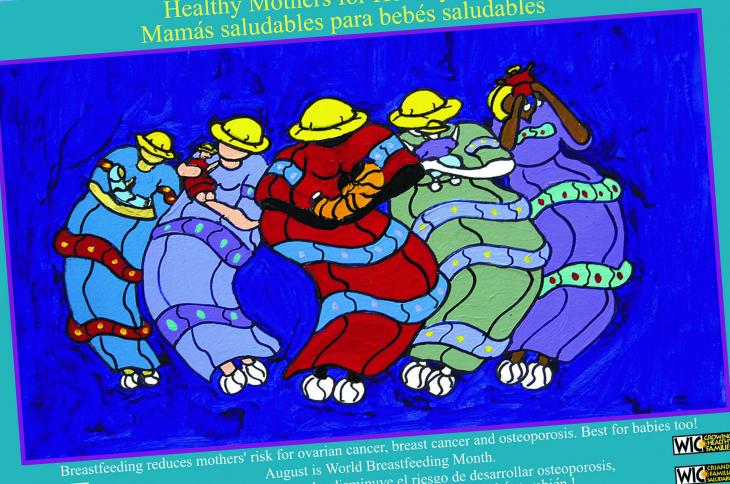


Special Supplemental Nutrition Program for Women, Infants, and Children July/August 2002 Volume 11, Number 4

August is World Breastfeeding Month

Healthy Mothers for Healthy Babies Mamás saludables para bebés saludables



August is World Breastfeeding Month.

La alimentación con el pecho disminuye el riesgo de desarrollar osteoporosis,

cáncer del seno y de los ovarios. Mejor para los bebés también! Agosto es el mes mundial de la alimentación con el pecho.

Esta institución ofrece igualdad en las oportunidades de servicios para todo



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WIC promotion efforts increase breastfeeding rates

By Mike Montgomery Texas WIC Director

he WIC local and state agency staffs are to be congratulated on the effective promotion of breastfeeding in Texas. WIC breastfeeding initiation rates have increased six percent over the past two years. The state average is now 61 percent and steadily rising. The increase in WIC rates has helped raise the state rate for breastfeeding initiation by all women, both WIC and non-WIC, to about 68 percent.

We are steadily approaching the Healthy People 2010 goal of 75 percent of moms initiating breastfeeding. However, the goal of 50 percent of mothers still breastfeeding at 6 months is challenging breastfeeding counselors and educators. Currently, the national average for breastfeeding at 6 months is 31 percent. Our WIC breastfeeding rates in Texas drop from 61 percent of moms initiating breastfeeding in the hospital to 45 percent still breastfeeding by the time they make it to their first WIC appointment. A substantial number of moms are weaning their babies in the first few days of breastfeeding.

Peer counselors are the most likely source to help moms continue nursing successfully through the first few weeks, which is the most challenging time for most breastfeeding moms. We currently have active peer counselor programs in only 72 percent of our local agencies. Peer counselors not only ensure higher breastfeeding rates, they also free other staff for counseling high-risk participants. Additional operational adjustment funding for peer counselors during FY2002 has allowed us to expand the program significantly and enabled us to come much closer to providing the level of breastfeeding support needed by our clients. We applaud the efforts of our local agencies that have done an awesome job of maximizing the use of these funds. These agencies have done a tremendous job of meeting the challenges of this rapid expansion.

Local agencies have also responded enthusiastically to providing breast pumps to working moms, participating in World Breastfeeding Month activities, and networking with local health departments, schools, childcare centers, and businesses. Congratulations to all WIC staff who promote breastfeeding by counseling moms and their families. Your efforts are the reason our clients are choosing to breastfeed and to breastfeed longer. You are improving the health of Texas babies.

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Central office spotlight: Missy Hammer

By Doug Jumper
Texas WIC News Publication Coordinator



People make the difference for Missy Hammer. Especially the people at Texas WIC.

"I love everyone I work with," noted Missy. "I could never leave the people here at WIC."

Many of you will recognize Missy as the person who sets up satellite conferences, coordinates registrations, and handles continuing education contact hours for breastfeeding classes. She also works on events like the annual Breastfeeding Summit.

"It keeps me busy," said Missy.

Missy began her career at the Texas Department of Health and WIC almost nine years ago after she and her husband moved here from Silsbee in Southeast Texas.

"I started as a temp in the automation section doing error corrections," reflected Missy.

Missy's favorite part of her job is the contact with people. Her least favorite job duty is tallying conference evaluations by hand.

When she is away from work, Missy stays busy serving as the church clerk and teaching Sunday school at Faith Missionary Baptist Church in Round Rock. She also stays busy keeping up with her husband of 19 years, Dewitt; their three children, Nikki, Ashley, and Matthew; and pets Dexter the dog, Whiskers the cat, and Charlie the fish.

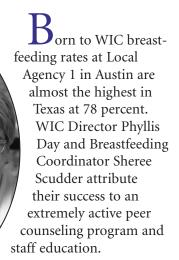
Missy's supervisor is Linda Brumble, director of the Training and Technical Assistance Division, and she offered the following comments about Missy.

"It's good everyone finally gets to meet 'the lovely and talented Missy Hammer.' If Missy ever quit or left, I would have to as well. She's kind of like my Radar (from the TV show "MASH"). She anticipates my every move and brings me things to sign before I even know I need to sign them. She keeps my life in order. I quite literally don't know what I would do without her."



Local agency spotlight: Austin/Travis County Health Department

By Doug Jumper
Texas WIC News Publication Coordinator



"We try to get all of our clerical staff through Phase 1 train-

ing," noted Phyllis. "And we want our CPA staff to have both Phase 1 and Phase 2 training. Also, Sheree holds breastfeeding training at our staff meetings."

Local Agency 1 has also served as the test agency for several new projects such as Mom's Place, the Peer Counselor Program, and now the Dad Peer Counselor Program. While many would shy away from introducing so many new projects, Phyllis and Sheree say they are very lucky to have had the opportunity.

"We have seen a huge benefit from these programs," stated Phyllis. "The Peer Counselor Program and Mom's Place have been very effective."

"We have had a lot of fun trying new and innovative things," said Sheree. "It is a very rewarding opportunity to try new things and be creative. This is also a great way to get to better know our clients, our communities, and our health professionals."

Both Phyllis and Sheree agree that while many hosp-

tals and health professionals have become supportive of breastfeeding, there are still some who are not supportive.

"The first step was getting peer counselors into the hospitals," noted Phyllis.

"Mom's Place was instrumental in helping us with the hospitals," Sheree stated. "While we are supported by most hospitals, there are still horror stories. But we are doing so much better than 10 years ago."

Sheree and Phyllis also agree that it takes a lot of work to keep a peer counselor program going.

"It takes a tremendous amount of work and commitment to keep your program going," emphasized Phyllis. "Many directors will give up if their peer counselor quits. You have to make this an ongoing effort."

Phyllis started with WIC in Williamson County in 1981, and has been a director since 1989. Her favorite aspect of working for WIC is "celebrating everyone's successes at staff meetings." Personnel problems rank highest in the least favorite category. When Phyllis is not working, she likes gardening, cooking, decorating, and doting on her two grandchildren.

Sheree started with WIC in Austin in 1983 and became the nutrition education coordinator in 1985. She added the breastfeeding coordinator duties in 1991. "Having the opportunity to be creative in the clinics" and "working with the different WIC teams" are what she loves about her job. Her hobbies include vegetable and flower gardening, and taking walks with her dog, Jethro. She and her husband, Rick, have been married for 27 years and they have two daughters.

By the way, Phyllis and Sheree not only talk the talk on breastfeeding, they also walk the walk. Phyllis' two children and two grandchildren, as well as Sheree's two children, were all breastfed.



Local agency news

Editor's note: Local agency news is back! We have not run this feature for the past several issues due to space restrictions. But we have heard how important this feature is to our readers, so we will again include these stories in all future issues. In this issue, we are running the stories we received from you over the past several months.

Local Agency 3 – Harlingen By Dalia Lovera

The Cameron County Harlingen WIC Clinic celebrated World Breastfeeding Month 2001 by inviting breastfeeding mothers and the local La Leche League representative to a brunch. Community businesses donated door prizes and the moms were given certificates for having successfully breastfed. Thanks go to all those whose participation made our event possible.



Attending the Harlingen WIC Clinic's World Breastfeeding Month brunch were, from left: Anabel Buenrostro, peer counselor; Martha Soberon and daughter Andrea M. Pimentel; Rebecca Blish, lactation consultant, with son Adam Blish; Aida Guzman and daughter Christine Gamez; and Leonor Gonzalez, peer counselor.

Local Agency 30 – Port Arthur By Jacqueline Boyden

On May 6, 2002, I celebrated five years of being a breastfeeding peer counselor for the City of Port Arthur Health Department's WIC Program. I have successfully breastfed my two daughters Ashley April and Jamie Allison, as well as my two sons Joshua Allen and Alijah Allen.

During my career as a peer counselor, I have counseled hundreds of prenatal clients about infant feeding

choices. Unfortunately, I have learned that many women are reluctant to breastfeed or give up within the first month. Lack of support, misinformation, and pressure to offer breastmilk substitutes have combined to undermine their confidence. This "disempowerment" is what motivates me in helping women make educated choices for themselves that affect the lives of their children. I am grateful to be thanked by mothers I have spoken to, and to my co-workers for believing in me and trusting me to be able to help those wanting to breastfeed their babies. The WIC Peer Counselor Program makes a real difference in the lives of the women who are counseled, as well as the counselor, because it empowers women to help each other. This program boosts pride in breastfeeding and motherhood.

As a peer counselor, I want to remind all mothers that their role in shaping future citizens is valuable and deserves to be cherished and supported. That is why I am proud to be a breastfeeding peer counselor at Local Agency 30.

Local Agency 39 – Tyler

By Bonnie Barker

If you are driving in the Tyler area and see a maroon Ford Contour with "Breastfeeding is Best" on the back window, please honk and wave. It is O'Nita Wood, breastfeeding peer counselor for Local Agency 39.

O'Nita has been working for WIC as a peer counselor for five years, and she currently works at Trinity Mother Frances Hospital in Tyler helping moms with their breastfeeding newborns. She also breastfed her three children: Krystal, William, and Wendykay.

We are lucky here at Local Agency 39 to have O'Nita helping our moms!



O'Nita Wood with her "Breastfeeding is Best" Ford.



How to submit news items and pictures for "local agency news"

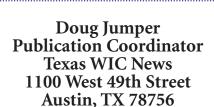
Have you always secretly wanted to be a news reporter? Or do you just wish you could get some publicity for the great work being done by your local agency? Submitting a news item to the "local agency news" section of *Texas WIC News* is easier than you think!

If you know of a recent event that you would like to share with WIC people across the United States, write us a short news story and we will run it as soon as we can. If you are uncomfortable about writing a news story, just send us the facts and we will write it for you. Either way, *please make sure your submission includes "the five Ws" of a news story - who, what, when, where, and why - along with your name, title, and phone number.*

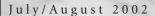
We also love to get pictures of your people and events. E-mail us your digital photographs (best), or send us your

35mm glossy-finish color prints (good) or color Polaroid prints (not as good), along with the names, titles, and subject of your photo. Also send us your name, title, and phone number so you can get credit for being the photographer. When taking your pictures, please remember to get as close as you can to the subject and make everyone stand close together.

If you have a story, a picture, a story and a picture, or just have questions, contact us in the following ways:



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How to promote breastfeeding to teen moms

By Tracy Erickson, R.D., L.D. WIC Breastfeeding Coordinator

You may think convincing a teen mom to breastfeed her baby is impossible. But the truth is that teens are more likely to breastfeed than you think. Teen moms, as a group, saw the second largest increase in the initiation of breastfeeding between 1990 and 2000 – from 30 to 56 percent.

Promoting breastfeeding to teens can sometimes be a hard sell because teens tend to be self-centered, which is a normal stage of development. Teens often think that breastfeeding will disfigure their breasts or take away from their "me" time by not allowing anyone else to feed the baby or by making the baby overly attached. At the same time, teens want control of their baby.

Focus on the benefits for mom

A major key to promoting breastfeeding to teens is to focus on the immediate benefits for the mom, not the baby. For example, teens are very body image conscious, so the fact that breastfeeding may help a mom lose weight faster is a very important benefit to convey to a young mother. And a teen is much more likely to lose the weight gained during a pregnancy than a mid-30-year-old breastfeeding mom because a teen's metabolism seems to bounce back faster. However, the fact that breastfeeding may reduce a teens chance of developing osteoporosis later in life is probably not the benefit that will hook her, because teens don't think they will ever get old.

To promote the benefits of breastfeeding for the baby, turn the benefits around as if they are really a benefit for the teen mom. A teen mom may not be wowed by the fact that her baby will be sick less often, unless you tell her it will allow her to finish school faster or to miss less work income because she won't be staying home, caring for a sick baby or taking him to the doctor. Avoid focusing on common breastfeeding benefits that may reinforce the teen mom's fears. Teens are afraid that breast-

feeding will tie them down – that they will never be able to leave the baby if they breastfeed. Although it's a terrific benefit, overemphasizing the fact that breastfeeding creates a strong bond between mom and baby may turn the teen off.

Acknowledge concerns

Another key to promoting breastfeeding to teens is to make the perceived disadvantages of breastfeeding seem less threatening by acknowledging her concerns and then educating her. Often, all it takes is a little education because teens have a lot of misconceptions about breastfeeding.

Top reasons why teens don't breastfeed

- **%** Ties you down
- *** Breast disfigurement**
- ***** Breasts are sex objects
- *** Embarrassment**
- *** Fear of pain**
- **Return to work or school**

A teen mom may not realize that bottle-feeding can tie her down and that breastfed children tend to become more independent rather than mother-dependant as they grow older. She may need to be told that breasts change shape during pregnancy no matter how she chooses to feed her baby, so it's pregnancy, gravity, and time that change the shape of her breasts, not breastfeed-



ing. Demonstrating discreet breastfeeding through use of pictures or holding a doll under a receiving blanket or inside a shirt can take a load of worry off of a teen mom by showing her how she can breastfeed without exposing herself to others. Reassuring the teen that breastfeeding should not hurt if the baby is on the breast correctly and telling the mom you'll be there for her if she needs help with breastfeeding or setting up a school or work pumping schedule are other ways to calm her fears.

Peer counselors

Teens are largely influenced by peers and will relate better to another WIC mom, particularly if she is also a teen mom. WIC peer counselors who have taught breast-feeding classes in high school Pregnancy, Education, and Parenting (PEP) programs, Communities in Schools programs, or family life science classes have seen attitudes towards breastfeeding change dramatically from the beginning of a class to the end. Most teens become very excited about breastfeeding as they learn more about it and these positive attitudes become infectious among teen peer groups.

Family influence

Family members, particularly the teen mother's mother and the father of the baby, also influence the mom's decision so it is important to include these people in breastfeeding promotion. If you can sell the father of the baby on the benefits of breastfeeding, the teen mom may breastfeed just to impress the dad. But never talk about the teen to the grandmother or father of the baby while the teen is in earshot. This sends a subtle message that someone else is going to take care of her baby for her. Talking to the teen while making direct eye contact with her teaches the teen that she will be the one responsible for her own baby.

If you get a chance to talk to the grandmother alone, encourage grandma to give her daughter confidence that she can breastfeed. Tell grandma that breastfeeding is, by far, the best thing her daughter can do for the baby and only her daughter can do that for the baby. Encourage grandma to teach her daughter how to be a good parent. This gives grandma a job and makes her feel like she is doing something to help her daughter and future grandchild.

What teen moms desire

Another way to promote breastfeeding to the teen mom is to focus on the following things that are important to all teen moms:

- To be a good parent. Breastfeeding is strongly recommended by the American Academy of Pediatrics, the U.S. Surgeon General and the World Health Organization among other leading health authorities because of the major health benefits for the baby and mother. It is also recommended by parenting experts because it is a major component of attachment parenting.
- * To have good self-esteem. These moms are doing a very important job for their babies that nobody else can do. That makes them a very valuable person.
- * To have control of her baby. She may not get to be with her baby 24 hours a day, but she can do something for her baby by pumping when they are separated. And, when she gets home and puts her baby to her breast, her baby is going to know whom mom is.
- * To feel empowered. Not only did she create this beautiful baby, she can be her baby's sole life-support system for six months. She is finishing school and doing the best thing she can for her baby. If she can succeed at breastfeeding, she may feel she can do anything.

Teens often act like you can't tell them anything they don't already know. Even if it appears that they aren't listening, they are hearing what you're saying so, never underestimate the power you have on your teen moms.

For more information on teens, teen materials, the Pregnancy, Education and Parenting program, or the Communities in School program see tdh.state.tx.us/wichd/bf/bf1.htm.



Healthy mothers for healthy babies

By Laurie Coker Breastfeeding Promotion Specialist



his year's World Breastfeeding Month theme,
Healthy Mothers for Healthy Babies, may be used
throughout the year as an excellent motivation for
pregnant women and teens to breastfeed. Bulletin
boards, facilitated discussions, lessons, and handouts teaching the health benefits that breastfeeding
provides to women are a few ways to emphasize
this message.

Breastfeeding helps shrink the new mother's uterus and prevents excessive bleeding. Because lactation is a natural part of childbirth, breastfeeding helps the mother's body to adjust and heal after her baby is born. Kittie Frantz, IBCLC, who spoke in March 2002 to Texas WIC

staff, noted the importance in grandmothers' and abuelas' wisdom, to honor the first 40 days after giving birth, la cuarentena. The new mother takes good care of herself and allows family and friends help with meal preparation and housework while she rests and focuses on breastfeeding and the care of her baby. This helps build up her milk supply and helps her body recover.

Breastfeeding releases hormones that relax and calm the mother. This is a healthy way for her to adjust to the new responsibilities of parenting. The very nature of breastfeeding requires the new mother to hold and comfort her baby as he or she feeds, which also allows her to get the rest she needs. Often, new mothers are so overwhelmned with caring for the new baby, they do not take care of themselves.

Breastfeeding, along with a healthy diet and exercise, helps new mothers lose weight and get back into pre-pregnancy shape. Just as pregnancy is a great motivator for many women to give up smoking, alcohol, and junk food, breastfeeding motivates them to eat healthy and take better care of their own bodies.

Women who breastfeed are lowering their risk of developing ovarian cancer, breast cancer, and osteoporosis. This means they will possibly live longer and healthier lives.

Breastfeeding makes it easier for mothers to bond with their babies. This creates special moments and memories that will enrich their lives.



Funding increase means more peer counselors and more babies breastfed

By Jewell Stremler, C.L.E. Peer Counseling Coordinator

Texas WIC was delighted to receive almost twice as much in Operational Adjustment funds for the Peer Counselor Program for FY2002 (\$1.3 million) as for FY2001 (\$700,000). The money went to 54 local WIC programs to pay and train peer counselors. Though funds were not awarded until February, leaving only half the year to increase peer-counselor services to the level such a funding hike implied, dedicated WIC staff across the state met the challenge. Their valiant effort in rapidly expanding the program has tremendously improved local agencies' ability to give clients the level of breastfeeding support they need.

This money pays for Breastfeeding Peer Counselor Programs at local agencies that could not afford them within their regular WIC budget. It enables agencies that can support a minimum level of peer counselor services to expand their programs and come closer to meeting the needs of their breastfeeding clients. Recent studies, including many from other states' WIC programs, have documented a much higher rate of breastfeeding incidence, exclusivity, and duration among women who have support from peer counselors compared with those who don't.

In Texas, breastfeeding rates continue to increase in clinics where peer counselor services are offered. Breastfeeding initiation rates among infants born to Texas WIC clients have increased from 53.9 percent in September 1999 to 61 percent in May 2002. Local agency WIC directors believe the Peer Counselor Program has enabled them to do a better job of meeting their breastfeeding performance standards and serving their WIC clients.

Dad's Peer Program is piloted

Though our breastfeeding rates continue to increase, a barrier for many of our clients is lack of support for

breastfeeding from their families. Many studies indicate that a mother's decision to breastfeed and how long she continues depends on the support of her husband or male partner. As a result, four local agencies are piloting a breastfeeding-support program for husbands and fathers of Texas WIC participants. A small portion of the FY2002 Peer Counselor operational adjustment funding has been allocated to explore this innovative approach to breastfeeding promotion.

Fathers are trained in basic breastfeeding benefits and how-tos, along with counseling techniques, so they can share information currently recommended by breastfeeding experts. WIC fathers are employed as Peer Dads by WIC local agencies to counsel and support other WIC fathers. Peer Dads also speak to classes that cover breastfeeding, including prenatal; childbirth education classes; hospital classes; classes at family-planning clinics; faith-based sessions; high school classes; health fairs; and the like.

A model father-to-father support program, training materials and evaluation tools will be available to local agencies who have an interest in implementing a Peer Dad's Program in FY2003.

Four WIC local agencies have been designated as Peer Dad pilot sites:

Austin/Travis County Health Department San Antonio Metropolitan Health District Centro de Salud Familiar La Fe in El Paso Cameron County Health District



Test your nutrition I.Q.: Breastfeeding

By Eaton Wright, B.S., N.U.T. Nutrition Expert

Eaton Wright here and it's that time again. What time you ask? Time to "Test Your Nutrition I.Q." The topic this time around: breastfeeding.

At birth, an infant's brain has about 100 billion nerve cells. That's 100,000,000,000 cells! By the time an infant is three or so, he or she will have formed about 1,000 trillion connections – about twice as many as adults have. That's 1,000,000,000,000,000 connections and a whole lot of zeros.

We all know that breastfeeding is absolutely the best food for infants. No matter what any formula manufacturer says, the fact is there is no formula that even comes close to breastmilk. Not only does breastmilk have nutrients that no infant formula will ever have, the act of breastfeeding provides physical and emotional closeness that formula-fed infants simply do not receive. Now, on with the quiz.

- 1. How long does the American Academy of Pediatrics recommend women breastfeed?
 A. 31,536,000 seconds B. 525,600 minutes C. 8,760 hours D. 365 days E. 12 months F. 1 year G. All of the above
- 2. The act of skin-to-skin contact experienced by moms and breastfed infants stimulates which of the following hormones?
 - A. Testosterone B. Prolactin C. Breastosterone D. Growth Hormone E. B & D
- 3. True or False? Colostrum is the 38th state of the United States of America.
- 4. Breastfeeding is terrific for the infant, but what about mom? Moms who breastfeed their babies are more likely to:

A. Have a lower risk of ovarian cancer, breast cancer, and osteoporosis B. Be more relaxed and calm C. Win the lottery and give half of the proceeds to your old buddy Eaton D. Return to pre-pregnant health more quickly E. A, B & D

Answers

- 1.From the American Academy of Pediatrics: "Human milk is the preferred feeding for all infants, including premature and sick newborns... It is recommended that breast-feeding continue for at least the first 12 months and thereafter for as long as mutually desired." Or... 365 days, 8,760 hours, 525,600 minutes, or 31,536,000 seconds, whichever comes first. The answer is G.
- 2. Testosterone? Nope. That's the hormone fueling the NASCAR craze currently sweeping the nation. Testosterone also fuels male pattern baldness. Does this mean that Jeff Gordon is going bald? My Magic Eight Ball reads "unclear." And Breastosterone? I won't even go there.
 - The correct answer is E., Prolactin and Growth Hormone. Prolactin is produced by the anterior pituitary gland and is released into the circulatory system. It acts on the breast to produce human milk.
- 3. False. Colorado is the 38th state in the union.
 Admitted in 1876, Colorado is known as the
 Centennial State because of its admission to the
 union 100 years after signing of the Declaration of
 Independence. The state fish is the Greenback
 Cutthroat Trout.
 - Colostrum is the milk produced by the breasts in the first few days of breastfeeding. It is high in protein, and antibodies to help keep the infant healthy.
- 4. Win the lottery Ha! But just in case I can be reached at... The correct answer is E., more relaxation, quicker healing, and a lesser incidence of osteoporosis and certain cancers. Breastfeeding releases hormones that shrink the uterus and prevent bleeding, relax and calm mom, and promotes a sense of well-being.

About the author:

Eaton Wright is a certified N.U.T. based in Austin, Texas.



Dads can play an important part in breastfeeding

By Laurie Coker Breastfeeding Promotion Specialist

Some of the strongest advocates for breastfeeding are fathers of breastfed babies. They see their babies thrive on mother's milk and notice the cost savings breastfeeding provides, especially if their friends are buying formula. But how many new fathers are aware of just how important a role they play in the breastfeeding equation?

Fathers often feel left out and unsure of what they are supposed to do with a newborn. They see how the breastfeeding mother and baby are bonding, but they may not realize how important their own presence is to the well being of the mother and baby. Dr. William Sears, pediatrician and author of *Becoming a Father: How to Nurture and Enjoy Your Family*, writes in a straightforward, readable style about many things new dads can do. He advises fathers to make time to bond with the baby by notifying the head nurse and other hospital staff that he and his family need time alone together. Dad closes the door, puts his arm around mother and comforts her as he touches and caresses their newborn at the mother's breast. Dr. Sears says no one has the right to interfere with this "triangle of love."

The father can care for the infant right away if the baby is delivered by a C-section and if breastfeeding is delayed. This is a perfect time for the father to bond with the infant. The father's support of his wife and management of hospital procedures allows the mother to relax and care for her infant. Dad can fend off anyone who tries to interfere with breastfeeding. Once they are home, if well-meaning friends give poor advice to a vulnerable new mother, dad can step in to support the mother's efforts. He can make sure the home environment is clean, dishes and laundry are maintained and meals are on time. Carrying out these functions will put him in very good stead with his wife and strengthen their relationship. It will also ensure a healthier and calmer family dynamic.

Several studies show the impact the father has on the mother's decision to breastfeed and the length of time

she breastfeeds. A mother who is determined to breastfeed may have her confidence undermined if dad is afraid she won't produce enough milk to satisfy their baby. His fear may cause him to supplement with water or formula, interfering with milk production and mistakenly confirm his fears. Conversely, a mother who is unsure about her decision to breastfeed can have her confidence built up by a supportive dad, and will be more likely to breastfeed longer.

See "News to use" in this issue of Texas WIC News for new materials to aid you in your promotion of breastfeeding to dads.

Texas WIC launches 'Peer Dad' pilot projects

Father-to-Father Breastfeeding Support Programs are now being piloted at four local agencies. WIC Programs at Cameron County Health Department, Austin/Travis County Health Department, Centro de Salud Familiar La Fe, and San Antonio Metropolitan Health District have trained fathers of breastfed babies to be "peer dads."

Peer dads educate other fathers by offering answers to common questions dads have about breastfeeding. Peer dads also educate prospective fathers on the many aspects of breastfeeding, including the health benefits of breastfeeding for the baby and mother and the cost savings of breastfeeding. Peer dads will also share information on how dads can support the breastfeeding mother, encourage her to breastfeed longer, provide tips on how dads can become more involved in the care of their babies, and bond with their babies.

In addition to dad-to-dad support, peer dads have also been involved in health fairs and communityinvolvement activities.



Midwives: Leading promotion, support for breastfeeding

By Laurie Coker Breastfeeding Promotion Specialist

ince the time of the Texas Republic, parteras served the Spanish-speaking population, and granny ladies in rural Texas historically provided prenatal and labor and delivery services to Texas women. By 1925, more than half the babies born in Texas were delivered by midwives. Today, midwifery clientele are often well-educated women from all economic groups who prefer a more natural birthing experience. They also tend to think of pregnancy and labor and delivery as a natural phenomenon rather than a medical procedure. The natural, committed effort of midwives to encourage new moms to breastfeed results in almost 100 percent breastfeeding initiation rates.

Two kinds of midwives practice legally in Texas. A Direct Entry Midwife is documented with the state of Texas that she has satisfied each requirement for basic midwifery education and passed the comprehensive midwifery examination. DEMs are not required to work under the supervision of other health care providers. They provide care only for normal pregnancy, labor and delivery, and normal newborn care until 6 weeks of age. Certified Nurse Midwives are advanced practice nurses who work in collaboration with physicians and may provide well-woman care along with prenatal care, labor and delivery, and postpartum care to mother and baby.

A recent survey completed by six Texas midwives and 20 of their clients indicated women who use midwives begin to see them during the first trimester, at which time the mother's intent to breastfeed is established.

Austin midwife Karin Barasa requires her clients to breastfeed "at least initially" and remains with her client until the baby is successfully breastfeeding. Barasa explains at her first client inter-

view how breastfeeding helps the mother heal after childbirth and prevents excessive bleeding. "I have never had

a client approach me who wanted a homebirth but not to breastfeed.

Those things usually go hand-in-hand"

Although midwives professionally follow their clients' progress up to six weeks postpartum, many continue to check on clients by phone or the clients may call them with updates. There is no available data on duration rates of these moms; however, some midwives keep data on how long their clientele breastfeed. Of those who do, they report between 80 and 90 percent still breastfeeding

at six months and between 75 and 90 percent still breastfeeding at one year.

Most of the mothers surveyed reported they nursed within five minutes of birth or less. The midwife is there to offer suggestions on correct positioning and latch-on. She compliments the mother on her efforts, praises her at feedings and when the father is present, involves him in the breastfeeding experience. She checks in on the mother frequently in the days following the birth "just to see how breastfeeding is going." She helps if there are problems, and if necessary, refers to a lactation consultant.

All the midwives surveyed breastfed their own babies. Some attend breastfeeding workshops, such as the Texas



Department of Health Phase I and Phase II Intensive Course in Breastfeeding or the peer counselor Mom-to-Mom training. Many use WIC breastfeeding

resources and materials as well as those of La Leche League and the International Board of Lactation Consultants. But their main source of suphealthy, breastfeeding moms and babies." port is their own undeniable belief in the importance of breastmilk as a source

of nourishment, protection against illness, and maternal bonding. They emphasize during each pregnancy the health benefits breastfeeding provides both mother and baby. They include the father or other family support persons in the breastfeeding support system. They recommend to their WIC clients WIC breast pumps, breastfeeding classes and education materials. They are on call 24 hours for breastfeeding advice or support for the first six weeks. They often phone their clients throughout the year just to see how breastfeeding is going.

What more can WIC do?

The midwives surveyed praised WIC's efforts to get breast pumps to those moms who need them. They also made the following suggestions: "WIC counselors and

Increase education for dads, affirming that breastfeeding can be done discreetly and that breastfeeding does not conflict with breasts being a sexual part of their relationship.

Bring breastfeeding moms into classes to encourage new moms and to offer advice on breastfeeding.

Allow lactation consultants the time to help prevent problems before they happen.

Add additional classes to empower women to make healthy choices about pregnancy, birth, and feeding babies.

Local agency news

Recruit new peer counselors with a "Breastfeeding Tea"

midwives have very similar goals:

Karin Basara, Texas midwife

By Jewell Stremler, C.L.E. **Peer Counselor Coordinator**

Holding a "Breastfeeding Tea" on Feb. 28 was a crucial step in helping the San Angelo WIC Program meet their breastfeeding performance measure. In January, Local Agency 56 WIC Director Nancy Southard and Breastfeeding Coordinator Gloria Hale found themselves without a peer counselor. They were having a hard time recruiting new counselors, so they decided to try an idea used previously by several other local agencies. They invited all their breastfeeding moms to a "Breastfeeding Tea," where they explained the Peer Counselor Program, answered questions, and passed out applications. Twentyeight moms attended the tea and they wound up with six new peer counselors.

Two of their counselors went to work part-time in late March and the other four were trained in July. The two counselors who started in March worked a combined total of 80 hours per month. The local agency's "Born to WIC" breastfeeding rate was 32 percent in March but

had increased to 56 percent by June. They attribute much of their increase to the success of their new peer counselors.

All pregnant women are being educated, helped, and encouraged to breastfeed. All breastfeeding women are being assisted to obtain additional information, referrals, and pumps, when appropriate. And, breastfeeding women who come in for package changes to formula see a peer counselor. Breastfeeding moms who request formula often have breastfeeding issues that can be resolved. These moms are being assessed for problems and encouraged not to wean their infants from the breast suddenly or at all.

For more information about recruiting peer counselors or holding a Breastfeeding Tea, contact Jewell Stremler, peer counselor coordinator at the WIC State Agency (512) 341-4400 X2303# or Jewell.Stremler@tdh.state.tx.us.



Breastfeeding policy Q & A

By Tracy Erickson, R.D., L.D. WIC Breastfeeding Coordinator



Are peer counselors required to complete the Breastfeeding Promotion and Support Module?

A

No. Once peer counselors have completed Peer Counselor Training and the Breast Pump Training described in policy BF:04.0, they can teach breastfeeding classes and provide individual counseling on breastfeeding. They do not have to complete the Breastfeeding Promotion and Support Module if they have completed Peer Counselor Training. (policies BF:03.0 and TR:03.0)

Q

Who is responsible for making sure all WIC staff are trained in breast pump assembly, use and cleaning, and expression and storage of human milk?

 \mathcal{A}

The breastfeeding coordinator is responsible for ensuring that all WIC staff who provide direct clinic services receive this training. Expression and storage of human milk is covered in the Breastfeeding Promotion and Support Module, however, breast pump assembly, use, and cleaning should be hands-on training. These training requirements can be satisfied by having a new employee observe issuance of a breast pump to a WIC participant, since all of these topics should be covered every time a pump is issued. If your agency would like to receive this training from Hollister, call Maggie Boyne at 1-800-624-5369 ext 1430. If you would like to receive training on the Medela manual pumps, call 1-800-435-8316. (policy BF:04.0)

Q

Are all local agencies required to issue breast pumps?

A

Although most local agencies already have their breast pump programs well underway, beginning October 1, 2002, all local agencies will be required to keep an inventory of breast pumps and issue them according to policies BF:05.0 and BF:06.0.



News to use

By Laurie Coker **Breastfeeding Promotion Specialist**

New breastfeeding lessons with videos

The Benefits of Breastfeeding, a 14-minute motivational video from Eagle Productions in Raleigh, North Carolina, was mailed to all Texas WIC local agencies in the summer of 2002. The video presents a multitude of benefits to both mother and baby, and features breastfeeding expert Dr. Ruth Lawrence, author of Breastfeeding: A Guide for the Medical Profession. Texas WIC Lesson BF-000-27 supports the video and includes sample bulletin board ideas and "gift cards" with breastfeeding benefits, recipes and parenting tips. By emailing Laurie Coker at Laurie.Coker@tdh.state.tx.us, you can receive colorful gift tags and gift graphics for a bulletin board to go with your lesson. The lesson is available online at http://www.tdh.state.tx.us/wichd/nut/bflessons- nut.htm.

Breastfeeding: The How To Video, by Vida Productions, will be mailed to all Texas WIC local agencies in the fall. Previously available through the TDH Audiovisual Library in English, the video is now in English and Spanish. WIC breastfeeding lesson BF-000-20 supports the first 15-minute segment of The How To Video, and BF-000-21 supports the second 15-minute segment.

> A 5-minute bonus video, Men and the Breastfeeding Experience, appears at the end of The How To Video. Lesson BF-000-22 may be used with it. Lessons are at http://www.tdh.state.tx.us/ wichd/nut/bflessons-nut.htm.

> > **Breastfeeding brochures**

Just for Grandparents, stock No. 13-06-11288, helps grandparents understand the importance of their role in supporting

breastfeeding. Information on milk production, infant hunger cues, satiety, and helping the new mother through the first few weeks after labor and delivery are included. Grandparents are invited to attend a WIC breastfeeding class. The Grandparent's Creed appears on the back panel. Just for Grandparents may be ordered on the Texas WIC order form.

Dad, stock No. 13-53, is a redesign of the old breastfeeding pamphlet for fathers, Especially for Dads, and may be ordered later this year on the TDH warehouse order form, AG-30. The revised brochure includes tips for helping a dad to be supportive during labor, delivery, and breastfeeding.

Why not invite dads Here's how to: to join a breastfeeding support group and distribute the new Dad pamphlet? Show the five-minute video, Men and

the Breastfeeding Experience, which appears at the end of Breastfeeding: The How-to Video.

Hallmark Cards project for clinics

As part of its commitment to America's Promise/The Alliance for Youth, Hallmark Cards, Inc. is providing infant-immunization reminder cards for all new parents whose babies are delivered at hospitals, birthing centers, and at home. Throughout the nation, new parents are receiving these beautiful cards. Texas will receive 350,000 cards and envelopes for distribution. By distributing the cards to WIC parents of new babies, you help Texas reach its 90 percent goal for infant immunizations.

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Revised breastfeeding promotion and support module

The Breastfeeding Promotion and Support Module and Answer Key were revised in February 2002. The workbook was incorporated into the module by providing a self-test at the end of each section. The new module includes a section on breastfeeding when mom and baby must be separated. All old breastfeeding modules should be thrown away. Order the new Breastfeeding Module, stock No. 13-27-1, and Answer Key, stock No. 13-27-3 using the Texas WIC Materials Order Form. All new WIC staff should complete the new module. Although it is not required, it is strongly recommended that staff who has previously completed the old Breastfeeding Promotion and Support module review this new module.

Texas WIC web site updates

Check out the new Texas WIC Breastfeeding Promotion web site, Teen Topics, at http://www.tdh.state.tx.us/wichd/nut/teens.htm. Tips on counseling pregnant teens, statistical updates, materials and resources, links to journal abstracts, and other resources make this a helpful tool for WIC staff that counsel and refer teen clients.

While you're surfing WIC's web page, take a look at the breastfeeding lessons that have been added to the Education segment at http://www.tdh.state.tx.us/wichd/nut/bflessons-nut.htm along with handouts and other teaching tools.

Another new study indicates breastfeeding eases pain in infants

Jennifer Warner reports for WEBMD Medical News at http://my.webmd.com on a recent study published in the April 2002 Journal of Pediatrics. The study concludes that breastfeeding may be a natural way for mothers to ease the pain of her newborn. Crying was reduced by 91 percent and grimacing was reduced by 84 percent in infants who were breastfed while undergoing a painful medical procedure. Eleven of the 15 breastfeeding babies did not cry or grimace during the procedures.

The study is the first to look at the complete act of

breastfeeding as a way to prevent pain in human infants. Infants were held and breastfed by their mothers while a blood sample was taken from the child's heel. Researchers monitored the baby's reactions, which suggest that breastfeeding may actually prevent pain from starting. The study also concluded that breastfeeding prevented the normal rise in heart rate that accompanies pain.

Fifth Annual Texas Breastfeeding Summit in San Antonio

Make plans to attend the Breastfeeding Summit in San Antonio, Sept. 30 through Oct. 2, 2002. The Summit will be at the Omni San Antonio Hotel, 9821 Colonnade Blvd., San Antonio, TX 78230. Phone (210) 691-8888 for hotel reservations, or register on-line at http://www.omnihotels.com/hotels/default.asp?h_id=44. Among this year's speakers are noted Australian breastfeeding researcher, Peter Hartmann, Ph.D.; and Thomas Hale, Ph.D., author of *Medications and Mother's Milk*. To learn more about this year's sessions and speakers, and to register on-line, visit the Breastfeeding Summit web page at http://www.tdh.state.tx.us/lactate/summit.htm.

Videotapes from the 2001 Breastfeeding Summit are now available

The following videotapes of the 4th Annual Breastfeeding Summit in 2001 are now available in the Texas Department of Health Audiovisual Library. To order the tapes, call the library at (512) 458-7260, or email Nancy.Edwards@tdh.state.tx.us, or order on line at http://www.tdh.state.tx.us/avlib/avhomepg.htm.

- The Bottle-feeding Mentality/Breastfeeding Myths by Dr. Jack Newman (1/2" VHS-7503)
- *Breastfeeding and Guilt* by Dr. Jack Newman (1/2" VHS-7504)
- *Breastfeeding and the Internet* by Sue Ann Kendall (1/2" VHS-7505)
- Case Studies in Poor Weight Gain by Dr. Jack Newman (1/2" VHS-7506)



• Drug Therapy and Breastfeeding: From Theory to Clinical Practice by Dr. Tom Hale (1/2" VHS-7507)

A Healthy Body Suits Me

To educate families about the link between healthy eating, physical activity and diabetes prevention, Texas WIC will send a new set of materials to the local agencies for the 2003 nutrition education plan year. The Healthy Body Initiative includes the video, *A Healthy Body Suits Me*, and lessons that support four core messages. Those messages are:

- Stay active
- Turn off the TV
- Reduce portion sizes
- Drink more water

In the video, people like you and me point out that diabetes and other chronic diseases can be prevented or controlled. The lessons designed to go with the video include

CF-000-18 A Healthy Body Suits Me: Breakfast is for Champions

CF-000-19 A Healthy Body Suits Me: Bring the Outside in

Two new self-paced lessons related to healthy eating and activity will also be available.

SP-000-12 Eat to Feel Healthy and to Lose Weight

SP-000-13 Get Moving, Feel Great, Lose Weight

All local agencies will receive the Healthy Body Initiative materials in the fall of 2002. For more information call Lynn Silverman or Elaine Goodson, nutrition education consultants, at (512) 458-7444.

Santa Fe Community College offers nutrition education classes online

Interested in continuing or starting your college education?

Santa Fe Community College offers college nutrition credit in a on-line format. Check their website at www2.santa-fe.cc.nm.us/nutrition for more information. Courses offered, depending on the semester, are Introductory Nutrition, Life-Cycle Nutrition, Community Nutrition, and Diabetes Management. The course fees are WIC-reimbursable expenses.

You will need:

- ◆ Your WIC director's approval.
- ◆ Access to a computer with e-mail and Internet.
- Willingness to spend at least six hours per week devoted to each class.

Check the web address for more information or call Mary Van Eck, nutrition education coordinator, at (512) 458-7111, ext. 3484.



American Academy of Family Physicians releases position paper supporting breastfeeding

By Tracy Erickson, R.D., L.D. WIC Breastfeeding Coordinator

The American Academy of Family Physicians has always supported breastfeeding. But in March 2002, they strengthened their support by releasing the most thorough breastfeeding position paper ever issued by a large health organization based in the United States.

The AAFP begins their position paper by addressing the obstacles our country has with breastfeeding promotion, such as aggressive marketing by formula companies and erroneous messages in formula literature, the lack of reliable and useful breastfeeding data, and the lack of adequate breastfeeding training among physicians. The AAFP position paper encourages physicians to become familiar with the evidence supporting the recommendation to breastfeed. They review the evidence – not by discussing the benefits of breastfeeding – but by discussing the risks of not breastfeeding for infants, children, and mothers.

The AAFP position paper also addresses the following special issues regarding breastfeeding:

- medications and mother's milk
- nicotine and alcohol
- occupational exposure and pollutants
- infectious diseases
- maternal illness



- breast surgery
 - infant illness
 - nursing beyond infancy
 - employment and breastfeeding
 - military moms
 - breastfeeding the pre-term infant
 - teens and breastfeeding
 - adoptive breastfeeding
 - breastfeeding multiples
 - breastfeeding in diverse populations
- education of medical students, residents, and family physicians

The position paper covers three gen-

eral recommendations for all family physicians: breastfeeding promotion and education need to occur throughout the life cycle; family physicians, whether or not they provide maternity care, should establish a breastfeeding-friendly office; and family physicians should actively promote breastfeeding in the community.

The position paper also includes a long list of specific clinical recommendations regarding preconceptual and prenatal education, intrapartum support, early postpartum education and support, and ongoing support and management of breastfeeding.

To view the entire AAFP Breastfeeding position paper visit www.aafp.org/policy/x6633.xml.



Congratulations to clinics committed to Patient Flow Analysis

By Anna Garcia WIC Program Specialist

The Texas WIC program congratulates all WIC directors, Patient Flow Analysis study coordinators, and staff at WIC clinics across Texas for the time and effort spent conducting and participating in PFA studies. Spring quarter recognition goes to the following clinic teams, which continue to search for ways to improve clinic operations and to provide improved services to clients. They are committed to making a difference.

Local Agency 54, Tarrant County Health Department

Miller Street WIC Office (2 studies), Town Center WIC Clinic (2 studies), Forest Hill WIC Clinic, White Settlement WIC Clinic, New York WIC Clinic, Pantego/West Arlington WIC Clinic, Haltom City WIC Clinic, Lake Worth WIC Clinic, Bedford WIC Clinic, Euless WIC Clinic, Randol Mill WIC Clinic, Southside WIC Clinic

Local Agency 48, Harris County Health Department

Antoine Health Center WIC Clinic (2 studies)

Local Agency 36, City of San Marcos WIC ProgramSan Marcos WIC Clinic

Local Agency 37, Victoria City-County Health DepartmentCuero WIC Clinic, Edna WIC Clinic

Local Agency 3, Cameron County Health DepartmentLos Fresnos WIC Clinic

Local Agency 62, Paris-Lamar County Health DepartmentParis WIC Clinic

Local Agency 76, Outreach Family Health Services

Ennis WIC Clinic, Kaufman WIC Clinic, Greenville WIC Clinic, Pampa WIC Clinic, Perryton WIC Clinic, Graham WIC Clinic, Granbury WIC Clinic, Waxahachie WIC Clinic, Terrell WIC Clinic, Stamford Clinic, Archer City WIC Clinic, Breckenridge WIC Clinic

Local Agency 39, Smith County Public Health District

Tyler Family Care Center WIC Clinic, Jacksonville WIC Clinic

Local Agency 97, Fayette Memorial Hospital

La Grange WIC Clinic

Local Agency 1, Austin / Travis County Health Department

Parkfield WIC Clinic, Northwest WIC Clinic

Local Agency 73, El Centro Del Barrio

South Park Medical Care Center WIC Clinic

If your clinic is not listed here, conduct a PFA study, send it to the Training and Technical Assistance Division at the WIC state office, and get recognized!

New Training Opportunities

An Advanced PFA Class, developed for our veteran PFA users, and Mini Phase I PFA training for first-time users is now available.

The Advanced PFA class is recommended for PFA study coordinators, WIC directors, and WIC clinic staff who have attended Phase I and II PFA training. These individuals should possess the analysis skills necessary for reading and interpreting data on a PFA graph.

The Mini-PFA Phase I training is a condensed version of our two-day PFA Phase I Class. This four-hour course will introduce participants to the basics of PFA. This includes step-by-step instructions for conducting a study at a WIC clinic.

For additional information on these and other PFA classes, log on to the following web site: http://www.tdh.state.tx.us/wichd/tng/t-classes.htm

For a list of training dates and locations visit this site: http://www.tdh.state.tx.us/wichd/tng/t-dates.htm

For your convenience, registration is available on-line or by contacting the central office at (512) 341-4400, ext. 2246#.



Schedule of future training classes

If you would like more information on upcoming classes, contact the appropriate staff for the following classes.

Certification Classes –

Anita Ramos, (512) 341-4400, ext. 2218. anita.ramos@tdh.state.tx.us

Teaching Group Classes –

Janice Carpenter, (512) 341-4400, ext. 2248. janice.carpenter@tdh.state.tx.us

Class Management -

Janice Carpenter, (512) 341-4400, ext. 2248. janice.carpenter@tdh.state.tx.us

Professional Development –

Todd Shaw, ext. 2266; Elvia Andarza, ext. 2257; or Esther Diaz, ext. 2267; (512) 341-4400. todd.shaw@tdh.state.tx.us elvia.andarza@tdh.state.tx.us or esther.diaz@tdh.state.tx.us

Patent Flow Analysis –

Anna Garcia, ext. 2246; or Ted Manning, ext. 2274; (512) 341-4400. anna.garcia@tdh.state.tx.us or ted.manning@tdh.state.tx.us

Nutrition Training –

Shirley Ellis, ext. 2304; or Rachel Edwards, ext.2296; (512) 341-4400. shirley.ellis@tdh.state.tx.us or rachel.edwards@tdh.state.tx.us

Vendor Training –

Todd Shaw, ext. 2266; Elvia Andarza, ext. 2257; or Esther Diaz, ext. 2267; (512) 341-4400. todd.shaw@tdh.state.tx.us elvia.andarza@tdh.state.tx.us or esther.diaz@tdh.state.tx.us

For more information on breastfeeding trainings, use the web site at http://www.tdh.state.tx.us/lactate/courses.htm. To obtain a registration flyer, call (512) 341-4400 ext. 2302, fax (512) 341-4422, or e-mail hellen.sullivan@tdh.state.tx.us. For peer counselor train-

ing, contact Jewell Stremler at (512) 341-4400, ext. 2303 or e-mail jewell.stremler@tdh.state.tx.us.

Advanced CPA Training

Dec. 10-11, 2002 Austin

Advanced PFA Training

Aug. 29, 2002 Austin
Sept. 26, 2002 Corpus Christi
Oct. 10, 2002 Lubbock

Mini PFA – Phase I

Oct. 9, 2002 Lubbock

Breastfeeding

Sept. 11-13, 2002	Breastfeeding Phase I, Nacogdoches
Sept. 17-19, 2002	Peer Counselor Trainer Workshop, Austin
Sept. 23-25, 2002	Breastfeeding Phase II, San Angelo
Sept. 26, 2002	Breastfeeding Mini I, Austin
Sept. 30- Oct. 2, 2002	5th Annual Texas Breastfeeding Summit – San Antonio
Oct. 9-11, 2002	Breastfeeding Phase II, San Antonio
Oct. 15-17, 2002	Breastfeeding Phase I, Beaumont
Nov. 6-8, 2002	Breastfeeding Phase II, Nacogdoches
Dec. 3-5, 2002	Breastfeeding Phase II, Beaumont

Class Management

Sept. 3, 2002	San Marcos
Sept. 4, 2002	San Antonio
Nov. 8, 2002	Tyler
Nov. 14, 2002	Austin
Dec. 4, 2002	Amarillo

New WIC Directors' Orientation

Sept. 17-19, 2002 Austin



New WIC Staff Certification

Sept. 24-26, 2002	Austin
Nov. 19-21, 2002	Austin

Professional Development

Frotessional Development		
Sept. 4, 2002	Spanish IIIb Interpreting, Houston	
Sept. 6, 2002	Spanish II Diet Recall, Corpus Christi	
Sept. 11-13, 2002	4 Roles of Leadership, Austin	
Sept. 18-20, 2002	Spanish IIIabc, Houston	
Sept. 26, 2002	Spanish IIIa Interpreting, Angleton	
Oct. 8-10, 2002	7 Habits of Highly Effective People, Austin	
Oct. 17, 2002	Spanish IIIc Interpreting, Houston	
Oct. 31, 2002	Spanish IIIb Interpreting, Angleton	
Nov. 6-7, 2002	Supervisory Skills, Austin	
Nov. 15, 2002	Spanish IIIb Interpreting, Houston	
Nov. 21, 2002	Spanish III Interpreting, Angleton	
Dec. 16, 2002	Spanish IIIc Interpreting, Houston	
Dec. 17-19, 2002	4 Roles of Leadership, Austin	
Jan. 21-23, 2003	7 Habits of Highly Effective People, Austin	

Vendor Training

Sept. 17, 2002	Orange, Orange County Health Department
Sept. 18, 2002	Beaumont, Elmo Willard Library
Sept. 19, 2002	Jasper, Jasper-Newton County Health Department
Sept. 25, 2002	Houston, Gulf Coast Retailers Association
Oct. 16, 2002	Crystal City, Vida Y Salud Health System
Oct. 17, 2002	Laredo, City of Laredo Health Department
Nov. 5, 2002	San Angelo, Tom Green County Health Department
Nov 5, 2002 (am)	Lubbock, Groves Library
Nov 5, 2002 (pm)	Amarillo, City of Amarillo WIC
Nov 6, 2002 (am)	Midland, TDH Regional Conference Room
Nov 6, 2002 (pm)	Odessa, TTUHSC
Nov 7, 2002	Abilene, Abilene Civic Center
Dec. 3, 2002	Corsicana, TBA
Dec. 4, 2002	Tyler, Smith County Public Health District
Dec. 5, 2002	Lufkin, Angelina County Health District

Teaching Group Classes

Nov. 13, 2002 Austin

New 12 2002



Fifth Annual Texas Breastfeeding Summit

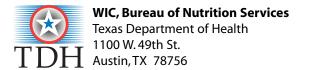
September 30 - October 2, 2002 Omni San Antonio Hotel 9821 Colonnade Boulevard San Antonio, Texas 78230 (210) 691-8888

The Fifth Annual Texas Breastfeeding Summit is in the planning stages. As more information becomes available, it will be posted on our website - http://www.tdh.state.tx.us/lactate/summit.htm.

For more information, contact Chan McDermott at (512) 458-7111, ext. 6663 or email at Chan.McDermott@tdh.state.tx.us



For information about subscriptions to *Texas WIC News*, e-mail doug.jumper@tdh.state.tx.us, or call (512)341-4400 ext. 2238#.



PERIODICALS

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