov>

The Department of Health and Human Services' Web page holds numerous health resources.

<http://vm.cfan.fda.gov/index.html>

This takes you to the Food and Drug Administration's Center for Food Safety and Applied Nutrition.

Each of these sites has connections to other similar places with valuable information.

FDA approves DTaP vaccine for infants

By Marie Garland, R.N.
WIC Immunization Coordinator



The Food and Drug Administration licensed Connaught Laboratories' combined diphtheria-tetanus toxoid and acellular pertussis vaccine (DTaP) on July 31. The new vaccine was licensed under the trade name Tripedia.

The vaccine is licensed for the four initial doses of the diphtheria, tetanus, and pertussis vaccination series. The four doses are given to infants when they reach 2 months, 4 months, 6 months, and 15 to 20 months of age.

How the vaccines differ

The former DTP vaccine contained whole-cell, killed pertussis bacterium. It often caused redness, swelling, fever, and, very rarely, other systemic symptoms.

The new DTaP vaccine contains only parts of the pertussis bacterium. The vaccine is effective in reducing adverse reactions while maintaining a high level of protection against pertussis disease. Recent case-control studies indicate that at least 80 percent of persons receiving this vaccine are fully protected against pertussis disease.

Tripedia is one of two DTaP vaccines already approved for children as fourth and fifth doses following the standard DTP. The other vaccine is Lederle's DTaP vaccine, which is not currently licensed for the initial three doses in infants younger than 15 months of age.

Recommendations

The American Academy of Pediatrics' Advisory Committee on Immunization Practices and its Committee on Infectious Diseases recommend the use of the Tripedia vaccine for the first four doses of the routine series of vaccinations for infants beginning the series. Studies are now being planned to determine fifth-dose (booster) recommendations.

Children who have begun their immunizations with the former DTP vaccine should still receive the new DTaP vaccine as their fourth and fifth doses.

In August, the national Centers for Disease Control and Prevention began negotiations for a new federal contract to purchase the Connaught DTaP vaccine for the first through fifth doses. This vaccine should be available to state and public health-care providers by mid-fall of this year.

Abstract

Cocaine can lower infant development

By Elaine Goodson, M.S., R.D., L.D.
Nutrition Education Specialist

A recent two-year study compared infants who had been prenatally exposed to cocaine to a similar group of infants who had not been exposed to cocaine. Mothers enrolled in the study delivered their babies at the Harlem Hospital Center in New York City.

The mothers were all checked for HIV infection and use of other street drugs and alcohol. Cocaine exposure in the infants was determined by a urine test at birth.

Overall, the cocaine-exposed infants did *not* differ from the infants who were not exposed to cocaine on scores of mental and physical development at 6, 12, 18, and 24 months of age.

Subgroup affected

However, one subgroup of cocaine-exposed infants had lower developmental scores. Infants in this subgroup had hypertonic tetraparesis, or stiffness of the muscles in the arms and legs, at the age of 6 months.

Their scores for mental and motor development were lower at all four ages tested and were statistically lower at 6 months and 12 months of age. The scores on mental development were lower in these children than the scores for motor development.

It is possible that cocaine-exposed infants with hypertonic tetraparesis may be at risk for developmental delay.

Source: M. Vibbert, R. Malouf, M.S. Suarez, E.J. Abrams, M.C. Heagarty, J.C.M. Brust, and W.A. Hauser: "Neurological Correlates of Fetal Cocaine Exposure: Transient Hypertonia of Infancy and Early Childhood," *Pediatrics* 1995, Vol. 96, pp. 1,070-1,077, Chiriboga, Calif.

Patterson named as health commissioner

Patti Patterson, M.D., is serving as the interim state health commissioner until a permanent replacement for David R. Smith, M.D., is selected.

Smith resigned the position on Oct. 15 to become president of the Texas Tech University Health Sciences Center. He had been the commissioner of health and chief executive of the Texas Department of Health since March 1992.

"I'll miss my friends and colleagues at TDH," says Smith. "But I know that this professional organization will not miss a beat as it continues its 'Live Healthy' work."

Patterson, a pediatrician, is the state's first female health commissioner. She was named to the position by the Texas Board of Health. An executive search firm will conduct a nationwide search for a permanent successor to Smith. The board plans to name a new health commissioner in May.

Patterson joined TDH in July 1987 as a consultant in pediatrics. She has been chief of TDH's bureau of women and children's health since 1992.



1996 NAWD Nutrition Education and Breastfeeding Promotion Conference

Dec. 8-11
Ramada Astrodome Hotel,
Houston

To register, call Lynn Silverman at (512) 458-7440, or Janet Rourke or Shirley Ellis at (512) 406-0744. Hotel reservations: 1-800-722-1368.

WICalendar

November

Nov. 6-8 — Intensive Course in Breastfeeding, Phase II, Austin. A week of in-depth training following up on concepts introduced in three-day Phase I session. For more information, contact Jeanne Fisher at (512) 406-0744.

Nov. 8 — Third annual "Amamantando: A Breastfeeding Conference," Centennial Club at Fort Bliss, El Paso. Keynote speaker to be nutritional anthropologist Katherine Dettwyler. For registration forms, call Yvette Salinas, breastfeeding coordinator at Project 33, at (915) 771-5850.

Nov. 12-14 — Competent Professional Authority (CPA) orientation, Austin. For more information, call Dawn Everett at (512) 406-0740.

Nov. 15-17 — 1996 Midwest Farmworker Stream Forum, "The Politics of Health: La Lucha Continúa (The Struggle Continues)," Camino Real Hotel, El Paso. Special day-long session Nov. 13 on prevention of substance abuse. Call Shanda Sansing at 328-7682 for information on registration and continuing-education credits.

Nov. 18-20 — Intensive Course in Breastfeeding, Phase I, Corpus Christi. Basic workshop to prepare health professionals to promote and support breastfeeding. For more information, call Missy Hammer at (512) 406-0744.

Nov. 19 — Intensive Course in Breastfeeding, Lactation Management Workshop for Physicians, Corpus Christi. For more information, call Missy Hammer at (512) 406-0744.

December

Dec. 3-5 — Texas' Fourth Minority Health Conference, "Casting a Wider Net," Radisson Hotel on Town Lake, Austin. Registration is limited to 300; the fee is \$60. For information, call Eva Holguin at (512) 458-7629.

Dec. 8-11 — NAWD's nutrition-education and breastfeeding-promotion conference, "WIC: Nourishing Our Future," Ramada Astrodome Hotel, Houston. Call 1-800-722-1368 to reserve a room. For registration information, call Lynn Silverman at (512) 458-7440 or Janet Rourke or Shirley Ellis at (512) 406-0744.

Dec. 11-13 — Intensive Course in Breastfeeding, Phase II, Austin. A week of in-depth training following up on concepts introduced in three-day Phase I session. For more information, contact Missy Hammer at (512) 406-0744.

January 1997

Jan. 15-17 — Intensive Course in Breastfeeding, Phase II, Austin. A week of in-depth training following up on concepts introduced in three-day Phase I session. For more information, contact Missy Hammer at (512) 406-0744.

If you know of an event you'd like to include in this calendar, call Shelly Ogle at (512) 458-7444.



At the Alvin class held in June, from left are Tammy Castro, Eunice Martinez-Kitchen, Cynthia Galvez, Jeanne Lober, Bertha Mendoza, Rose Segura, Norma Aguilar, Margaret Higgins, and Debbie Carter.

PFA training ends for post-Texas-WIN

By Anna Garcia
Clinic Management Specialist

After 16 classes held during several months of training, patient-flow analysis training for our post-Texas-WIN era is now history. About 70 percent of Texas WIC's 85 local agencies participated, sending 200 local-agency staff to attend the training.

The final ten classes were held in Abilene, Alvin, Austin, Beaumont, Corpus Christi, Denison, Pharr, San Antonio, and Tyler. The local agencies that participated included Projects 3, 4, 5, 9, 12, 13, 19, 24, 29, 30, 34, 37, 38, 39, 40, 44, 46, 53, 56, 58, 66, 67, 72, 73, 74, 77, 87, 89, and 94.

Success stories

With each class, success stories emerged. Clinic operations before conversion to the Texas-WIN computer system were compared to operations following conversion. The realization that WIC clinics are continually operating more efficiently became evident with the aid of the PFA statistical data.

For example, the following improvements were observed in a clinic serving between 4,001 and 4,500 participants per month:

- ◆ Eleven additional participants were served (49 on the post-conversion full-day study compared to 38 on the pre-conversion full-day study) with fewer staff (eight on the post-conversion study compared to 10 on the pre-conversion study).
- ◆ The percentage of appointments kept increased (93 percent compared to 86 percent).
- ◆ Participants' average time in the clinic decreased from 60 minutes to 45 minutes.
- ◆ Participants' average time spent waiting decreased by 14 minutes (27 minutes compared to 41 minutes).

As another success story, let's look at results from a clinic serving between 1,501 and 2,000 participants per month:

- ◆ Twenty-one additional participants were served (60 compared to 39) with fewer staff (four compared to six).
- ◆ The percentage of appointments kept increased to 73 percent from 57 percent.
- ◆ Participants' average time spent waiting decreased by 11 minutes (six minutes compared to 17 minutes).

Effects of Texas-WIN system

Most of the local agencies give credit to the new Texas-WIN system for many of the improvements made in their clinics. PFA trainees made the following comments about the new Texas-WIN system:

- ◆ "Because of the new Texas-WIN system, we are now able to schedule 4 o'clock classes. We can get everyone in and out — and run all reports — before 5 p.m. We could not do that before on the old system."
- ◆ "It is a lot faster than the state's former computer system."
- ◆ "Texas-WIN has helped shorten the time participants spend in the clinic. Therefore, we are able to schedule more participants."

Vitamin supplements can endanger children

More is not always better, especially when it comes to supplementing children's diets with vitamins.

Over-the-counter supplements can be potentially toxic, and large doses can be harmful, says Dr. Kathleen J. Motil at the USDA's Children's Nutrition Research Center.

"Too much iron can be fatal, and there are cases where excess vitamins A and D can damage the kidneys, heart, and brain," Motil says. Motil is an assistant professor of pediatrics at Baylor College of Medicine.

There are two types of vitamins: fat soluble and water soluble. Fat-soluble vitamins include A, D, E, and K. Water-soluble vitamins include vitamin C, thiamin, riboflavin, niacin, vitamins B₆ and B₁₂, folate, biotin, and pantothenic acid.

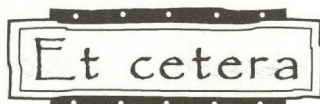
Water-soluble vitamins are easily absorbed by the intestinal tract and flushed out of the body during urination if not needed. On the other hand, fat-soluble vitamins are more difficult to absorb and tend to be stored in the body.

"The fat-soluble vitamins are the worry," Motil says. "Reactions vary from person to person."

Motil says vitamin supplements are unnecessary if a child is healthy and consumes a well-balanced diet.

Supplements are appropriate for premature infants, children on restrictive diets including vegetarian diets, and for children under the care of a physician for medical reasons such as chronic illness, teen pregnancy, or eating disorders.

Parents should consult their



By John Koloen
Staff Writer

pediatrician or a registered dietitian if they are concerned about their child's eating habits.

Babies of young moms most likely to sleep on their bellies

A study of infant sleeping positions in King County, Wash., found that young mothers are the most likely to place their babies in a tummy-down position. Many infant deaths from sudden infant death syndrome (SIDS) could be avoided if babies sleep on their backs instead of their bellies. The King County study was published in the August 1996 *Archives of Pediatric & Adolescent Medicine*.

Since 1992, the American Academy of Pediatrics has recommended that healthy, full-term infants sleep on their backs. A national survey at that time found that 74 percent of U.S. infants usually slept on their bellies. The study in King County found that, by 1994, only 21 percent of infants were sleeping on their bellies.

The study found that sleeping in the belly-down, or prone, position was disproportionately high in certain groups of infants. "In particular," it says, "unmarried mothers and teenage mothers were at significantly increased risk for having their infants sleep prone; these groups also have increased rates of SIDS."

Even though these mothers were told about the SIDS risk, they continued to place their babies in a belly-down position. "The reasons

for this are unclear," the study says. "It may be that information promoting the non-prone position was transmitted too infrequently to affect teenage behavior."

Although this study confines itself to a single county, its findings were consistent with similar studies in Canada and in Australia.

Texans recognize hunger as a serious problem

Four of five Texans believe that hunger is as serious or more serious a problem in their communities than it was five years ago, according to a statewide survey.

The Fighting Hunger in Texas study, conducted by Texas A&M University researchers sponsored by Philip Morris Co., is part of an anti-hunger campaign intended to help hunger-relief agencies raise money and do their jobs better. Five hundred Texans participated in the telephone survey.

Major findings included:

- ◆ Up to 70 percent of the respondents said they knew someone who received food stamps.
- ◆ Nearly 50 percent said they knew someone who had used an emergency food program in the past year.
- ◆ Only 15 percent of respondents believe hunger is a major problem in their own communities.
- ◆ While respondents supported increases in hunger-relief efforts by churches and private charities such as food banks and Meals on Wheels, they were less supportive of federal programs such as food stamps.

Source: Texas Association of Community Action Agencies *Food Journal*

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