



the Link



the children of today are tomorrow's parents *los niños del presente son los padres del futuro* *les enfants d'aujourd'hui seront les parents de demain*

The Asthma Epidemic

Affecting Children in Poverty

Pam Balmer
Prevent Child Abuse New York

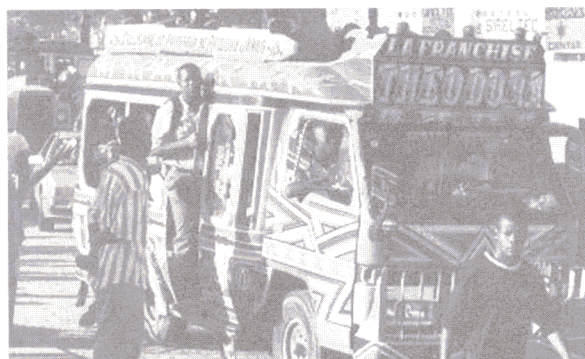
The Harlem Children's Zone Asthma Initiative has made a startling observation. With Harlem Hospital, the Mailman School of Public Health at Columbia University, the New York City Department of Health, and Dr. T. Barry Brazelton, the Harlem Children's Zone set out to study the incidence of asthma in a 24-block area of Harlem. The goal was to test 2000 children under the age of 13. What they've found out so far, through 1,401 parent surveys and 967 examinations of children has shocked everybody—more than 25% of the children in the community have asthma.

Asthma has reached epidemic proportions. Nationally, the rate has *doubled* in the last two decades. What's going on? Is it only here? Who is at greatest risk? What can we do?

What is asthma? It's a disease of the lining of the lungs, usually progressive (left untreated, it usually gets worse). Airways react to a variety of factors, including smoke, pollen, cold air, cockroach droppings, dust mites, exercise, and stress, to name a few, and become swollen so that air cannot move freely. Symptoms include coughing, wheezing (a whistling noise when breathing), chest tightness, and shortness of breath. In an asthma attack the body is attempting to fight off a threat (such as cigarette smoke) and working to clear airways by coughing.

Asthma attacks account for trips to the emergency room, missed school and work, inhibited participation in sports and other physical activity, and, at worst, death.

continud on p. 6



Bus in
Port-au-
Prince,
Haiti

Cultural Viewpoints: Serving Haitian Immigrant Families

Ann Pitkin Interviews Marjorie Momplaisir-Ellis, Supervisor at the CAMBA Home Visiting Program in Brooklyn, for the LINK

At CAMBA, the Church Avenue Merchants Block Association, about 25-30% of the families served in the Healthy Families Program are of Haitian origin.

The LINK: What would you like others to know about forming relationships with Haitian families?

Momplaisir-Ellis: People really appreciate being approached respectfully. And outreach has been difficult, probably due to the history. People want to know where the money for the program comes from, and when they hear there is some link with government, public funding, they become apprehensive.

continued p. 3

Inside this Issue

The Asthma Epidemic	1, 6
Updates From OCFS	2
Cultural Viewpoints: Haiti	3
Spotlight on Buffalo	4
The Milky Way: Breastfeeding & Asthma	7
The Parent Helpline	8



HFNY Goals

- ♦ To systematically identify overburdened families in need of support
- ♦ To promote positive parent-child interaction
- ♦ To ensure optimal prenatal care and promote healthy childhood growth and development
- ♦ To enhance family functioning by building trusting relationships, problem-solving skills and support systems

The Link is published quarterly as a joint venture of Prevent Child Abuse New York and the New York State Office of Children and Family Services

Ann Pitkin

Editor, Director of Training
Prevent Child Abuse New York

Joy Griffith

Program Coordinator
Office of Children and
Family Services

Christine Deyss

Executive Director
Prevent Child Abuse New York

Louise Henrie

Graphic Design, Editorial Support
Prevent Child Abuse New York

HFNY, PCANY

134 South Swan St.,
Albany, NY 12210
518-445-1273 1-800-CHILDREN
cdeyss@preventchildabuseny.org

HFNY, NYS OCFS, DDPS

52 Washington St. 3N
Rensselaer, NY 12144-2796
518-474-3166

Joy.Griffith@dfa.state.ny.us

SEND SUBMISSIONS TO:

apitkin@preventchildabuseny.org

Updates From OCFS

Joy Griffith

Program Coordinator, New York State
Office of Children and Family Services

Hello everyone, we hope that you are having a wonderful summer!

HFA Credentialing

As you may be aware, Healthy Families New York is participating in credentialing through Healthy Families America of Prevent Child Abuse America. Eleven HFA sites started prior to 1997 developed comprehensive self-assessments of program operations based on the Healthy Families Critical Elements. These were submitted to HFA for review. Seven programs were selected for on-site reviews.

OCFS with Rockefeller College and Prevent Child Abuse New York went through a similar process, in which peers reviewed our capacity to provide support for HFNY sites. The administrative team, along with the visited sites, have received preliminary reports. While the reports were very positive, each indicates areas for improvement. Each of the sites and OCFS with our partners needs to respond in detail, producing additional evidence of compliance. This response and the preliminary report will be presented to a panel that decides whether the HFNY multi-site system and the individual sites should receive the HFA credential. We anticipate that the panel will review our responses in December and make a decision. All the participating sites should be commended for their diligent efforts in this process.

Safe Babies Month

OCFS with the State Health Department and Prevent Child Abuse New York is sponsoring an event at Crossgates Mall in Albany on September 20th from 10 am to 4 pm to celebrate September, which is Safe Babies Month. The event will include displays by state and local agencies, including the local Healthy Families New York sites and Family Resource Centers. There will be activities to attract parents:

- ∞ a baby crawling contest
- ∞ diaper changing contest
- ∞ art contest
- ∞ face painting
- ∞ car seat demonstrations

Please come and join us. We also encourage you to host an event in your community during September to recognize Safe Babies Month.

Site News

Welcome to two new Program Managers!

Michael O'Neill of Rensselaer County Healthy Kids Program and **AnnMarie Correa** of the Buffalo Home Visiting Program are our newest Program Managers. (See *AnnMarie's adventures* on page 4.)

Lisa White, Program Manager, South Bronx Healthy Families, and **Chris Cagnetta**, Supervisor, Healthy Families Staten Island, were featured in a teleconference presented by OCFS for mandated reporters.

The South Bronx Healthy Families program was featured in a PBS special on raising healthy children.

The Bureau of Program and Community Development of OCFS presented a workshop at the **New York Public Welfare Association summer conference**. The workshop, entitled, "Less is More: Maximizing Resources in Services for Youth & Families," highlighted a number of county program development initiatives. **Pam Guth**, **Program Manager for Building Brighter Futures for Broome**, talked about the Healthy Families program and Broome County's comprehensive plan for 0-6 that focuses on three Early Childhood goals: effective parenting, healthy children, and quality child care/early education.

On September 22-24th, the Child Welfare League of America (CWLA) with the State University of New York at Albany are hosting a symposium on "Building Communities for 21st Century Child Welfare." **The Broome County** initiative and the **Best Beginnings** program in Washington Heights will highlight their collaborative efforts during a workshop on September 23rd at the conference. For more information, visit the CWLA website at www.cwla.org/conferences.



Cultural Viewpoints:

Serving Haitian Immigrant Families

continued from p. 1

Historical background

Haiti, which shares the mountainous island of Hispaniola with the Dominican Republic, was visited by Columbus in 1492 and became a French colony in the middle of the 1600's. The French brought great numbers of slaves from West Africa to work on plantations of cocoa, cotton, sugar cane and coffee. Production on the plantations flourished, but treatment of slaves was harsh, building up bitter resentment that culminated in a bloody slave rebellion in 1804. The French were overthrown and former slaves became rulers. A series of revolutions, assassinations, and chaos followed. The island was divided into its two present countries, Haiti and the Dominican Republic, in 1844, but Haiti continued in a state of near anarchy for nearly a century. In 1957, Francois Duvalier, "Papa Doc," declared himself "president for life." Duvalier and his enforcers, the Tontons Macoutes, ruled by fear and terror. He was succeeded by his son, Jean-Claude Duvalier, "Baby Doc," who also relied on the deadly Tontons Macoutes. He was forced from power in 1986 and exiled to France. In 1990, a priest, Jean Bertrand Aristide, from the slums of Port-au-Prince, was elected by 67% of the people. He was seen as the first leader of the people since 1804, but was deposed in a military coup just one year later. Today Haiti is still struggling with issues of wealth alongside crushing poverty, illiteracy, and a history of violence.

Culturally Haiti is a mix of African and French influences. French is taught in the schools, where those who attend receive an excellent education. However, Creole, not French, is the main spoken language. Creole had no written form until about 20 years ago. Most written materials are still in French. The country has many talented artists—painters, sculptors, writers, and musicians—with styles that are uniquely Haitian. Catholicism and voodoo (brought to the island from Africa) co-exist, blend, and contradict each other in this complex and rich culture.

The LINK: Government to Haitian immigrants might mean something you should be afraid of?

Momplaisir-Ellis: Yes. Something dangerous. There are often fears about immigration status too. People tend to be very proud. They don't want help or public assistance. Sometimes we can be successful in getting someone to apply for assistance or go to a food bank if we remind them, "It can just be temporary." They want to know, "Am I accepting a handout? Are you saying that I can't provide for my family?" The goal for most is to come to this new country to work hard and make a better life for themselves and their families.

The LINK: What has been most important in outreach to Haitian families?

Momplaisir-Ellis: We really needed to find Haitian staff who were comfortable standing in the streets and approaching people—strangers—to talk about the program and to ask if they knew anyone who was expecting a baby. Going to clinics and handing out materials was not enough.

The LINK: What would you say are the main coping skills that have helped immigrants from Haiti adapt to life in New York City?

Momplaisir-Ellis: I would have to say family. Your family takes care of important things for you. You don't have to ask. People who come here and get a job send for relatives as soon as they can. Some of the rooms and apartments we visit are very crowded with up to ten people in a room. Religion is important too. Many are Catholic. Prayer and frequent attendance at Mass is important to a lot of the people we see.

Here at CAMBA some of the Haitian parents who receive home visits don't have relatives here. They are isolated and alone. One

mother went back to Haiti recently to marry her baby's father. He wasn't able to come here with her.

The LINK: I'm wondering about the use of curriculum in home visits and the absence of materials in French or Creole. How do staff handle that?

Momplaisir-Ellis: It's really a problem. Obviously staff have to translate on the spot frequently during visits. We've been in contact with some programs in Florida where there is also a large Haitian population. They've provided some leads to health-related materials in French from a clinic in the Miami area. Quebec may be another source of French materials for us.

Not all the families we work with will be able to read these materials because they aren't all able to read. Some materials have been appearing in Creole, but few people are accustomed to reading Creole. Even for people who speak it daily, reading it can be difficult. Creole materials don't help, obviously, for people who can't read any language.

The LINK: I know outreach to Haitian families was difficult in the first couple of years. How's that been going?

Momplaisir-Ellis: Better. We're learning. We still have a way to go. Lately we've been trying to build relationships with some of the street vendors on Church Avenue. These people tend to be older. They might sell things such as herbs and spices. Many probably can't read, so we're not handing them flyers about Healthy Families, but we are talking with them, explaining what we do, and asking if they know anyone who's expecting. They are likely to know, because people use herbs during and after pregnancy.

Herbal Bath for Mothers: Families Caring for Their Own, A Haitian Tradition

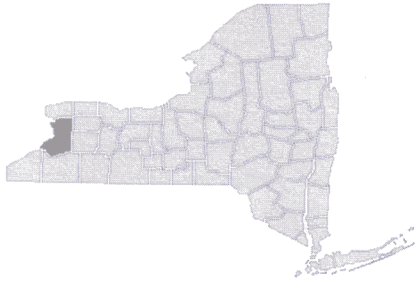
When a baby is expected in a Haitian family, an older woman, typically one of the grandmothers, makes sure well in advance that she has access to certain herbs for the expectant mother.

After the baby is born, the mother gets three baths infused with herbs. With each bath she is also given a cup of tea made from the same herbs. The baths are given on three separate days and are said to help the mother's uterus finish contracting in order to expel any material left from the birth.

For the final bath, a piece of fabric such as a sheet is put over the mom and the tub so that she can inhale steam from the bath.



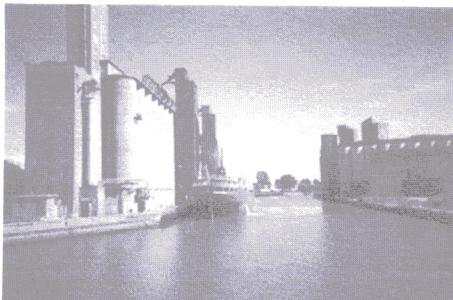
SPOTLIGHT City of Buffalo



Buffalo is a Great Lakes city, situated on Lake Erie and on the Niagara River. It grew from a small outpost to a boomtown when the Erie Canal was completed in 1825. The Erie Canal, which runs from Albany to Buffalo, linked the Great Lakes with the Atlantic Ocean, via the Hudson River. Shipping became a major component in Buffalo's economy.

Today, like many other cities in the East, Midwest, and around the Great Lakes, Buffalo is in something of a post-industrial slump. Much of the manufacturing and industry, particularly steel, aircraft and automobile manufacturing, that made the city prosperous in the early part of the 20th century has now closed down or gone elsewhere.

But Buffalo remains a vibrant, varied city, much beloved by those who live there or have ever lived there. With a population of about 300,000, the city has at least 5 million Bills Fans. (Demographers are still trying to figure out how this is possible!)



Grain Elevators

Famous Buffalonians

President Millard Fillmore

Ani DiFranco, musician

William George Fargo, a founder of Wells Fargo, president of American Express, city mayor

Grover Washington Jr., jazz musician

President Grover Cleveland

As The Buffalo Home Visiting Program Turns...

AnnMarie Correa
Program Manager
Buffalo Home Visiting Program

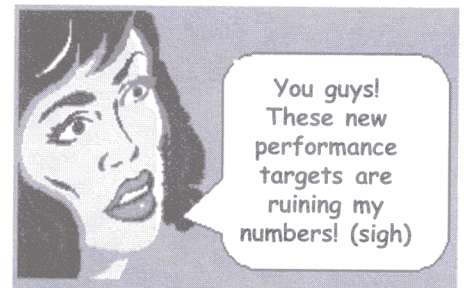
Picture it! Buffalo, in the frozen tundra of the North (or as we Buffalonians fantasize during summer, the Florida of the North), home of the Beef on Weck, chicken wings and the Home Visiting Program.

Yes! The Buffalo Home Visiting Program has nurtured many stars such as: Daisy Carrero, Family Assessment Worker and FAW Trainer; Ada Miller, State Quality Assurance consultant and Supervisor; Patricia Bobo, Training Supervisor; Maggie Weick, Anabel Diaz, and Antonia Medrano-Bouldin, supervisors extraordinaire; and AnnMarie Correa, Program Manager and HFA Peer Reviewer. We also feature a fabulous group of FSWs, assessment workers and support staff. This program has a wonderful cast of characters (and I do mean characters).

At this point you may be asking yourselves: what have our heroines been doing lately? In July of 2002 the program honored its graduates with an awards ceremony. Also in July, the program hosted its 8th Annual Participant Day, where families enjoyed games, crafts and a magic show. In December of 2002, the program capped off the year with its first annual Celebration of Families, in which the program celebrated the diversity of the families we serve. Families participated in raffles and creative activities at this event.

In 2003, we find our heroines battling the perils of a peer review. After the excruciating process of putting together a self-assessment, our heroines were lucky enough to be chosen for a site visit (you can imagine the excitement!). After three days of peer reviewers fine-tooth-combing every aspect of the program, our heroines learned that their service delivery was very strong and that the areas for needed improvement are workable. Of course it will take them the rest of the year to recover. (AnnMarie is currently seeing a doctor for Post Traumatic Stress Disorder!) But they found the process both educational and self-affirming.

Well, that's all for this episode of "As the Buffalo Home Visiting Program Turns"! Please tune in next time when AnnMarie will tell John & Jeff:



Buffalo Highlights

- ∞ A park system designed by Frederick Law Olmsted, the landscape architect who designed Central Park and Brooklyn's Prospect Park
- ∞ Numerous architectural treasures, including:
 - Five buildings by Frank Lloyd Wright
 - A magnificent Art Deco City Hall skyscraper
 - Buildings by Louis Sullivan, McKim, Meade and White, and H.H. Richardson
- ∞ A Zoo and Botanical Gardens
- ∞ The Buffalo Philharmonic
- ∞ The beautiful Albright-Knox Gallery, housing a major modern art collection
- ∞ One of the world largest collections of grain elevators—massive concrete structures for storing grain shipped in over Great Lakes shipping routes.
- ∞ Did you know? President William McKinley was shot here in 1901 while visiting the Pan-American Exposition and died 8 days later. Teddy Roosevelt, the Vice-President, was sworn in at the Delaware Avenue home of a friend. Today that house is a National Historic site, located next door to the Buffalo Home Visiting Program.

Two families receiving services through Buffalo Home Visiting

"Tanya," who had full-blown sickle cell anemia, came into our program prenatally in desperate need of services. At intake she had no income and was living in substandard housing. Through the assistance of her Family Support Worker, Claribel, Tanya was able to get on public assistance (Claribel arranged to have the Department of Social Services worker come to the home because Tanya was too sick to go to their offices). Claribel helped Tanya to find better housing.

Tanya is so ill that she cannot use her legs and must walk on her knees. She lives with daily pain and has found that the help she has received from Claribel has made all the difference. The baby is now two years old. Because of a learning disability, he is enrolled in a special education center, where he takes part in an Early Intervention Program. Recently during a phone survey conducted by Claribel's supervisor, Ada, Tanya stated, "If it wasn't for Claribel and the program, my child would be in foster care. Claribel has assisted me to cope with my pain and still be a good parent."



A participating family at Buffalo Home Visiting's 2002 Family Day!

Lisa Santana (right) with a participating family, in front of a backdrop hand painted by Office Manager Marilyn Colon of Buffalo Home Visiting



"Rosa" came into the program prenatally in May 1999. She gave birth to her daughter shortly after enrollment. At that time she was struggling to care for her six children. Rosa then lost her Section 8 housing assistance and found herself homeless with her children. Also during this period the baby's father was denying responsibility for the children, saying all but one were not his. Rosa had only limited financial resources as she was unemployed and had to rely on public assistance. At times she felt like giving up and leaving her children. Lisa, her FSW, would help Rosa keep going with lots of listening. By focusing on what was most important, her children, Rosa was able to continue. Lisa assisted by taking Rosa to various family members' homes to stay temporarily and to look at apartments. Lisa also helped Rosa look for a job.

Today, Rosa is working, has a nice apartment, a car, and is receiving child support for her children from their dad. She is very happy with all the support she received during this difficult period in her life and plans to stay in the program until her daughter turns five. Through Lisa's persistence and tireless efforts, Rosa was able to achieve what once seemed unattainable.



Check out the strength-based glasses! July FSW Core Training, Schenectady
Left to right, front row: Naomi Lis, Laura Wilder, Joanna Sanchez, Dora Murillo
Second row: Irene Willett, Loida Jimenez, Paulette Newton, Claudia Aldarondo, Kristie Westerman, Sobeira Guillen, Rosemaire Garcia
Third row: Lucy Newman, Tilcia Davis, Syreeta Garbarini, Renita Zayas, Nathlyn Smith-Savage, Michelle Pompey, Christy Roche

Sobeira Guillen's training debut for PCANY, July 2003



The Asthma Epidemic

continued from page 1

The U.S. is not alone in this. The numbers show that one out of four Australian children has asthma and many South American countries now have childhood asthma rates of 20%. The journal *Environmental Health Perspectives* reported in the September 2002 issue that it appears "people in developed countries are more affected than those in poorer nations."

So what causes asthma? Good question, according to medical and environmental health professionals. No one has been able to isolate a single cause, but researchers, health care practitioners, and families who deal with asthma have made some observations about asthma triggers. Known triggers are:

- ∞ exposure to cold air
- ∞ smoke from cigarettes, woodstoves, kerosene heaters, among other sources
- ∞ diesel fumes
- ∞ mold and mildew
- ∞ cockroach droppings
- ∞ pollen
- ∞ pet and rodent dander—bits of skin mixed with the animal's sweat
- ∞ dust mites—microscopic insects that thrive in mattresses, pillows, stuffed animals, and upholstered furniture

Recently, researchers have recognized **the "stress connection."** They're wondering

how exposure to highly stressful situations like domestic violence, community violence, child maltreatment, and chronic stressors like social isolation, substandard living conditions, and mental illness affect the disease.

Who is most vulnerable to asthma? Heredity plays a part, and it seems that some groups are at greater risk. At greatest risk are children, especially those living in poor urban areas in substandard housing. The National Institutes of Health report that between 1980 and 1994 asthma rose 74% in kids five to fourteen years of age. The rate of hospitalization for African-Americans is believed to be nearly triple that of whites. The same ratio has been observed in asthma-related deaths.

Poverty is likely a factor in higher asthma rates. It can cause a chaotic lifestyle, contribute to difficulty getting established with a "medical home," and may create life experiences that make people distrustful of authority figures like health care providers. Overburdened families experience high levels of chronic stress from isolation, lack of financial support, and challenging personal histories.

Through the Harlem Children's Zone Asthma Initiative, affected children and families receive support through home visits and advocacy to get health insurance, medical care, help in understanding the diagnosis and the medications involved, help in replacing old, dusty and infested furniture and rugs, and help in getting landlords to make repairs to make the living environment safer. It's not perfect; families still live with elevated stress, and many lives are still chaotic, but the project is seeing improvement. More people are getting medical care and living in safer

housing. They've seen a drop in emergency room visits and school absenteeism, and, most importantly, happier, more active children.

So what can we do for the estimated 750 target children in HFNY programs who have asthma?

- ∞ Be informed
- ∞ Keep our eyes open for conditions in the home that put children at greater risk of an asthma attack
- ∞ Inform families about asthma and the simple things they can do to alleviate risk factors
- ∞ Support families in obtaining medical homes and health insurance
- ∞ Empower families to advocate for themselves with their landlords
- ∞ Know about smoking cessation programs in your community
- ∞ Use the tools of our trade (positive, strength-based communication, and the Individual Family Support Plan, for example) to support change.

For more information, try the following links:

National Asthma Education and Prevention Program, (301) 592-8573, www.nhlbi.nih.gov
Asthma and Allergy Foundation of America (AAFA), Toll-Free Hotline 1 800-7-ASTHMA, www.aafa.org

Read or listen to an interview with Harvard researcher Dr. Rosalind Wright and find further links, www.npr.org/display_pages/features/feature_984541.html



Louise Henrie, Fanny Otero, Jan Cohen and Susan Cain on a break from training visit Niagara Falls

Some Statistics on Asthma

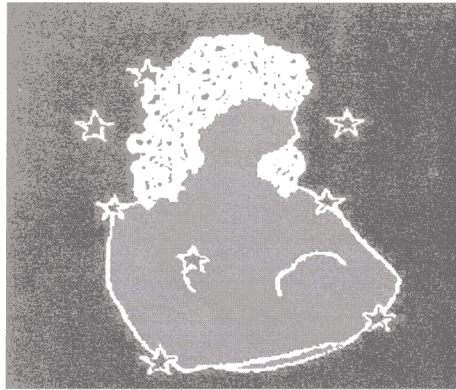
- ∞ 17 million Americans have asthma
- ∞ 5-6 million children under the age of 18 have asthma
- ∞ 14 Americans die each day from asthma—that's over 5000 people a year
- ∞ Since 1980 the death rate from asthma for children 19 and younger has risen 78%
- ∞ U.S. Children miss 10 million days of school per year due to asthma
- ∞ It is estimated that anywhere from 7-25% of children in the US have asthma
- ∞ With 3000 target children currently being served in HFNY programs, we are regularly seeing approximately 750 target children with asthma
- ∞ Asthma causes more than 1 million emergency room visits and more than 400,000 hospitalizations in the U. S. each year.

Current Research on Childhood Asthma

Dr. Rosalind Wright at Harvard Medical School is studying **the effects of stress on brain chemistry and asthma**. She observed that when parents feel worried and anxious, their children are affected too. Wright will be looking for correlations between stress levels, environmental components, genetic susceptibility and the incidence of asthma. She has begun a five-year study to track 1000 African-American, Hispanic, and Haitian mothers and their children living in the inner city.

Dr. Michael Rich at Children's Hospital Boston has begun sending patients home with **video cameras to record their thoughts, feelings, and day-to-day lives**. He has observed that in the clinic, parents and children want to give the "right" answers to the doctor's questions. The only problem is that these are not necessarily accurate answers. By working with the videotapes, the doctor, the patient, and the patient's family get valuable insight into the patient's illness and the environment in which he or she actually lives.

Think a germ-free house is the best way to conquer asthma and allergies? Think again. Research by Dr. Charlotte Braun-Fahrlander of the Institute of Social and Preventive Medicine in Basel, Switzerland has revealed that a certain level of exposure to, well, dirt, in infancy and childhood may actually help to build a stronger, healthier immune system. An article in the *New York Times* (September 19, 2002), reported on Dr. Braun-Fahrlander's research. She compared asthma and allergy rates of children raised on farms and those not raised on farms. She found less allergy-related asthma and hay fever among children raised on farms. The article's author also mentioned, however, that "more than 25 genes may play a role, and some families have such a strong genetic tendency to allergies...that not even living in a barn would protect them."



The Milky Way

Breastfeeding support in HFNY: Focus on Asthma Prevention

**RayzaDeLaCruz-Stitt, BSN, RN, MSN Nurse Educator,
Best Beginnings/Alianza Dominicana
Senior FSW Trainer, Prevent Child Abuse New York**

The Need For Breastfeeding Promotion—A Public Health Issue

The need for breastfeeding support and promotion has become a major public health issue in our country.

Breast milk is a natural resource, and breastfeeding a basic health-seeking behavior in human beings. Yet, social practices have led to a decrease in breastfeeding in our country and the world over.

Recognizing that breastfeeding has a major role in keeping babies healthy, Healthy People 2010 has set a target of 75% breastfeeding rate in the early postpartum period, and 50% for continued breastfeeding to six months. In a society where bottle-feeding has become the norm, support programs for families are necessary to help meet these targets.

Breastfeeding Boosts Babies' Respiratory System, And Can Help Prevent Asthma

The American Academy of Pediatrics cites many benefits to breastfeeding. These include immunologic benefits and protection against lower respiratory infections and allergic diseases.¹ Researchers concluded that a longer duration of breastfeeding appears to protect children against developing wheezing and asthma.²

Tips And Information For FSW's

Breastfeeding has long been associated with protection against respiratory illness.

Research shows that breastfeeding can protect children against the development of childhood asthma.

Protection against asthma is improved with duration of breastfeeding. The AAP recommends six months of exclusive breastfeeding, and breastfeeding with supplements well into the second year of life.

Workers can inform participants that many health care professionals encourage families with a history of asthma to breastfeed their babies.

Always provide information about the very few contraindications to breastfeeding. Any family that is told that a contraindication exists for breastfeeding should consult a Lactation Consultant. The Consultant is in the best position to determine if there is a true contraindication, or if there is misinformation regarding the family's ability to breastfeed.

Mothers who are asthma patients can continue to take a selected number of medications to control their asthma, and breastfeed their babies without adverse effects. Examples of these medications are Flovent and Proventil. Mothers who are taking long-acting antihistamines, such as Claritin, for allergic reactions can ask their physicians for shorter-acting medications, which may transfer to breast milk at lower levels.

1. American Academy of Pediatrics, Pediatrics, 1997; Vol. 100 #6, 1035-1039.

2. Dell and To, Archives of Pediatric Adolescent Medicine 2001;155:1261-1265.



The Parent Helpline: 24-7 Information for Program Staff & Parents

Did you know that YOU can call the Helpline for services, as well as refer your participants?

The Prevention Information Resource Center (PIRC), a program of Prevent Child Abuse New York, established the Parent Helpline in 1992. It is the only 24-hour, toll-free phone service that assists families from every part of New York State, in both English and Spanish.

The Parent Helpline provides a lifeline for parents who are searching for support and services and dealing with family problems and crises. Staff and trained volunteers listen carefully to callers' concerns, help them explore possible courses of action, provide them with needed information, and connect them with local sources of assistance. They help callers improve their parenting practices and solve problems. They also help callers figure out what they can do to intervene in abusive situations.

The PIRC Parent Helpline is managed by Coordinator Helen Winder-Marshall, who has worked for the program for seven years. Helen is a Certified Resource Specialist and member of the Alliance of Information and Referral Services. The newest member of the staff is Rodes Reyes, who began working on the Helpline in mid-July. Rodes previously worked at the HFNY Albany site, Bright Beginnings, in both Family Support Worker and Family Assessment Worker positions.



Parenting –

Sometimes it's great!

Sometimes it's tough.

That's why we offer a free

Parent Helpline

1-800-342-PIRC (7472)

Listening to your concerns.

Referrals- finding the help you need.

Information- brochures about the things parents deal with, toilet training to discipline to teens.

Anywhere in New York State

24 hours a day, toll free

Confidential

Se Habla Español



Parenting help by phone



A program of PCANY



Prevent Child Abuse
New York, Inc.
134 South Swan Street
Albany, NY 12210-1715



**Prevent Child Abuse
New York**

Nonprofit Org.
U. S. Postage

PAID

Albany, NY
Permit No. 785