

## The Food Issue

This issue of the Link focuses on food (yes, food!) and some of the questions related to it. We'll take a look at the role it plays in our lives, in the culture of our program families, in child development, and in the relationships parents have with their children. We are excited to have the talents of guest writer Elyn Zimmerman, a Capital District nutritionist and food blogger. She shares some interesting and practical perspectives about food, what it means to us, and how it influences our parenting. The Milky Way offers ideas for nourishing the breastfeeding mom. The Research Corner gives a snapshot of Food Stamps and WIC (Women, Infants and Children) use by HFNY participant families prior to enrollment in our program. Check out the "Have You Heard" article, which includes a link to the HFNY website where you can learn more about each topic. We also have some helpful and humorous accreditation preparation ideas called "Self Assessment Tool (SAT) Survival Skills." Tioga PACT Healthy Families is our Spotlight. Read the inspiring tale of how their community has been rebuilding from the floods last year. And, as always, we have a couple of wonderful Book Corner selections submitted by program staff. We hope you will enjoy reading what we have served up for you in The Food Issue.

Thanks to all who contributed, and happy reading!  
Pam Balmer, PCANY

## A Note from OCFS

Exciting things are happening in Healthy Families New York! As you may know, we are expanding in Bronx and Erie counties. We will have the capacity to bring our successful, evidence-based program to an additional 300 families as a result of the federal Maternal, Infant, and Early Childhood Home Visiting Program (MIECHV). The needs assessment developed by the Department of Health identified 14 counties as 'very high need' and therefore, additional funds may be available through a Request for Applications released by the State Department of Health. Stay tuned for more information.

Healthy Families America (HFA) Accreditation is HERE! I am sure that you have experienced your program managers and supervisors asking you for information, observed them pulling reports from the data system, and have seen them locked up in their offices clicking away on their computers, looking a bit bleary eyed. Through a wonderful collaborative effort of the Central Administration partners (Office for Children and Family Services, Prevent Child Abuse NY, and the Center for Human Services Research), on February 15, we sent our self-assessment and evidence to HFA. In late March, two directors from HFA came to OCFS to review files, the data system, training records, protocols, policies, and meeting minutes, and to meet with advisory board members and Central Administration staff. Now it is the program sites' turn! During July, August and September, peer reviewers from all over the country will visit 10 HFNY programs to see what our New York program is all about. They'll visit the following locations: Herkimer County, Clinton County, the South Bronx, Rensselaer County, Ulster County, Madison County, Chemung County, Broome County, Allegany-Cattaraugus Counties, and Cayuga-Seneca Counties. The peer reviewers are very impressed with what they have seen so far and we know these program sites will impress them even more!



Photo credit: Pam Balmer

The theme of this issue is food. Nutrition is a hot topic these days, especially with the obesity epidemic we're facing as a country. Healthy Families New York promotes the value of good nutrition for everyone, whether pregnant, parenting, an infant, a young child, or a breastfeeding mom. Through our work, we provide the tools and information for families to be more "Healthy" families. Enjoy this beautiful time of year and the healthy, nutritious bounty that it brings!

-- Bernadette Johnson

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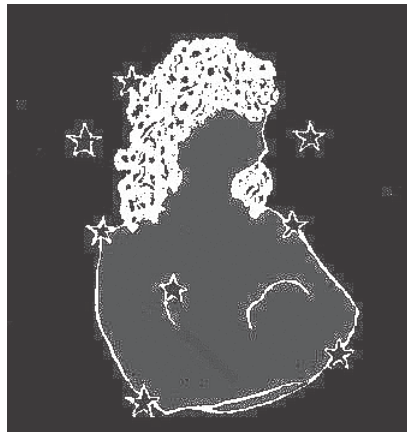
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# The Milky Way

## SOUL FOOD FOR NURSING MOTHERS

Rayza DelaCruz-Stitt, RN, MSN,  
Program Director Bushwick Bright Start

*Dating back to the beginning of time, breastfeeding mothers have been nurturing the human race with the nutrients we need to live and grow into healthy, strong human beings. When one thinks of this continued act of selflessness and compassion, one has to wonder how women have maintained this strong history of giving.*



### WHAT DRIVES AND SUSTAINS THEM?

We asked the staff at our program to help us think about the ingredients of a mentally fit, happily fed, breastfeeding mother. Some were actual foods while others were less tangible, like those provided by nurturing relationships. We filled up the breastfeeding mother's plate (similar to the USDA's new MY PLATE) with healthy foods, affirmations, family participation, and support and appreciation. And don't forget, both stay-at-home and working breastfeeding moms need these important ingredients!

**ADRIANA:** Help her nourish her soul by reminding her to have eye contact with her baby. Help her remember to slow down.

**AIDA:** Give her an avocado-foot wrap while she is nursing. Boil cinnamon or another preferred herb to provide aromatherapy during nursing.

**YOLANDA:** While nursing, create a "family breastfeeding moment" by having siblings nearby. She will feel nourished by her family's presence and affection.

**TAMARA:** Family members can take on additional tasks, such as running errands for the nursing mother.

**MARTHA:** Give her an avocado facial before or after nursing. Offer her healthy baked kale chips.

**LOIDA:** Provide her with an inspiring book such as *Chicken Soup for the Mom's Soul*.

**MARLENE:** Provide a "magical space" for the nursing pair at home and at work when she's pumping, and include a rocking chair and soft music.

**MARIA:** The home visitor can support the supporter: give Dad ideas on ways to show appreciation for her gift of nursing his baby. Get lots of tips from the Milky Way in the Winter 2012 issue of the Link "My Breastfeeding Dad."

**BETSY:** The home visitor can provide the mom with information about healthy foods to eat while nursing and introduce the new USDA "My Plate" healthy eating format.

**RAYZA:** When she releases the "love hormone" (oxytocin), it creates a magical moment with her baby.

**REBECA:** Provide mom with affirmations about her mothering while she nourishes her baby. It helps when she is praised by her partner, the home visitor, and the community.

All of these "ingredients" provide the ultimate comfort food for nursing moms!

# the Link

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# Nourishing Ourselves

*Elyn Zimmerman, BS, CDN*

Why is this question of nourishing ourselves so difficult? We all know there are some basic concepts surrounding the care and feeding of the human being, but the truth is we do not come with an owner's manual. Therefore, as we move through life, requiring food for both physical and emotional survival, we respond to our needs with a twist, basing it on our own personal and cultural experience. Clearly some confusion occurs along the way. The issue becomes even more complicated when we are faced with having to nourish others—as pregnancy and parenthood require.

Adopting a human development perspective provides us with an interesting glimpse of this issue. For instance, many of our food tendencies, the crux of who we are as eaters, begin while we are still in our mothers' wombs. Our chromosomal template influences not only our body size and shape, but other subtle biological processes, like how efficiently our metabolisms burn and how we interpret being full. Our ability to resist a piece of chocolate cake and our taste bud sensitivities are apparently even coded in our DNA. Our first eating experience really happens at Mom's Diner. Certain aspects of the maternal milieu—our intrauterine environment—including our mother's diet, her body's ability to regulate blood sugar and overall calorie availability, will have an effect on our culinary inclinations and feeding behaviors.

And that is only the beginning. After we are born, the external messages we receive about food and eating, and their connections to love, comfort, stress, and health begin to layer on—from our first suck at the breast or bottle and throughout our lives.

It takes quite a few spins around the sun to be able to step back and assess the how and why of our eating habits—and this is an assessment we undertake usually only when things seem to have gone amiss. Otherwise, our eating is as seemingly unconscious as breathing. However, our modern, often chaotic lifestyles coupled with a food supply that has become excessively altered and processed, make navigating the food and eating landscape more complicated. Chances of things going amiss have increased. The simple act of nourishment has been transformed into a highly complex art.

The consequences of a society-wide, compromised diet are actually quite profound and still largely overlooked. It is difficult to appreciate all the ways poor eating affects our health. Focusing on weight issues, as we now tend to do, overshadows other concerns that are highly prevalent among adults and children as well. As a nutritionist who has been working in clinical and community settings for many years, I frequently work with people seeking care for behavioral problems, depression and mood disorders, eczema, asthma, frequent illness, digestive problems, and inflammatory pain and headaches, as well as high blood pressure and diabetes. These common conditions are usually medically treated without any evaluation of dietary habits or deficiencies.

As we all know, it is very easy to blame the victim. The victims, unfortunately, are likely to be the poor and disenfranchised. Though fingers commonly point at the individual, much of the dismal state

of affairs regarding nourishment in this country is due to policies related to agricultural subsidies, advertising, food manufacturing, school lunch programs, food accessibility and health care. Most people do not have the financial or personal resources necessary to battle or to avoid the conditions that perpetuate poor dietary intake. It is also important to acknowledge that when lives are impacted by significant emotional pain or limitation, food plays a central role as a source of pleasure and comfort.

That being said, I am glad to report that many of the main nutrition messages of the day seem to be getting through to people. Many adults and kids with whom I work seem to know most of the new health mantras and are even adopting change, thanks to increasing education and the availability of a multitude of new resources. For example, a young girl recently taught me a catchy phrase that she had learned about looking at food labels—Read It Before You Eat It! There is increased awareness about whole grain products, fruits and vegetables, excessive starchy carbohydrates, low-fat dairy, increased physical activity and even high fructose corn syrup. I am often impressed by children's ability to identify many fruits and vegetables—and that, contrary to popular belief, they even like many of them! So, I encourage you to keep up your great efforts.

However, there is still work to be done. How can those of you assisting families in all matters pertaining to nurturance best guide yourselves, let alone others—particularly given that so much is out of our control? What can we take personal responsibility for and help others do as well? While nutrition education may appear straightforward, the integration of nutritional intelligence is a very different story.

In considering assisting others with feeding issues, be mindful that someone's eating habits are a very personal and intimate matter. There is probably no other activity that we do with so much community and yet in such isolation as feeding ourselves. Having this intimate act exposed and possibly criticized can be quite intimidating and scary. It is understandable that this may provoke resistance. Recognizing and acknowledging that we are all imperfect eaters—and that there is no one standard for perfect eating—and that we are all on a journey with the care and feeding of our bodies, levels the playing field and can help open up an often exciting, refreshing and more respectful conversation on this topic.

You can also acknowledge your power as a role model; our own relationship with food sends a strong message to others. You can assess your own food behaviors and think about how you want to reconcile them with your role in helping the families you visit. An example of this might be soda drinking. Increased consumption of highly sweetened drinks—and especially soda—has significant widespread and negative consequences on human health. Part of the problem is that these products are widely available, relatively cheap, and very addictive—and quite legal. Though we are protective of our right of personal choice, consider if keeping a soda on your desk in view of your participants or serving them at program events is a behavior you wish to be promoting.

Many common practices contribute to feeding and nutritional

## Nourishing Ourselves, *continued*

imbalances. Some problems I frequently encounter include: inadequate kitchen and dining space, a lack of cooking and measuring supplies, limited access to healthy foods and physical activity, and the absence of structured meal times. Additionally, there is an excess of sugary, processed, fast and additive-laden food (watch for MSG in Ramen Noodles and Sazon seasoning, for example), excessive time sitting still, in front of the TV or computer, for example, and a strong tendency toward emotional and stress-based eating behaviors. Identifying and finding solutions for these is important.

Many family eating issues can be addressed by acquiring an understanding of the roles and responsibilities of the parent and the child in the feeding relationship. I strongly encourage readers to look at the work of Ellyn Satter, author of many books on childhood feeding including, *Your Child's Weight: Helping without Harming*. She describes what she calls the "Parent/Child Division of Feeding Responsibilities." Essentially, the parent is responsible for the what, where and when, while the child is responsible for the how much and whether. Giving this as an outline for parents would help address both the substantive, logistical, and emotional issues of how we are feeding ourselves and our children, and how we are teaching our children to feed themselves. (see sidebar)

In *Healthy Families New York*, breastfeeding is actively encouraged through educational, promotional and supportive activities. Both parent and child intuitively learn many important aspects of feeding and nourishment in this relationship and many of the problems associated with infant feeding can be more naturally avoided.

In closing, may I suggest that we ponder what nourishment is? Ask your participants the following: How would you like to nourish yourself in this pregnancy? How do you picture feeding this baby after it is born? What type of foods do you consider helpful or harmful? Would you feed your child differently than you feed yourself? Do you think you might need to make some changes in your own diet for the sake of your child? What are your favorite foods? What does food mean to you? Sit back and see where the conversation goes. I promise you, it will be interesting.

Though food is not the only means by which we nourish and sustain ourselves, it is a powerful one that requires daily input. It is well worth our contemplation.

*Elyn Zimmerman, BS, CDN, has worked for many years with women, children and families in the Capital District. She is affiliated with Whitney M. Young, Jr. Health Services in Albany, a community partner of the Healthy Families Albany County program and has her own practice at Lifeseeds Nutrition Counseling. Sympathetic and sensitive to the vagaries of how and why we eat, she is committed to helping mere mortals with the colossal task of developing a peaceful relationship with food and eating. Check out her blog at [www.lifeseedsnutrition.com](http://www.lifeseedsnutrition.com). We are grateful to her for donating her talents to this issue of The Link.*

### Parent/Child Division of Feeding Responsibilities

#### THE PARENT'S JOB IS TO:

- Choose and prepare the food
- Provide regular meals and snacks
  - Make eating times pleasant
  - Sit and eat with the child(ren)
- Show children what they need to learn about food
- Not let children graze for food or beverages between meals and snack times
  - Let children grow up to have the bodies that are right for them
    - Do not feed children differently
    - Do not make a child feel deprived
- Allow for treats on an occasional but regular basis
- Accept and value your child now-whatever their size
  - Limit screen time
  - Role model and provide physical activities
- Eat in the kitchen or dining area and without a TV on
- Accept and value your child now-whatever their size

#### THE CHILD'S JOB IS TO:

- Eat the amount they need
- Choose what they will eat—given appropriate choices
  - Choose if they will eat

# Have You Heard?

Caroline Chant, PCANY

## SOME OF THESE FACTS MAY SURPRISE YOU

### HAVE YOU HEARD THAT FROZEN VEGETABLES ARE LESS NUTRITIOUS THAN FRESH ONES?

FACT: Just-picked veggies do have more vitamins and minerals, but nutrient levels drop during shipping and storage. And they sink even further if you add on the days that the produce lingers in your crisper. Frozen veggies, on the other hand, are usually picked ripe and immediately flash frozen, so they retain most of their nutrients. Still, the best way to get the most nutrients from your vegetables is to eat fresh ones that are grown close to home. Buy your produce at local farms or farmers markets. Many of them now accept Food Stamps and WIC.

### HAVE YOU HEARD THAT FAT FREE = CALORIE FREE?

FACT: Many would like to believe that just because something says it is fat-free they can eat as much of it as they want. What they do not realize is that it may have just as many-if not more-calories than the regular version. It is very important to read nutrition labels in order to find the serving size and number of calories present in the food. Some fat-free foods add things like sugar, flour, or starch thickeners in order to improve the flavor. These additives may cause you to gain even more weight than if you were to consume the normal versions because they have more calories.

### HAVE YOU HEARD THAT FRUIT JUICE HAS LOWER CALORIES THAN OTHER DRINKS?

FACT: Drinking one glass of fruit juice each day is the equivalent of one soft drink with 110 to 180 calories. Fruit juice has been linked in the U.S., Australia and Spain to increased calorie intake and higher risks of diabetes and heart disease. Drinking lots of fruit juice contributes to weight gain and increased health risks, but eating a piece of fruit provides vitamins and fiber, and, best of all, when weight loss is desired, it tends to reduce intake of other food. Look carefully because many fruit juice beverages are “fruit drinks” or “fruit cocktails” and are just sugary beverages that deliver extra calories — all from refined carbohydrates — without satisfying appetite. And this is true whether you drink apple or orange juice or one of the fancy new juices like acai berry or pomegranate juice.

### HAVE YOU HEARD THAT EATING EGGS RAISES YOUR CHOLESTEROL LEVELS?

FACT: Dietary cholesterol found in eggs has little to do with the amount of cholesterol in your body. Dietary cholesterol, the fat-like molecules in animal-based foods like eggs, doesn't greatly affect the amount of cholesterol circulating in your bloodstream. Your body makes its own cholesterol, so it doesn't need much of the kind you eat. Instead, what fuels your body's cholesterol-making machine is certain saturated and trans fats. Eggs contain relatively small amounts of saturated fat. One large egg contains about 1.5 grams saturated fat, a fraction of the amount in the tablespoon of

butter many cooks use to cook that egg in. So, think twice before cutting eggs out of your diet, as they are a rich source of 13 vitamins and minerals.

### HAVE YOU HEARD THAT CARBOHYDRATES WILL MAKE YOU FAT?

FACT: It was once thought that the key to weight loss was eliminating all high-carbohydrate foods, including pasta, rice, and potatoes. We now know that carbohydrates are the body's preferred energy source. Eating a potato, or any type of carbohydrate-rich food, won't automatically make you fatter. However, if you are watching your weight, enjoy potatoes in moderate quantities and be careful of how you eat them. For example, butter and sour cream are high in fats.

### HAVE YOU HEARD THAT BODY WEIGHT IS A RELIABLE INDICATOR OF A HEALTHY DIET?

FACT: No two people have the same body composition. The measure of a person's diet and overall health is a combination of factors, including weight. Researchers found that almost one-quarter of adults who were classified as ‘normal’ weight had indicators for one or more of the risks usually associated with being overweight such as elevated blood pressure or higher levels of triglycerides, blood sugar and cholesterol. And slightly more than half of adults considered overweight were deemed metabolically healthy. Weight is an important indicator to look at but it's no secret that thin people can have heart-related problems and heavier people often do not. We need to look at many indicators to determine someone's risk factors, not just weight.

### HAVE YOU HEARD THAT AS LONG AS A FOOD PACKAGE SAYS ‘ALL NATURAL’ IT'S HEALTHY TO EAT?

FACT: Even if something is labeled “all natural,” it can still contain tons of sugar, unsaturated fats, or other things that can be bad for you. Some snacks labeled “all natural” can contain just as much fat as a candy bar! It's important to practice reading the BACK of the package, where the Nutrition Facts label and ingredients list will spell it all out for you. Learning to understand the labels is a great activity to do with HFNY participants.

Sources: American Dietetic Association, Women's Health Magazine, It's My Life: PBS kids, Forbes.com, ourbodiesourblog.org

# Spotlight on Tioga Healthy Families



From top to bottom: Kim Kappler, Maria Carroll, Leanne Schneider, Sue Hanye  
*Photo by Debbie Rowley*



From top to bottom is Rachel Harendza, Lizz Lynch, Lori DeLucia, and Matthew Brown  
*Photo by Kim Kappler*

## TIOGA PACT HEALTHY FAMILIES MISSION STATEMENT

We commit ourselves to serving all persons with special attention to those who are poor and vulnerable. We are advocates for a compassionate and just society through our actions and our work which provides the baseline for the parallel process provided by staff.

Tioga County is located in southwestern New York State, west of Binghamton and on the border with Pennsylvania. We receive funding from the New York State Office of Children and Family Services and Our Lady of Lourdes Memorial Hospital, Inc.

Lourdes Hospital is a member of Ascension Health, a large multi-site national health care organization. Lourdes offers our staff a generous tuition assistance program and many of us have taken advantage of this for professional development over the years. Lourdes Hospital also contributes to our program by subsidizing costs not covered by our grant, like providing each staff person with their own computer and technical assistance. In addition, as salaried employees, each home visitor is allowed the flexibility to control their own schedule, which allows them to meet program families'

needs, for example by making evening visits.

Each member of our staff brings a different educational background and unique experiences to our program, both personally and professionally. Our staff is as follows: Susan Hanye, Program Manager, Kim Kappler, Supervisor, Maria Carroll, Family Assessment Worker, Matthew Brown, Fatherhood Advocate, and Lori DeLucia, Rachel Harendza, Elizabeth (Lizz) Lynch, and Leanne Schneider, Family Support Workers (FSW).

Budget Travel Magazine voted Owego, NY, the county seat of Tioga County, the "Coolest Small Town in America" in 2009, receiving nearly a quarter of all votes! You can view the comments of people who voted for Owego at <http://coolestsmalltown.com/Testimonials>

Owego boasts a new River Walk, a revamped waterfront area with new storefronts and amenities along the Susquehanna River. Owego is the type of place where few people lock their doors and open them up to help out strangers in need. The former county jail has been transformed into a restaurant where you can have a pulled pork sandwich in what used to be a cellblock, a creative use of an empty building. Then, on September 8, 2011, the scenery of Tioga County as we-staff, participants, and community-all

knew it, was forever changed. Our "Coolest Small Town in America" experienced unimaginable devastation from the floods that ravaged many parts of New York.

It started as just a normal day in the office on September 7; then the rains just got harder and longer, and didn't let up. Staff came back to the office with stories from the field about how heavy the rains were and how upon leaving a home visit, mud was flowing down driveways that had been clear when they had arrived just an hour before.

When the flash flooding began, Tioga County's main town, Owego, was shut down. Staff gathered together and brainstormed a back way out of town by driving over the mountain. There were boulders that had been carried by the heavy rains in the middle of the road. We all cautiously drove, trying not to panic, as the roads were being closed right behind us. After what was an hour and half journey for some, everyone made it home safely.

On September 8, the devastating results of these rains were broadcast to the rest of the world as shown in this YouTube video: <http://www.youtube.com/watch?v=2nk4ID-DTYk&feature=related>. Some staff members were evacuated from their homes and others were stranded without power, cable, or phones. In Owego, 1200 out of 1600 houses were flooded, seven out of 11 Primary Care Provider's offices were flooded, all pharmacies in Owego and Apalachin were flooded; all food stores in Owego, Apalachin, and Newark Valley were flooded; and all gas stations in Owego and Apalachin, except one, were flooded as well.

Tioga PACT Healthy Families staff is fortunate to have great relationships with many human service and community agencies, including the Department of Social Services, mental health services, and public health nurses. These relationships allowed staff to better assist families with the process of obtaining emergency food stamps, referrals for necessary shelter items and other items, and services families needed. Staff also did community outreach at local supply stations that were set up with supplies and meals for the community, hoping to locate displaced program families.

## Spotlight on Tioga Healthy Families, continued

### A Participant's Story about surviving the September Floods

One program family shared their story of how they survived the days after the flood. "My neighbors did not really know each other until after the flood. There really aren't many of us that have much and we had even less after the flood. Many people in my neighborhood got together to figure out who had what and we survived the next 7 days until power was restored and the water was good to drink. There was a truck that came around usually two times a day with bottled drinking water and someone was always there to get it in the neighborhood and it was placed so everyone would have access to it. There were people with babies and young children that just couldn't go to the truck so we took turns. One of the neighbors had a swimming pool and that water was used to flush toilets. Some people had gas BBQ grills and they made up a community area with the grills. Everyone came together at dinnertime in the neighborhood and cooked hot food. The people that had food would share it. There were people there that lost everything and did not even have a place to sleep, and others made room for them until arrangements were made for shelters. We really came together; we survived!"



Photo from Google Images

It has now been months since the flood. Tioga PACT Healthy Families program has experienced many families moving out of Tioga County because of the housing shortage. Both our program and Tioga County continue to rebuild. The clean-up looked like World War III for weeks, with dump trucks, heavy equipment, and the National Guard. Although the 1200 houses have not been rebuilt, the Primary Care Providers' offices are now open; one is relocating and rebuilding and soon to open. Residents can once again get their prescriptions filled, and the grocery stores are cleaned up and open for business. People can once again buy gas to get to these places.

Tioga County is resilient and is re-building the "Coolest Small Town in America" and our Healthy Families program is part of it!

### HERE'S A LITTLE BIT OF WHAT MAKES US WHO WE ARE:

**SUSAN HAYNE:** I'm an 'old timer' and have worked in a Healthy Families program since 1995, including experience in a program outside of New York State.

**KIM KAPPLER:** I look forward to new challenges and rewards with Healthy Families New York and believe it is a program that can truly make a difference in the lives of families.

**MARIA CARROLL:** My passion is to teach and educate parents on child development and guide them in knowing they are their child's first teacher.

**MATTHEW BROWN:** I've found it worthwhile and rewarding to work specifically with fathers.

**LORI DeLUCIA:** I'm passionate about issues involving children and look forward to continuing my work in this field.

**RACHEL HARENDZA:** This FSW position is my first job in this field and I've learned a lot!

**LIZZ LYNCH:** I feel like being an FSW has helped me grow and become a better parent.

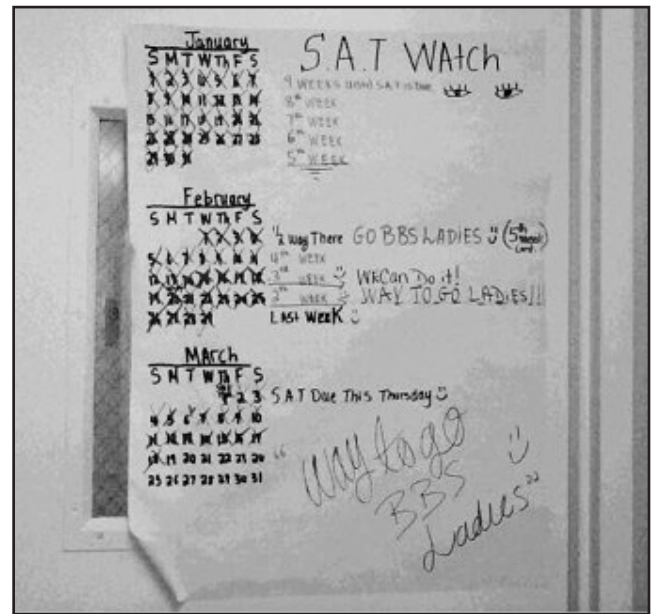
**LEANNE SCHNEIDER:** I look forward to many more years helping the community.

# SAT Survival Skills!

Congratulations to all of the HFNY sites for completing their Self Assessment Tools (SAT), the first stage of the Healthy Families America accreditation process! The purpose of accreditation is to ensure that the Healthy Families America name, and the programs that use it represent a deep commitment to delivering the highest quality services possible to families and children. The task of completing the SAT is huge. It requires many hours of staff time to gather evidence of all of the great work programs do and demonstrate adherence to the high standards set by HFA and HFNY. Here are some of the ways programs 'survived' this process.

Emily Mann, Program Manager for University Settlement's Healthy Families Program said, "My survival skill is to bless John Heck for the evidence grid he created!"

Stacy Smith, Program Manager, Healthy Families Otsego County approached the SAT by networking with and asking questions of program managers from the Healthy Families programs in Delaware, Rensselaer and Albany Counties. They all met to go over Critical Elements 1-6 and compare each other's 'products.' Stacy shared, "During a team meeting back at my site, we took the assessment elements and pinned them on the wall. We then talked about our strengths and barriers to each element." She advises, "Swallow your pride and don't be afraid to ask the younger staff for some technology tips! Working WinZip files and flash drives is not my forte!"



Bushwick Bright Start starts SAT calendar.

Bushwick Brightstart Healthy Families had a post-SAT Stress Management Workshop. Tamara McDonald, home visitor, said, "This was an amazing idea. We were able to learn about free resources that our organization, Public Health Solutions, provides to all staff members including counseling services. The workshop focused on work, family, and individual stressors that we all encountered during the SAT process and that might still be affecting us today. We were able to express and think about solutions to our stressors and together, identify better practices to decrease stress. My personal favorite was the breathing exercises. Although this workshop was only an hour long, the information we gained can serve us all for a lifetime."

During a staff meeting last year, home visitor Tamara McDonald came up with a visual aid to help Bushwick Bright Start stay on top of preparations for meeting the SAT due date. They created a calendar that they kept in a place where everyone could see it. Tamara said, "Staff members agreed that seeing a huge calendar would help them stay focused and serve as a reminder to enhance the team approach. Every day different staff members would cross out the days that had passed, and write encouraging words to motivate us."

Esther Piper, Program Manager, BHSN/Early Advantages Healthy Families said, "I have to say that one of the most important things I need to remember the next time around is to start working with the governance, training and supervision elements before I do anything else, since, as a Program Manager, I am not in as much direct 'control' over those elements. There is more coordinating with other entities to get the information you need. I think our Central Administration gave us a great deal of support. This is my 3rd accreditation process with an HFA program and I think we were given confidence and trust. The process went smoothly and the information was accurate. Thanks to John Heck and his crew for the system reports! I believe that now that we are have our SATs together, we can be confident that we have a strong program in the state. We are pretty amazing!"



# The Research Corner

The data table below offers a snapshot of how the different HFNY regions look with respect to WIC (Women, Infants and Children, a nutrition program for pregnant women and infants) and Food Stamps, prior to enrollment in our program. There was also variation within regions, where individual programs had high or low percentages compared to the rest of the programs in their region. For example, 96% of the families in Healthy Families Chemung were already receiving WIC at intake compared to 89% of the families in the rest of the Central Western region. Terri Comfort, Program Manager, shared, “Many of our families already have WIC at the time of assessment and if not, the Family Assessment Workers (FAWs) will refer them. When that happens, we note that our program is the reason they were already receiving WIC. We do get some referrals from WIC, but the majority of our prenatal referrals come from the MOMS program. The OB/GYN’s will refer to MOMS and then MOMS starts the referral process for needed services like WIC and Healthy Families.”

Healthy Families Morris Heights also has very high WIC numbers compared to the rest of the Metropolitan region. Ninety-seven percent of families in their program have WIC at intake compared to 88% of the rest of the region (the lowest percentage in the region was 67%). Sandra Martinez, the Program Manager at HFMH, relates their high numbers at intake to the WIC department being located across from their building and working very closely with her program. “We do our rounds for outreach at the three WIC locations and make good connections with WIC staff to facilitate this connection.” One of the WIC supervisors recently joined their Advisory Board and Sandra says that this has strengthened their outreach possibilities. “Essentially, we serve a community that is ranked as the highest district of poverty level nationwide. Most families we interact with are low income and likely are eligible for services.”

The average percentage for Food Stamps in the Central Western region was 61% while Healthy Families Steuben had only 43% enrolled at intake, the second to lowest percentage for the region. Lisa Galatio, Program Manager, spoke with her staff who said, “We know some families are relying on area food pantries and not applying for Food Stamps.” She also shared, “Our nutrition outreach program is very good and will even do home visits to sign people up for Food Stamps. We encourage families to use this service. Home visitors say that our nutrition outreach program is very responsive once they get a call or referral. Staff also mentioned that they often hear of families applying for Food Stamps, but that they end up making just \$10 or \$15 over the cutoff and being ineligible. This is the reality of the working poor.”

Parkchester Healthy Families has 79% of its families on Food Stamps at intake. Soraya Lithgow, Program Manager, says that it is interesting that people are eligible for food stamps even though they are working. “Their salaries are not high enough to feed a family of 3 or more, especially with all of the single-parent families. Child care is also very expensive so it sometimes makes it hard to afford to work.”

For the Mid Hudson region, the average enrollment in Food Stamps is 45%, whereas 70% of the families in the Newburgh Healthy Families program are already receiving food stamps at intake.

Interestingly, the Middletown Healthy Families program in Orange County has 37% of families on Food Stamps at intake, the second to lowest percentage in the region. Lauren Owens, Program Manager for Newburgh and Middletown Healthy Families finds it interesting to look at the comparison between their Newburgh and Middletown programs. Both are in the same county, but demonstrate very different access to and use of resources.

Newburgh faces many challenges with crime, specifically drug and gang involvement, yet, Lauren says, “At the same time there is a strong sense of community.” Newburgh has a poverty rate of 28% and an unemployment rate of 10% and of course this impacts participants’ income. There are limited employment opportunities within the city of Newburgh; there are no large industries or corporations. The greater percentage of our participants has an education of a high school diploma/GED or less.” Lauren explained, “As we see the increase in the job’s requiring a college education, our families are increasingly challenged with finding employment. The jobs available are often minimum wage, which allows families to meet the income guideline for Food Stamps. The majority of the families that we serve do not have transportation and as Newburgh lacks a

HFNY PARTICIPANTS WITH INTAKE RECORDS ENROLLED IN 2011

Region	Participants with Intakes	WIC at Intake	Percentage on WIC at Intake	Food Stamps at Intake	Percentage on Food Stamps at Intake
Capital	508	455	0.9	301	0.59
Mid Hudson	342	276	0.81	155	0.45
Metropolitan	718	630	0.88	391	0.54
Central Western	542	484	0.89	330	0.61
New York State	2110	1845	0.87	1177	0.56

*Data for table compiled by Eunju Lee, Senior Research Scientist with the Center for Human Services Research.*

formal transportation system, they are further limited in potential jobs.”

Many families have resided in Newburgh for most of their lives, and their parents and grandparents have received Food Stamps. Lauren shared that there is a ‘generational impact’ on program families’ use of Food Stamps as a resource. The local Department of Social Services office in Newburgh is centrally located within the community; most of our participants are able to walk to the office. This makes applying for Food Stamps more accessible for our participants in Newburgh than in Middletown.”

From May through October there is a farmers market in the center of Newburgh, and families are able to purchase produce using Food Stamps. Beginning in May, and for six weeks, Newburgh Healthy Families is very excited to be hosting a Nutritional Series. They will have an educator from Cornell Cooperative Extension come in weekly to meet with participants. During the series, families will receive information on budgeting, cooking healthy, creating meal plans, and general nutrition.

*By Ellen Butowsky with data provided by Eunju Lee at CHSR*

# The Roving Reporter

What food traditions do you have in your family and where do you think they come from?



I am Korean and a tradition of ours is every New Year we eat Rice Cake Soup. In Korea, we believe if you do not eat it, you will not age one more year. In this country, people might not think that's a bad thing because people want to stay young. In Korea, the older people are given lots of respect so eating the Rice Cake Soup to make sure you age is a good thing.

*Eunju Lee, Senior Research Scientist, Center for Human Services Research*



We have a special cake for birthdays. It's a chocolate cake with chocolate butter cream frosting. There are balls made out of chocolate icing rolled in sprinkles around the top of the cake that resemble fur balls, so the cake has been named the "Fur Ball Cake." Every member of our family gets a Fur Ball Cake on their birthday.

*Tina Tison, FSW, Middletown Healthy Families*



For my family, spiced fruit bun with Jamaican cheese is a must every Easter. This tradition was passed down through my husband's family from Jamaica. Since no stove can be lit on Good Friday we don't cook and so this is what we eat from Good Friday through Easter Sunday. Then, on Easter we have curry goat, rice and peas and, yes, more spiced fruit bun and cheese in celebration.

*Lesley Nelson, FSW, Healthy Families Albany County*



In many African-American households we have our traditional New Years Day meal every year. It includes pork and black-eyed peas and collards, eaten to ensure prosperity throughout the year. This tradition dates back to slavery times and has been passed down for generations.

*LaSonya Cromartie, FAW, Newburgh Healthy Families*



One of the best and oldest traditions we've passed down to my children happens during Easter, one of the biggest holidays of the year in the Greek Orthodox Church. First we dye enough red eggs for each person in the family. Then during the Easter meal, the patriarch of the family starts the "egg game" by picking a dyed egg, and then everyone else picks one too. He then goes around the table and hits someone else's egg with his. The person whose egg cracks is out of the game and the person whose egg didn't crack moves on to the next person. The person whose egg doesn't crack is the winner and is considered to have good luck coming for many years. It's amazing to see how excited (and competitive) even the adults get during this game. Such fun!

*Demetra Alberti, Assistant Program Manager, Healthy Families Delaware County*

# Farewell Susan Mitchell-Herzfeld



Retiring after 30 years with OCFS/DSS will be bittersweet for me. It will be sweet because I will be leaving behind the stresses and frustrations of working in a large government bureaucracy, and I will be able to spend more time with my family and doing the things I love. But it will be sad because I will also be leaving behind a project that has been close to my heart for more than half of my career—the Healthy Families New York evaluation. I was introduced to HFNY in 1994, when then-Coordinator Joy Griffith asked me to design an evaluation of a home visiting program that had just been authorized by the legislature. I recommended that a randomized controlled trial, or RCT, be used to evaluate the effectiveness of the program. Unable to garner the necessary support for an RCT at that time, I suggested that we instead develop a Management Information System to enable us to describe the families served, document the home visiting services provided, and track the outcomes for families. We contracted with the Center for Human Services Research to create the Management Information System, which soon began to play a critical role in program management, performance monitoring, and continuous quality improvement. It has earned accolades from Prevent Child Abuse America for its comprehensiveness and innovativeness.

In 1999, facing increasing pressure to provide convincing evidence of HFNY's effectiveness, I again recommended that an RCT be conducted. This time, Joy Griffith and I succeeded in persuading

OCFS administrators to allocate the necessary funds. Thanks to the efforts of the Buffalo, Rensselaer, and Ulster HFNY programs, the research team at OCFS and CHSR, and the Central Administration team, we were able to launch the RCT in March 2000 and conduct several waves of follow-up through the child's 7th birthday. The considerable investment of time, effort, and money in the RCT has certainly paid off. The RCT has produced definitive evidence that HFNY is effective in reducing child abuse and neglect, improving parent-child interaction, and in promoting child health and development, leading to HFNY's designation as a proven program by RAND's Promising Practices Network, and national recognition as an exemplary Healthy Families America program. Having solid proof that HFNY works helped it escape the sharp budget cuts that so many other programs experienced during the recent economic downturn.

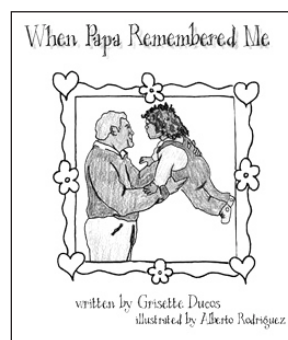
My work with HFNY has been the most rewarding experience of my career because I know I made a difference in the lives of vulnerable families by helping HFNY survive and grow. I want to express my appreciation to all of the home visiting managers and staff, the Central Administration team, and the research team who have worked so hard to make the program and the RCT a success. I will miss you all!

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## The Book Corner

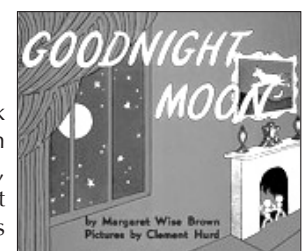
*When Papa Remembered Me*  
By Grisette Ducos

I have known Grisette Ducos, the author of *When Papa Remembered Me*, since we were little girls. I actually met "Papa" from the story. He was a humble, happy, and positive man who became ill with Alzheimer's disease. This book tells the story of his illness through the eyes of his granddaughter, who comes to realize that our loved ones are never really gone as long as we remember them. It was really hard for the family to deal with Alzheimer's disease. This book can help to support families who are dealing with a debilitating disease in a loved one. It is a great book for families with children older than five years.



*Goodnight Moon*  
By Margaret Wise Brown

I enjoy using this book in my work because I loved to read it to my own children. It is wonderful and simple, with great illustrations by Clement Hurd. It tells the old yet timeless story of a child saying goodnight to everything around him: "Goodnight room. Goodnight moon. Goodnight cow jumping over the moon. Goodnight light, and the red balloon..." I am able to demonstrate a parenting skill (reading with your children!) with the families I work with through the simple process of sharing a book.



*Submitted by Rayeann Fox, FAW/FSW,  
Healthy Families Delaware County*

*Submitted by Marlene Sierra, FSW,  
Bushwick Brightstart Healthy Families*

# theLink

## Summer 2012



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## In the Next Issue

In our next issue, we will learn about Healthy Families New York through the eyes of program participants. We're excited to share what we've learned, and especially to offer you the unique perspective of some HFNY home visitors who started off in our program as participants. Until next time...

## Letters to the Editor

We want to know what you think! What thought or question or idea did the Link spark for you? Help the Link editors satisfy their curiosity, and perhaps start an interesting conversation while you're at it. You can send your Letters to the Editor to Pam Balmer at [pbalmer@preventchildabuseny.org](mailto:pbalmer@preventchildabuseny.org). Thanks!

"Imperfection is beauty, madness is genius and it's better to be absolutely ridiculous than absolutely boring."

-Marilyn Monroe, *Marilyn: Her Life in Her Own Words*



Drawing by Charlotte, Age 7